

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

STARRED QUESTION NO:324

ANSWERED ON:18.08.2004

ERADICATION OF AIDS

Adhalrao Patil Shri Shivaji;Purandeswari Smt. Daggubati

**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

- (a) whether the Government is aware that AIDS affects nearly 1-7 million people in the country;
- (b) if so, whether any specific steps to achieve zero level growth of HIV/AIDS have been proposed by the Government in the budget for 2004-05;
- (c) if so, the details thereof;
- (d) the details of the financial assistance being received from foreign agencies, World Bank and WHO for the above purpose;
- (e) whether any contract has been signed by the Government with any foreign company for AIDS medicine;
- (f) if so, the details thereof;
- (g) the mechanism adopted to monitor and check the proper use of the aids by NGOs and other agencies in the field of AIDS awareness programmes; and
- (h) the action plan taken/being taken to combat the AIDS?

**Answer**

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS)

(a)to(h): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 324 FOR 18TH AUGUST, 2004

Government has, over the years, institutionalized an annual HIV sentinel surveillance survey to track and monitor trends in the growth of HIV infection in specific high risk groups as well as general population.

The HIV Sentinel Surveillance Round 2003 has estimated 5.1 million HIV infections in the country.

Government directs and coordinates implementation of a comprehensive national AIDS prevention and control programme as a 100 per cent centrally sponsored scheme across all states and union territories in the country. The First National AIDS Control Project was implemented from 1992-1999, and the current Second National AIDS Control Project is being implemented from 1999 to 2006. Government adopted a National AIDS Prevention and Control Policy in 2002, which envisages that we achieve zero level growth of HIV/AIDS in the country by 2007. Government adopted a National Blood Policy in 2002, followed by a detailed Action Plan on Blood Safety in 2003.

The objectives of the Second National AIDS Control Project are:

- (i) to reduce the rate of growth of HIV infection in India; and
- (ii) to strengthen India's capacity to respond to HIV/AIDS.

The National AIDS Control Programme has a basket of operational strategies for prevention of HIV, coupled with strategies for the care, treatment and support of people living with HIV. Our interventions on prevention focus on :

- Preventive Interventions for high-risk population through behaviour change communication, counseling and testing, condom promotion, and referrals for treatment of sexually transmitted infections. These are implemented through targeted interventions at high risk sites, through an enabling environment fostered through awareness generation, and inter-personal communication;
- Preventive Interventions for general population through dissemination of information, education and communication across all segments, programmes on safe blood, services for voluntary testing and counseling, reaching out to adolescents and young adults through the School AIDS Education Programme and the University Talk AIDS Programme and awareness generation among out of school youth through the Nehru Yuva Kendras;

- Interventions for low cost care and support through community care centers, installation of services in ante-natal clinics that prevent HIV transmission from the HIV positive mother to newborn infants, commonly known as prevention of parent to child transmission, managing the HIV-TB co-infection, treating people living with HIV/AIDS for opportunistic infections, and protecting health care providers with post-exposure prophylaxis;
- We have recently expanded the agenda on care and support of people living with AIDS (PLHAs) and introduced anti-retroviral treatment across six high prevalence states (Tamil Nadu, Andhra Pradesh, Karnataka, Maharashtra, Manipur and Nagaland) in 8 designated government hospitals. From August, 2004, onwards and during the current financial year, we will expand the designated government hospitals from 8 to 25. We will include government hospitals in moderate HIV prevalence states and low prevalence states.

Anti-retroviral treatment for People Living with HIV/AIDS will help boost their immune systems and restore quality of life, which in turn, will enable them to resume an active life.

The National AIDS Control Programme supports the following interventions:

- 709 Voluntary Counseling and Testing Centers to provide access to people seeking voluntary HIV testing with pre and post test counseling.
- 273 sites in antenatal clinics for preventing HIV transmission from HIV positive mothers to their newborn infants.
- 1020 Blood Banks, one in each district of the country to ensure more widespread availability of clean blood and blood products.
- The School AIDS Education Programme, covering 60,000 schools across the country, reaches out to adolescents and young adults with information on HIV/AIDS.
- 738 STD clinics with medicines and consumables, to ensure early diagnosis, treatment and management of Sexually Transmitted Diseases.
- Management of `Opportunistic Infections` for people living with HIV/AIDS through financial support provided to the state AIDS control societies for onward disbursement to all major hospitals in every State / UT of the country.
- Inter-sectoral HIV prevention activities including workplace interventions
- Support for care and treatment in hospitals run by the Ministry of Railways, and the Employees State Insurance Corporation (ESIC) public-private partnerships.
- Building technical and managerial capacities for programme implementation through Surveillance, Training, Monitoring and Evaluation, operational research and programme management.

Government has not signed any contract for AIDS medicines with any foreign company. Medicines for opportunistic infection treatment and Anti retroviral drugs are bought from indigenous sources only.

A detailed monitoring and evaluation system has been built into the national AIDS control programme. A Computerised Management Information System and a Programme Finance Management System have been developed to ensure regular feedback from the NGOs through their respective State AIDS Control Societies to enable appropriate evaluation.

The accounts of the NGOs funded are further subject to audit by the Comptroller & Auditor General of India from time to time. External evaluation is carried out in respect of those NGOs who have been implementing the intervention programme for more than three years.

Additionally, regular visits are made by officers from NACO to high as well as low prevalence states to ensure effective implementation of the programme in various States.

A statement indicating details of the financial assistance being received from foreign organizations is annexed.

## ANNEXURE

### Statement on the financial assistance from foreign organisations

Funding Agency	Amount (In crores)	Period	Remarks
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World Bank	959.00	1999-2006	Amount as credit.
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DFID	487.40	2002-2007	Assistance as grant
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USAID assisted APAC Project 64.58 2002-2007 Assistance as grant  
in Tamil Nadu & Pondicherry

USAID assisted AVERT Project 166.00 2002-2007 Assistance as grant  
in Maharashtra

CIDA 37.81 2002-2007 Assistance as grant

AUSAID 24.65 2002-2007 Assistance as grant

UNDP 6.47 2002-2007 Assistance as grant

WHO  
WHO Country Budget Biennium 2004-05 0.5 2004-2005 Assistance as grant  
Global Fund for AIDS, TB & Malaria

GFATM (Round 2) (January 2003) 122.74 2004-2006 Awarded a financial grant of  
For prevention of transmission from Rs.480.38 crores for 5 years  
HIV positive mother to newborn infant (2004-2009)

GFATM Round 3 (October 2003) - - Awarded a financial grant of  
For accelerating management of the Rs.71.14 crores for 5 years  
HIV-YB Co-infection (2004-2009)

GFATM Round 4 - - Awarded a financial grant of  
June 2004 Rs.760.90 crores for 5 years.

For antiretroviral treatment for  
people living with AIDS, and  
implementing strategies for  
prevention of HIV among the general  
population