## GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

STARRED QUESTION NO:451 ANSWERED ON:26.04.2013 HIV AIDS PATIENTS Thomas Shri P. T.;Vijayan Shri A.K.S.

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

(a) whether people living with HIV/AIDS (PLHIV) have access to free life saving medicines and Anti-Retroviral Treatment (ART) in the country;

(b) if so, the details thereof and if not, the reasons therefor, State/UT-wise;

(c) whether the Government has taken any steps to meet the Sixth Millennium Development Goal (MDG-6) of the United Nations to halt and reverse the spread of HIV/AIDS by 2015;

(d) if so, the details thereof and the extent to which the said target has been achieved so far, State/UT-wise; and

(e) the measures taken/proposed by the Government to speed up creation of additional facilities for universal access to antiretroviral treatment and to spread awareness about HIV/AIDS, particularly among the patients not reporting for continuous treatment?

## Answer

## THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD)

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

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 451 FOR 26TH APRIL, 2013

(a)&(b): Yes Madam, people living with HIV/AIDS (PLHIV) have access to free life saving medicines and Anti-retroviral Treatment (ART) in the country. The ART is provided free of cost through a network of 400 ART centres and 840 Link ART Centres (LAC). Presently 6.32 lakh PLHIV are receiving free ART at these centres. The State/UT-wise details of these centres & patients on ART is at Annexure – I.

(c)&(d): The National AIDS Control Programme (NACP) has the goal to halt and reverse the epidemic in the country over the next 5 years by integrating programmes for prevention, care, support and treatment. This programme is implemented as a 100% centrally sponsored scheme. The programme has adopted a five-pronged strategy:

1. Intensifying and consolidating prevention services with a focus on HRG and vulnerable population.

2. Increasing access and promoting comprehensive care, support and The targets under MDG are being achieved by up-scaling treatment

3. Expanding IEC services for (a) general population and (b) high risk groups with a focus on behavior change and demand generation.

4. Building capacities at national, state and district levels

5. Strengthening and use of Strategic Information Management Systems

6. targeted interventions among the high risk groups, behaviour change communication for improved awareness, expanding, counseling and testing services, blood safety, support and treatment of HIV infected persons including the treatment of opportunistic infections, provision of anti-retroviral drugs and mainstreaming of HIV intervention strategies. The details of the achievements State/UT-wise are at Annexure – II.

(e) For ensuring universal access to ART, additional ART Centres/Link ART Centres are set up as per the Annual Action Plan (AAP) of each State based on need assessment. It is planned to set up a total of 600 ART centres in the country by year 2017.

Multimedia campaigns are planned on mass media supported by outdoor media such as hoardings, bus panels, information kiosks, folk performances and exhibition vans to create awareness on HIV/AIDS and promoting services/facilities across the country. Innovative means have also been used to spread awareness, such as the Red Ribbon Express train. At the interpersonal level, training and sensitization programmes for self-help Groups, Anganwadi workers, ASHA, members of Panchayati Raj Institutions and other key stakeholders are also planned to spread awareness about treatment and other facilitates. In addition, Vulnerabilities and treatment needs of High Risk Groups including Commercial Sex Workers (CSW), Men having Sex with Men (MSM), Injecting Drug Users (IDU) and also truck drivers and migrants are specifically addressed through behavior change communication programmes implemented as part of Targeted Intervention projects.