

“Bold initiatives for the Prevention and Control HIV/AIDS in Andhra Pradesh”

(A detailed write up on the “”¹ Campaign)
(Period from June 2006 to March 2008)

Back Ground:

Andhra Pradesh is one of the six high HIV prevalent states in the country and according to the estimates, has the largest number of People Living with HIV/AIDS (PLHAs). Out of the of the estimated 47 lakh PLHAs in India, 5.5 lakhs are in Andhra Pradesh.

Reasons for high incidence of HIV in Andhra Pradesh: With its vast network of National Highways and Railway lines, high incidence of trafficking of women to sex work, prevalence of communities engaging in sex work as a tradition, relatively higher tolerance to sexual promiscuity in certain areas of the state and presence of very large number of migrating labor etc, the risk of rapid spread of HIV/AIDS in Andhra Pradesh was very high.

Difficulty in controlling HIV/AIDS:

Unprotected sex with infected persons is the cause of over 92% infections. But sex and sexuality are very personal issues having moralistic overtones. The complex nature and very high level of stigma associated of the disease, dogged reluctance of medical fraternity to treat those infected with HIV and absence of any major medical breakthrough in its treatment escalate the fear-factor about the disease.

Stigma associated with HIV/AIDS is another major factor for not being able to contain its spread. Infected persons and their families are discriminated many times denying them basic human dignity. Doctors refuse to treat HIV infected patients. In some areas, villagers prevent cremation of dead bodies of HIV infected persons even in their village outskirts. Hence infected people were reluctant to come into open, leading to silent spread of the virus.

Reportedly, only 13% of those infected are aware of their HIV status. This is because of the stigma associated even with the HIV tests. The remaining 87% are unknowingly spreading the virus. HIV, though can be infecting anybody irrespective of class or creed, got associated initially with homosexuals and then with people with high risk behaviors. This stigmatized the HIV so badly that the “not-me” attitude of people made them reluctant to even talk about it.


These make fight against HIV very difficult.

¹ BeBold Campaign is considered by UNAIDS as one of the best interventions in the fight against HIV/AIDS and Mr G.Asok Kumar, the man behind this campaign was invited to make a presentation in the International AIDS Society’s Annual Conference in Mexico city in August 2008 and replicated in many African countries in their fight against HIV-AIDS . This campaign had resulted in significant reduction of stigma and discrimination against HIV+ve people and mother to child transmission in the state of Andhra Pradesh and increase in testing to know HIV status and off take of medicines and treatment and inturn in a perceivable reduction in overall incidence of HIV.

Be bold – to translate Awareness to Action

Over the years, many campaigns have been taken to generate awareness about HIV/AIDS among the people. Though the awareness level about the routes of the transmission of HIV etc is very high among the people, these campaigns could not bring about any major change in the behavior pattern of the people. There was a felt need for an initiative aimed to **“translate the awareness into action.”**

Sri Asok Kumar, IAS, during his tenure as Project Director of AP State AIDS Control Society (APSACS) from June 2006 to March 2008, came out with some


innovative initiatives under the **umbrella** of the year long **“”** campaign launched on **1st December 2006, World AIDS day. The campaign sought for** the control of the spread of HIV by focused efforts involving people and mainstreaming it; reduction of its associated stigma; and management/treatment of HIV infected people.

The preparatory phase of the campaign started from July 2006. In the next five months enabling environment was built up-- Government Orders for starting new centers to improve access were issued, required staff selected and given two weeks training, infra structure required were procured/made and put in place, messages field tested and meetings held with stake holders and officials of concerned departments. The main campaign was launched in the state on **1st December, 2006**. The year long campaign had many sub-campaigns and initiatives interwoven, focusing on main aspects of the different campaign messages, which revolve around the main “Be Bold” theme.

The campaign brought about **perceptible systemic changes in the way the issues related to HIV was handled; built up institutions and strengthened them for sustainability.** It brought together the affected community and empowered them. It mainstreamed the fight against HIV by closely involving PLHAs, people in high risk groups, political leadership and elected representatives-- making it as a people’s movement thereby considerably reducing the stigma. The 0/7 initiative under the campaign aimed at HIV free new generation by targeting HIV+ve pregnant mothers and their children after delivery. The Red Ribbon club formed in schools and colleges ensured the involvement of adolescents.

Sixteen months after the start of the campaign, statistics indicate a phenomenal increase in uptake of medical services and people on ART, significant reduction of new incidences – the ANC **prevalence has come down from 2% in 2005 to 0.88% in 2007 to less than 0.2%**, as per the latest **National Sentinel Survey** conducted by NACO and a perceptible reduction of stigma. There is a remarkable improvement in all relevant markers for HIV management and prevention.

The Campaigns/ Sub-campaigns/results:

- The **“”** Campaign” was launched with an aim to “translate awareness into action/(behavioral change); reduce stigma and discrimination against affected people; encourage them to utilize the health services provided; and to mainstream the fight against HIV involving Government departments, civil society, community and people.” It had many sub-campaigns and initiatives addressing all these issues and has general as well as targeted messages, which are non-judgmental and are positive in nature.. “Be Bold” was the message and “getting tested for HIV” was the medium.

- The Be Bold messages: The **general messages** include *Be Bold to talk about HIV/AIDS*; *Be Bold to get tested*; *Be Bold to accept the result of the testing*; *Be Bold to change the life style accordingly*- if one has tested HIV negative- continue the negativity by avoiding further any risk behaviors; if one was tested HIV +ve, be bold to be positive towards life; *Be Bold to call 1097* the toll free number to know more about HIV/AIDS.
- The **targeted messages** exhort Families to *Be Bold to take care* of HIV +ve family members; Doctors to *Be Bold to treat* HIV +ve patients; Teachers to *Be Bold to admit* HIV +ve children to their classes; Youth to *Be Bold to accept* HIV +ve peers as friends; Youth to *Be Bold to say NO to negative peer pressures* and not to fall prey for risky practices etc. Be bold messages can grow on like crystals suiting to various occasions like Women to *Be Bold to say NO to sex without condoms* or girls to *Be Bold to ask HIV status of their suitors/ bride-grooms* etc ..
- All these messages were aimed to reduce stigma associated with HIV/AIDS. **To reduce stigma the strategies adopted under the campaign were to** (a) *popularize HIV testing*, (b) *involve political leadership and people's representatives as participants in testing* and (c) *sensitize them about the issues related to PLHAs*, (d) *mainstream prevention programs involving many Government departments and people from all walks of life* (e) *scale up the health delivery services and make them available at the PHC level* (f) *increase awareness dispelling the doubts and myths associated with the disease, by using innovative IEC efforts/ media* (g) *use non-judgmental and non-stigmatizing messages, instead of the earlier messages with moralizing overtones*(h) *mobilize the PLHAs into networks and build their capacity to fight for dignity by organizing their meetings frequently and giving them training*.
- **HIV tests and stigma reduction:** According to Sri G. Asok Kumar, the man behind the Be-Bold campaign, **“Be Bold” was the message and “getting tested for HIV” was the medium.** There is high level of stigma associated with HIV tests also. But when more people take HIV tests, stigma associated with testing gets reduced; larger sampling size would help to assess the disease burden and its spread accurately and in turn help in proper allocation of funds. The spread of the virus will also be reduced as people tested positive would be more responsibly. WHO, in a strategy paper released in June 2007 on HIV/AIDS, has claimed that getting more and more people to test for HIV (provider initiated testing) is the best way to fight HIV/AIDS. It is estimated that only 13% of the HIV+ve people are aware about their positive status.
People hesitate to know their HIV status because of the stigma associated with testing and lack of awareness about care and support, medical services available for HIV+ve people. In the campaign, these fears were addressed before encouraging people to come forward for HIV tests.
- In the preparatory phase of the campaign, on 27th November, 2006 Chief Minister held the first *meeting of the newly formed state level committee on HIV/AIDS*. This secured co-operation from various departments of the Government. To improve access to testing centers, their number was increased from **286 to 677**, staff recruited, trained and positioned after creating necessary infrastructure.

- The campaign was launched on 1st December 2006. In the first week, AIDS awareness rallies and meetings were held under the chairmanship of Sarpanchs/ municipal chairpersons in all gram-panchayats/municipalities in the state to discuss the “Be Bold” messages. In all, 30,103 public meetings involving 50 lakh people were held. Mass HIV testing was promoted for people with high risk behavior, identified based on a self-assessment-questionnaire on vulnerability/risk factors for HIV. This questionnaire was published in local newspapers and freely distributed in villages and gram sabhas. A directory of services containing detailed lists and addresses of HIV testing centres, care and support centres, STD clinics etc. was also published to facilitate those needing medical help or counseling. (The number of people who got tested voluntarily in the first week of the campaign (December 1 to 7,2006) is appxly 70000--7 times more than the corresponding weekly average of 10,000 tests for the same period of 2005.)
- As a part of the campaign, political leaders and stars were requested to get tested to inspire others. Dr Y.S.Rajasekara Reddy, **Chief Minister** of the state, Mr. Suresh Reddy, Speaker of the AP State Legislative Assembly, 10 cabinet Ministers and 70 MLAs came forward to get tested on 18th December, 2006 to know their HIV Status. Earlier on 1st December,2006 Mr Rosiah, Minister for Finance and Health, Government of Andhra Pradesh(GoAP); Sri P.K.Aggarwal IAS, Principal Secretary, Health, Medical and Family Welfare, GoAP; Mr Swaranjeet Sen IPS, Director General of Police; Asok Kumar IAS, Project Director, APSACS etc got tested publicly.

All these inspired many people to come forward for HIV testing. The self risk assessment questionnaire was useful for screening people with risk behaviors and helped to cope up with the sudden surge in demand for testing. This broke the stigma associated with HIV tests in the state. During the campaign period, **18,09,117 people got tested and over 1.1 lakh HIV+ve people were identified** and sent for further treatment.

- During the first twelve months of the campaign from December, 2006 to November, 2007, **total HIV tests conducted** in the state were **15,32,952** as against **5,98,029** tests conducted during the twelve months of 2005-06.
- **Community Participation:** Established networks of HIV+ve people in all districts and on 2nd October, 2006 established its central office in Hyderabad. This helped in empowering the PLHAs and helped in coordinating HIV/AIDS related activities funded by various agencies and donors in the state.
- At the end of the first week of the Be-Bold campaign, a gathering of **3800** People Living with HIV/AIDS (PLHAs) was organized in Hyderabad on 7th December, 2006. This was reported to be one of the largest gatherings of PLHAs in the world. The gathering acted as big psychological morale booster to them. Many participants expressed that “when they left the meeting, they felt that ten more years were added to their sagging life”. At the end of the meeting they signed the “Hyderabad Declaration” delineating the roles and responsibilities of the PLHAS, Government and Civil society in the fight against HIV.

- On 7th December 2007, nearly **8000** PLHAs were brought together at Silparam, Hyderabad. This beat the earlier record of 3800 "PLHAs at one place" made last year at the same venue. The PLHAs re-dedicated their commitment to the Hyderabad Declaration. This meeting was addressed by Sri Oscar Fernandez, Minister for labor, Government of India and Convener of Parliamentary Forum on HIV/AIDS, Smt Panabaka Lekshmi, Minister for state for Health, GoI.
- Started the **“0/7 initiative”** to minimize HIV infections to new born children through vertical transmission and to achieve the ideal of **zero** infections by the end of 2007. Because of this initiative, the number of Mother-Baby pairs that received nevirapine in 2007 increased to 4957 as against 2800 in 2006.
- **Valentine’s Day Program**: Day 600 HIV positive couples gathered on Valentine Day, 14 Feb 2007 at Hyderabad, Vijayawada and Visakhapatnam and pledged to spread the message of true love and lead a life with hope. A few celebrity couples from film industry also participated in the program to show solidarity with them.
- **“UNDA MEE DAGARE?”** (hey ap ke paas?) sub-campaign, launched on 14 Feb 2007, aimed to spread the awareness of condom usage.
- **Involving Commercial Sex workers in the prevention drive**:2500 Commercial Sex Workers were brought together on International Women’s day -March 8, 2007 at Vijayawada. They took pledge for preventing new infections by taking assertive action. They pledged to that they would not coerce anybody or let any minor or trafficked victim into this profession; that they would not spread any diseases and always use condom. (the figures indicate that the STI and HIV cases among sex workers reduced significantly from 14.6 % to 8 % during the period)
- Revived the traditional **“Seemantam”** ceremony and started **“Well baby shows”** in all districts to improve the self esteem of HIV positive mothers and their children. Seemantam is a traditional ceremony of honoring a pregnant lady in her seventh month of pregnancy. This was done to give a feeling of “security and being wanted” to the young pregnant HIV+ve women, who used to earlier “feel rejected and let down” by the society and family, when they were tested HIV +ve at the Ante Natal Centers.
- A unique program **‘Balasahayoga’** was launched to cover 60,000 children and their families infected and affected with HIV/AIDS in the State to provide comprehensive package of services including psycho-social support, medical treatment, and livelihood promotion. This program, pledged with a funding of \$14.6 million by Elton John Foundation, is implemented through partners like Clinton Foundation, Family Health International, HIV/AIDS Alliance along with their consortium partners. This program was launched by **Chief Minister of Andhra Pradesh on 17th April, 2007.**
- Campaigns for the adolescent group were done through 15057 Red Ribbon clubs formed in schools and colleges.
- “A test drive” program was organized on 9th September, 2007 in which film stars and youth went around the Hussian Sagar on motor bikes to spread the message of

HIV testing. Smt Panapaka Lekshmi, Minister for state for Health, flagged off the rally. Mr Jackie Schroff and many Telugu film actors participated in it.

- On 1st December 2007 Three “Bold Doctors” were given awards by the Chief Minister at the state level World AIDS day function at Hyderabad. In the function 500 children made an appeal to the “elders through the CM to give them a HIV/AIDS free future”.

MAINSTREAMING:

- A State level committee with Hon’ble Chief Minister as chairman and Chief Secretary, Director General of Police and Secretaries of 16 Government departments as members was constituted vide GO Ms.No.1122 dated 23.08.2006. This is the only such committee in the country. First meeting was held on 27.11.2006. Second meeting was held on 7.1.2008. Many path-breaking decisions for mainstreaming the fight against HIV/AIDS were taken. This helped in active involvement and participation of many Government departments like Police, Medical and Health, Women and Child Welfare, Prisons, School Education, Collegiate Education, Transport, Labor, Social Welfare, Rural development, Urban Development etc in the fight against HIV.
- District Leprosy Officers (DLOs), who were hitherto informally looking after the AIDS related works in the districts were re-designated as Additional DM&HOs (AIDS & Leprosy) vide GO Ms.No.845, dated 02.12.2006 and made them formally responsible for all HIV/AIDS related activities in the district. This helped to mainstream HIV/AIDS services with Health Department and ensured the presence of SACS in every district.

The unstinted support extended by Sri P.K.Agarwal IAS, Principal Secretary, Health, Medical and Family Welfare department ensured the active involvement of Health department functionaries, doctors of Medical Colleges and other vertical programs like Revised National TB Control Programs (RNTCP).

- District Program Units: With the support of donors and funding partners, District Program Units consisting of a *District Program Manager (DPM)*, *ICTC co-coordinator*, *Nurse Supervisor*, *Data entry manager* were constituted in the 10 high prevalence districts to assist the Addl DMHO (AIDS and Leprosy) in managing and monitoring various HIV/AIDS programs in the district. These started functioning from 1st December 2006. These were the forerunners to the District AIDS Program Control Units, envisaged to be started from 1st April 2008 under NACO’s NACP-III program. Web based information gathering system was established which helped accurate and in time collection of data from the centers.
- Every month coordination meeting were held at the state and district level with the teams of TB prevention program to improve HIV-TB cross referrals. (number of referrals from HIV centers to TB centers improved from 21,959 in 2006 to 43,104 in 2007). Monthly coordination meetings were started at state level with various funding agencies and donors who were doing different interventions in HIV sector in the state. This helped to streamline and fill the gaps in activities of various players in the field, avoiding duplication and multiple reporting.

- Public Private Partnership: to get the private doctors involved in the treatment of HIV patients, APAIDSCON-a consortium of Private Medical colleges in the state was formed. They helped in involving the private medical colleges and its students the management of HIV patients. Enlisted the support of professional bodies like IMA, FOGSI and arranged training to sensitize their members on HIV management. 12000 doctors were sensitized with the help of Clinton Foundation.
- Chamber of Indian Industries(CII), Hyderabad chapter was made an active partner to sensitize the management and workers of industrial units. CII took active part and contributed financially for many programs.
- Truckers Interventions: With the help of transport department, tuckers and lorry owners associations were got involved in conducting intervention among truck drivers and workers. Two compulsory questions on HIV were introduced in test for renewal of professional driving license in the state.
- Adolescent Education Program: 8 periods of class sessions on HIV/AIDS were taken to all 9th and 10th standard students of 14202 schools in the state in November 2006 and 2007. Before this about 21,880 teachers were given training on the subject. 35 Teachers were given awards in the state level and 2 teachers at the national level for their work in this field. Nearly 20 lakh hand book- Frequently asked questions on HIV/AIDS- were printed and distributed among these students. Three compulsory questions on HIV/AIDS were introduced in the SSC exams. College AIDS Talk Program covered college students. 15057 Red Ribbon clubs were formed in these schools/colleges as nodal clubs to carry out AIDS awareness activities there.
- Targeted Intervention for High Risk Group people: Intensive drive was taken up with the help of partners and donor agencies like Bill and Melinda Gates Foundation (BMGF), CARE, Alliance India etc to contain and control the spread of the disease among the High Risk Group people like the Commercial Sex Workers (CSWs) and Men having Sex with Men (MSMs). CSWs were formed into community based organizations to empower themselves. They were given periodical medical check ups and STI treatments to prevent spread of diseases. Peer educators were trained to encourage the use of condoms among the sex workers. Peer educators were given identity cards signed by the Superintendents of Police (SPs) to avoid harassment by lower level policemen. Policemen were sensitized on the issues of the CSWs.
- Legislative Forum:
With the help of Speaker of the Legislative Assembly, a “Legislative forum” was formed with 60 MLAs and MLCs as members. Under its auspices, a joint session of the members of the Legislative Assembly and Legislative council was held on 19th November, 2007 in the Assembly hall to impress upon the members the need for their involvement in the fight against HIV and to help them understand the issues of the PLHAs. Assembly constituency level and district level meetings were also organized under the chairmanship of these MLAs for the elected representatives of the Panchayati Raj Institutions like the Zilla Parishad and the Mandal Parishad. A meeting of all Mayors of corporations and chairpersons of the

municipalities and Zilla Parishads in the state was held on 25th March, 2008 at the Assembly central hall to sensitize them about the issues related to HIV/AIDS and PLHAs. Meetings were also organized at the assembly conference/committee hall to discuss about the feasibility of a new legislation to make HIV testing compulsory before marriage etc. Training programs were organized to sensitize the Zilla Parishad chairpersons on HIV/AIDS related issues.

ACCESS TO HEALTH CARE

- The number of HIV testing centers in the state was scaled up from 286 to 575 vide GO Ms.Nos.233/234 dated 07.08.2006. They all have started functioning from 1st November, 2006. As on March 31, 2008 there are 677 testing centers functioning in the state. This increase in HIV testing centers established during the campaign improved the access to testing facility and significantly increased the number of people getting tested and in the reduction of stigma associated with the HIV tests.
- The number of Anti-Retroviral Therapy (ART) Centres was scaled up from 3 to 13 from 1st September, 2006 vide GO Ms.No.1165, dated 30.08.2006. 4 more centers were started in March, 2007. Vide GO Ms No dated 30.7.07 another 7 ART centers were sanctioned. As on 1 December 2007 there are 24 ART centers functioning in the state, one in every district.
- The number of persons registered for ART increased from 16,078 in March 2006 to 1,06,215 in March 2008. After checking the CD 4 count, the number of patients put on ART increased from 2287 in March 06 to 28,749 in March 2008. 40,536 CD4 tests conducted in the state in 2007 alone.
- Child-ART started in AP for children on 1st November, 2006. As on 31st March 2008 there were 1838 children on C-ART after screening 7863 infected children.
- “Bold Doctors Clubs” were formed in all districts to encourage doctors in the state to treat HIV+ve cases. These are clubs of Doctors- both from private and Government sector- who have been trained and are willing to treat HIV+ve patients. All necessary precautionary support, delivery kits and Post Exposure Prophylactic (PEP) drugs are provided to them by APSACS. This emboldened more and more HIV+ve patients to come out and access health care facility without fear of getting rejected.
- Under the 0/7 initiative, 729 Out Reach Workers (ORWs) were appointed from the PLHA community to cover all 80 Revenue divisions in the state to track and ensure assisted deliveries by identified HIV+ pregnant women. They were trained to ensure that the mother and baby is given “Nevirapine” to prevent the vertical transmission of virus from mother to child. They were given delivery kits, nevirapine tablets and syrups, addresses and phone numbers of emergency ambulances and “Bold Doctors” to facilitate institutional deliveries. Nearly 30,000 ANMs and other support staff and doctors were given special training on conducting deliveries of HIV +ve pregnant women and nevirapine administration.
- Training programs for Doctors- in all Hospitals with PPTCT centers and in PHCs- were taken up in the month of August 2007. Nearly 200 doctors of the medical colleges and AP Vaidya Vidhan Parishad underwent a rigorous 4 day technical training program on management of HIV/AIDS cases and 0/7 concept. Simultaneously nearly 2000 doctors of PHCs have undergone the training on 0/7 concepts and its management.

- A Pediatric center of excellence for treating HIV+ve children was started on 16 March, 2007 at the Nilofer Hospital, Hyderabad.
- Care and support centers: From 24 care and support centers in 2005, the number of such centers was increased to 95 by March 2008 including 3 centers, exclusively for children affected/infected. 85 STI clinics were also started.
- On August 15, 2007, Leprosy wards in 23 district hospitals were converted to temporary stay homes and care and support centers for HIV patients.
- HIV/TB co-infection: In every district, committees were formed to monitor monthly the cross referral of suspected cases between TB and HIV prevention programs. This has resulted in a very significant increase in the cross referrals.
- “AASHA Poshakaharam” was provided to all patients on ART from 1st December, 2006. This food was specially designed by the scientists at the National Institute of Nutrition to supplement the dietary requirement of PLHAs.
- Blood banks: Since blood is one of the routes of transmission of HIV, steps were taken to ensure pure and safe blood to people. Voluntary blood donations were encouraged and processes for renewal of licenses and establishment of new blood banks were streamlined. The quantity of blood collected in the state increased from 4.24 lakh units in 2004-05 to 6.57 lakh units in 2007-08. With the help of Satyam foundation, established a system to make available online real time information about the availability of various groups of blood in blood banks.

IEC INITIATIVES:

- The messages of the “Be Bold campaign” were simple, directed and non-judgmental and hence found good acceptability.
- Two cartoon characters, an ideal couple -“Aasayya and Aasakka”- were introduced as brand ambassadors to give correct messages.
- Used many innovative media for getting the messages across to the people:
- Ashayam- A 30 minutes tele-serial-based on issues of PLHAs was produced and broadcast on Doordarshan for 26 weeks.
- Ashala Harivillu- a 15 minutes daily capsule on HIV awareness was broadcasted on Rainbow FM radio for a period of one year.
- New media like Comic books, Kuthupudi Dance Ballets with HIV/AIDS theme, auto rickshaw tops, back side of bus tickets, sides of APSRTC busses, pillar boards, road medians were also used in addition to the traditional media like hoardings, newspaper/ magazines advertisements.
- Awareness books were brought out in Braille, Urdu and lambadi languages to include people of different sections in the campaign.
- Brought out monthly bulletin “Ashavani” in Telugu and once a quarter in English on the activities of APSACS to improve transparency.
- Posters were made with “a difference” making them attractive and eye catching.
- 1,00,000 AASHA Mitras-- grass-root level Volunteers selected from the DoWCRA Self Help Group members and Nehru Yuwak Kendras were given training to spread the messages about HIV/AIDS.


RESULTS

- **Prevalence of HIV** among general population has come down from 2% in 2005 to 0.88% in 2007 according to the National Sentinel Survey conducted annually by NACO. This could be attributed to the success of the bold campaign: which helped to identify more PLHAs & prevented inadvertent spread of disease by them, significant increase of condom usage among commercial sex workers, better access to health care facility, improved awareness and reduction of stigma .
- **Success of 0/7:** This initiative yielded very good results with ORWs tracking 7335 identified HIV+ve mothers and ensuring 5032 assisted live births, out of which 4957 mother-baby pairs were administered nevirapine. This is significantly high compared to the same figure of 2800 MB pairs in 2006.
- During the twelve months from December, 2006 – November, 2007, **total HIV tests conducted** was **15,32,952** as against **5,98,029** tests conducted during the twelve months of 2005-06. The total tests conducted during the campaign period (from 1st December, 2006 to 31st March, 2008) was **18,09,117**.
- Patients on ART increased from 2287 in Dec 2006 to 28,749 in March 2008.
- Bold doctors clubs made accessing medical facility comfortable and non-stigmatizing for the PLHAs and increased uptake of medical services by them.
- The campaign reduced the stigma associated with the disease and HIV testing considerably. Formation of positive networks, training programs and their mega get-togethers boosted their self esteem and confidence. Slowly the PLHA community is owning up and taking active part in the movement.
- Systems have now well established at the state and district level with the District Program Units monitoring and managing the program activities at the district level on their own. They check the accuracy of data and feed the data online to the web monitoring system and do data analysis at their level.
- Calls to 1097-the toll free help line- have increased from a monthly average of 1100 in December, 2006 to 8000 in January 2008. Queries now asked on Help Line are related to testing and services compared to general information earlier, showing increased awareness/confidence of people in dealing with the subject.
- Condom usage has gone up considerably during 2006-07. 34.2 lakh condoms were sold under social marketing compared to 7.4 lakh last year. 2 lakh female condoms were also marketed under social marketing on an experimental basis.
- Formation of SHGs of Commercial Sex Workers has empowered them with better bargaining power with customers on condom usage, against harassment by local gundas and brothel madams and policemen. This has provided them with a social safety net and better health and living conditions for them and their children. The incidence of STI and HIV among them has come down significantly.

*

http://in.youtube.com/watch?v=Y4j6iy8r_ZU and <http://www.apsacs.org> has more details on the subject.

Effects of the  Campaign

	2004-05	2005-06	2006-07	2007-08
				
HIV Testing Centres	147	286	600	677
Persons tested for HIV	4,20,047	5,98,029	11,15,016	13,50,749
Tests done after the launch of Be Bold campaign- ie from Dec 06 to Mar 08 – 18,09,117				
Care & Support Centres	24	38	45	95
New PLHA Registered (in C&S)	9,902	11,071	30,636	30,167
ART Centres (Cumulative)	3 (Apr.04)	3 (Apr.04)	12 (Sep.06) 17 (Mar.07)	24 (Sep.07)
- Patients Registered (Total)	3,558	16,078	42,639	1,06,215
- Patients on ART (Total)	966	3,075	10,600	28,749
Child ART (Cumulative)				
- Children Screened	0	0	3,487	7,863
- Children on ART	0	0	626	1,898
Red Ribbon Clubs formed	0	0	15,087	15,087

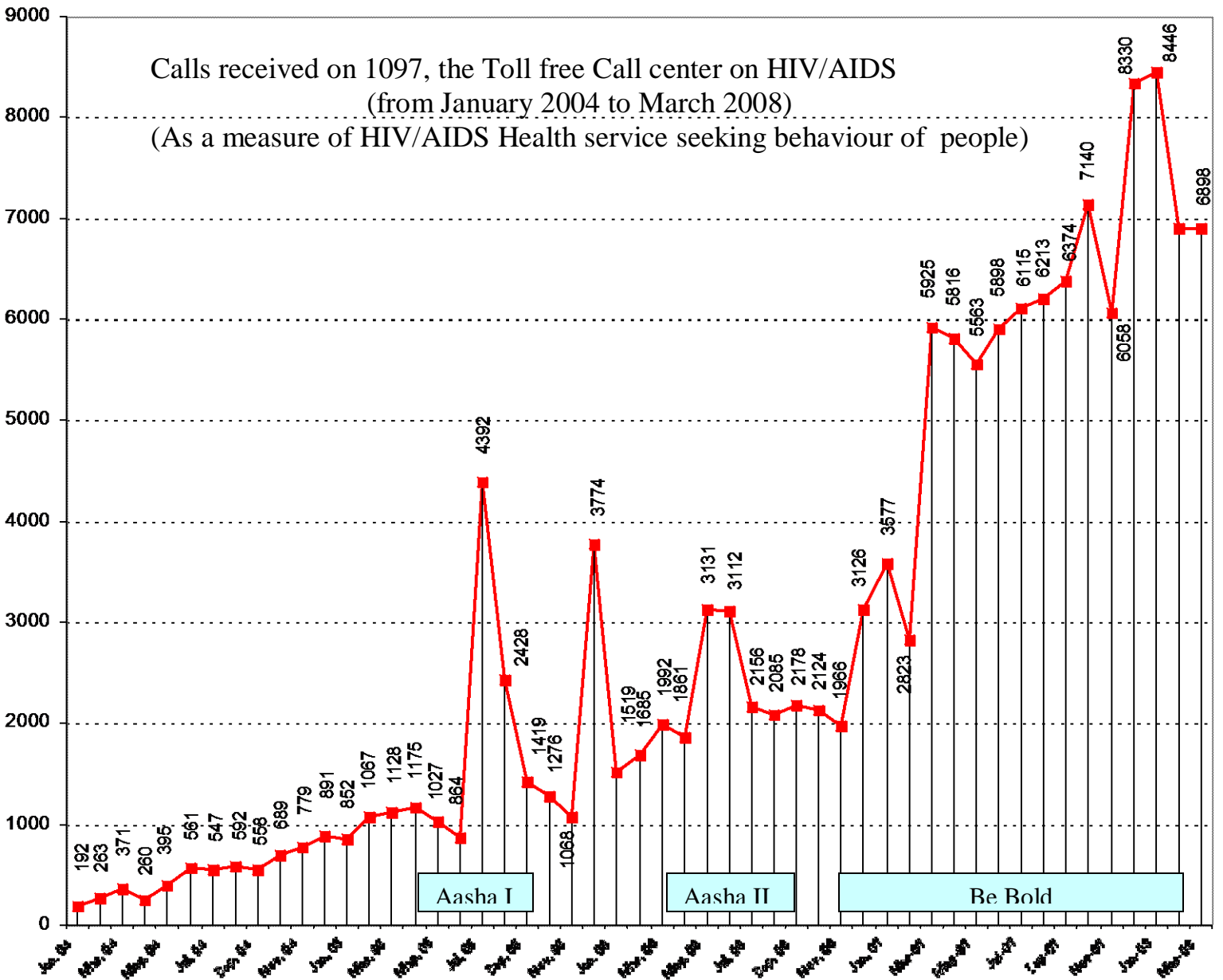
Impact:

Campaign reduced stigma associated with HIV/AIDS, vindicated by increase in HIV-tests and service uptake by identified-positives.

Year	HIV tests	HIV+ identified	ANC HIV prevalence	Live on ART on Dec 31	HIV to TB referrals/ found TB+	TB to HIV referrals/ found HIV+	HIV+ deliveries
2005	496,312	50,791	1.9	2,135	11450/4,777	9444/1,926	2228
2006 ²	925,381	72,576	1.4	6,468	21,959/5,006	16,240/2,465	2834
2007	1,542,809	100,857	0.8	25,021	43,104/9689	27,395/3,369	5032
1,666,397 tests done (107,417 HIV+ identified) in 13 months campaign from 1-12-2006							
1,331,952 tests done (127,514 HIV+ identified) in SIX years between 2000-2005.							

² Includes data of December 2006 also, which is part of Be Bold campaign period

Calls received on 1097, the Toll free Call center on HIV/AIDS
 (from January 2004 to March 2008)
 (As a measure of HIV/AIDS Health service seeking behaviour of people)



Control of the HIV/AIDS in AP Surveillance 2002 - 2007

