

# HIV/ AIDS – 2009

(January to December, 2009)

Compiled By  
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## **Man injects HIV+ blood in sister-in-law (3)**

GUNTUR: Infatuated with his 17-year-old sister-in-law who rejected his overtures, a man injected her with HIV positive blood and later attempted suicide, police said C D Prabhakar (30) was pestering his wife's sister, Lalitha to marry him but she rejected his proposal and so he tried to inject the HIV positive blood into her body when she was returning home alone yesterday evening here, police said. He later tried to commit suicide by consuming pesticide, they said. It was not immediately known how Prabhakar had managed to get the HIV positive blood, police said. Both were rushed to the Government General hospital here. Lalitha's blood has been sent for testing and Prabhakar's condition is said to be critical, they added. Cases under sections 308 (attempt to commit culpable homicide) and 309 (attempt to commit suicide) of the IPC have been registered against Prabhakar. (Times of India 2/1/09)

## **Community care centre for HIV/AIDS patients (3)**

COIMBATORE: Isha Foundation along with the Tamil Nadu State AIDS Control Society (TANSACS) recently opened a community care centre at Palladam for people living with HIV/AIDS. Inaugurating the centre, S.Vijayakumar, Project Director of TANSACS, urged HIV positive people to make use of the facilities offered at the centre. He said that the centre would benefit more than 2,000 people living with the disease. The centre would offer medical treatment as well as facilities for consultations on illnesses related to HIV/AIDS. Treatment of opportunistic infections would also be possible. The 10-bed ward for in-patient care would also act as a link to other Government and private hospitals, drop-in centres, clinics for sexually transmitted infection, family planning clinics, faith-based organisations and other service providers. Counselling services for patients on issues such as drug adherence, nutrition, use of contraceptives and positive living would be offered too. The other activities of the centre would include advocating against social stigma, helping those in need of legal support, offering vocational guidance, recreational activities and spiritual programmes. A team of doctors, nurses, trained counsellors and outreach workers had been appointed. (The Hindu 2/1/09)

## **AIDS-affected family awaits State Govt's Madhubabu pension (3)**

Bhubaneswar: They are the lesser mortals. Though they have been the victims of the dreaded AIDS, they are yet to get the Madhubabu pension offered by the State Government. Ramesh Mohanty's family in Balasore district, including his wife and two kids, have been detected AIDS victims. They belong to Balasore district. After death of his father, Ramesh moved to Kolkata looking for a job. He worked there for years before moving to Haryana in search of better opportunities leaving his wife Kamala in the village. He even worked in a reputed motorbike company. Meanwhile, his wife gave birth to a son and a daughter. Now, the son is nine years old, the daughter is six-year-old. Everything was normal until two months ago. As Ramesh's health deteriorated, he returned to the village. He was down with fever for a month. On being advised by the local people, he went to the Balasore district hospital for medical checkup. He was detected with the deadly AIDS virus. On the advice of the doctors, the family moved to the MKCG Medical College in Berhampur for another blood test. The family was shocked when the medical report pointed that not only Ramesh but other three members also tested HIV positive. There is no one to look after the poverty-stuck family except Ramesh mother Nayana. Director State AIDS Cell Parmeshwar Swain said he is aware of the plight of the family. "I have requested the District Collector of Balasore to pay pension of Rs 200 each to the members of the family. The family will get Rs 800 per

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\* This is a collection of previously published news and views from the print as well as the electronic media, whose reference marked at the end of each news items. Department of Documentation and Library (DDL) of the Indian Social Institute, New Delhi neither claims to the veracity of the facts in the news nor subscribes to the views expressed.

month as pension," Swain said, adding that the Chief District Medical Officer of Balasore has been directed to send a detailed report on the family to the State Government soon. (Pioneer 12/1/09)

### **HIV-affected can stake claim to share in property ' (3)**

VIJAYAWADA: Stating that the HIV affected people could fight for their rights including the right to live and their share in the ancestral property, members of the Cheyuta HIV Infected People Empowerment Society (CHES+) on Saturday announced that their organisation was ready to provide free legal assistance to the needy. At a seminar organised by the CHES+ at Press Club on 'Legal Literacy to the HIV People,' programme manager of the Telugu Network of People Living with HIV G. Jagadeesh Kumar said that the network was functioning with an objective to provide legal assistance to about 1.5 lakh HIV afflicted people in all the 23 districts. "In most of the cases, the victims are young widows, who have to take care of their infants. They are subjected to social boycott, following the death of their spouses and in many cases they are not getting their share in family properties," he said. Mr. Kumar said that a pilot project to provide legal assistance to the victims was launched by the network with the help of the United National Development Programme and the Andhra Pradesh AIDS Control Society. "So far, we have taken up 300 cases and rendered justice to the victims," he said. Secretary of the Vasavya Mahila Mandali G. Rashmi said that their organisation took up the issue of children of the HIV afflicted families. "Till 2006, attention was not paid towards the children of the HIV victims. With the help of Clinton Foundation, we have launched a programme for the benefit of the children and working to protect their rights," she explained. President of the CHES+ K. Renuka said that their organisation was working for the HIV positive people for the last six years. "Besides conducting health camps for them, we are conducting various training programmes for them and distributing them short-term loans," she said. With regard to filing of cases, she said that so far they registered 60 complaints in which 40 got solved through counselling and the remaining 20 got solved with the intervention of the court. (The Hindu 18/1/09)

### **New forum for HIV/AIDS victims (3)**

Tirupur: A new forum has come up in Tirupur to provide a platform for HIV/AIDS affected people to share their grievances and work out employment generation activities. Deputy Mayor K Senthil Kumar inaugurated the 'CHAHA parents' forum' (CHAHA is an acronym from Children affected by HIV/AIDS-health and happiness for all), which was constituted by Nature Medicare Charitable Trust (NMCT), a Non-Governmental Organisation based in Coimbatore, here on Saturday. V. Sundarapandian, co-ordinator, NMCT, said that the CHAHA parents' forums would function adopting a cluster-based approach to help HIV/AIDS affected adults as well as children at Tirupur, Palladam, Sulur, Avinashi and Sultanpet. "In these five clusters alone, about 275 children below 18 have been identified as HIV positive," he said. NMCT would convene meetings of HIV/AIDS affected people and the general community in the clusters to reiterate the need to provide livelihood, educational, health, and social support to carriers of HIV. At the inaugural, NMCT organized a 'samuthaya pongal' involving public and parents of HIV positive children. (The Hindu 19/1/09)

### **16. New Naco rules for HIV patients (3)**

Mumbai: The National Aids Control Organisation (Naco) has framed stringent guidelines for the selection of patients who will get free second-line drugs for HIV/Aids. The new guidelines, which came into effect from December 15, state that widows, children and those below the poverty line (BPL) will be given preference to qualify for second-line anti-retroviral treatment (ART). Second-line drugs cost the government about Rs8,000 per month per patient, as compared to Rs450 for first-line therapy. However, authorities at the ART centre of JJ Hospital, which caters to more than 8,000 patients and hundreds of new cases seeking second-line treatment, are doubtful about the feasibility of the new guidelines. "Scanning BPL cards and looking for their authenticity can be a little demanding in a medical set-up," said Dr Alaka Deshpande, head, ART centre, JJ Hospital. The new guidelines have also made it clear that only those who have been in the government ART programme for more than two years would be eligible for second-line treatment. "These steps are to restrict those coming from private set-ups after failing to adhere to the first line," said Dr BB Rewari, Naco's ART consultant. It is estimated that out of the 40,000 HIV patients on first-line drugs in Maharashtra, about 3-5% qualify for second-line treatment. Earlier, when second-line drugs were rolled out, the criteria set by Naco stated that patients whose CD4 count was below 100 for six months were eligible for viral load tests, and those who qualified would be put on second line drugs. DNA 19/1/09)

### **HIV-infected persons may get monthly imbursement shortly (3)**

PANAJI - The Minister for Social Welfare, Mr Ramkrishna Dhavalikar on Monday said that his department has cleared the proposal for monthly payment of Rs 1,000 under the Dayanand Social Security Scheme to HIV infected persons from Goa, and the same is now before the finance department for its approval. The department of social welfare has already decided that the directorate of health services would be the implementing agency for the payment of the sum to the HIV patients, he told The Navhind Times, adding that all the modalities for the same, including maintaining secrecy about the list of such beneficiaries, have been worked out by the DHS. Meanwhile, the project director of the Goa State AIDS Control Society, Dr Pradeep Padwal, speaking to this daily said that the scheme would not be open for each and every person infected with the HIV, but for only those HIV patients identified to be living under the below poverty line (BPL) and fulfilling the 15-year domicile clause, as regards their period of residence in the state. The DHS would be suggesting the beneficiaries as well as maintain their list, which would be highly confidential document, he maintained. The government has also taken a decision to set up two new community care centres for the HIV infected persons, and further invited proposals from the NGOs for the same. Presently, there are two such centres existing at Girvadem, in North Goa as well another one in South Goa. Speaking further, Dr Padwal said that the recently released report of the National Family Health Survey (NFHS-3) for Goa, which observed that though 94 per cent men and 86 per cent women in the state were familiar to the AIDS, fewer adults in Goa - both men and women - know how HIV is transmitted and how to keep away from acquiring it, did not exactly reflect the situation in the state. The report had also stated, Only 57 per cent of the men and 48 per cent of the women in Goa know that HIV/ AIDS can be prevented by using condoms consistently, further adding, Increasing HIV/ AIDS education will be a critical step to curb the number of new HIV cases in Goa. The NFHS-3 was a random sample survey, and though the WHO guidelines state that a random sample survey has lesser chances of being fallacious, the NFHS-3 does not present an exact picture of HIV/AIDS scenario in Goa, Dr Padwal stated, adding that persons belonging to floating population in Goa could have been a part of the sample survey. (Navhind Times 20/1/09)

### **Man kills wife, kids fearing AIDS (3)**

GURGAON: It was a confession that shook even the most hardened law-keepers. Naresh (name changed), the accused in the triple murders in Shikohpur village near Gurgaon, said he killed his wife and two minor children because he feared they were suffering from AIDS. Naresh was arrested last week. He remained in police remand for three days and was produced in court on Tuesday. On December 16, 2008, Naresh allegedly killed his 27-year-old wife, seven-year-old daughter and five-year-old son by strangulating them at home, 14 km away from Gurgaon. Police registered a case under section 302 of IPC against Naresh, his father and brother after Naresh's father-in-law implicated the trio. Though his brother and father were arrested immediately, Naresh went absconding. He was arrested later from Jodhpur, Rajasthan, said the SHO of Kherki Daula police station. "During interrogation Naresh said that after his marriage, he fell into bad company and started visiting sex workers. He regularly went to GB Road in Delhi. For the last few months he feared his liaison with multiple partners may have resulted in him contracting AIDS. Meanwhile, he met a tantrik who told him that he will die soon. This only reinforced his doubts," said Narrotam Prasad, investigating officer. "He started believing his wife and children had also become HIV positive. This led him to take the extreme step. He wanted to kill himself also after committing the crime, but could not gather the courage," Prasad added. Naresh's father-in-law had claimed that the accused was an alcoholic who often beat his wife. (Times of India 21/1/09)

### **Family kills HIV+ woman in Maharashtra (3)**

January 22, 2009, (Sangli): It's a case of a brutal murder in rural Maharashtra. Thirty-one-year-old Vidya Kadam was allegedly tricked into marrying an HIV-positive man and then murdered by his family when she sued them for cheating her. Now, the town of Sangli has taken to the streets in protest, demanding justice, for Vidya Kadam. "Her family is responsible for her murder, over her husband's land," said Deepak Devraj, Deputy Superintendent of Police, Sangli. Vidya married Rajendra a farmer in Sangli in 1996. A year later, after her husband died she discovered that he had AIDS and she too was HIV-positive. She filed a case against her mother-in-law Sampada for fraud and demanded compensation. "The court gave her all rights to her husband's property and Rs 5 lakh compensation," said Dattajirao Mane, Vidya's lawyer. The court's verdict angered her husband's family who plotted Vidya's murder.

"People who murdered her should be given the most severe punishment," said Sailigram Kamble, organisers, Amhi Amchi Sanstha. The police have arrested Sampada Kadam and her sons Vishwas and Shankar on charges of murder for a crime that has shaken the small town of Sangli. (NDTV 22/1/09)

### **College sacks four hostel staff for testing positive for HIV (3)**

CHENNAI: In these days of recession, pink slips are not uncommon. But a well-known college in Tamil Nadu's a southern district of Dindigul, sacked four of its hostel staff -- cooks and kitchen assistants -- because they tested HIV positive. The incident which smacks of discrimination has snatched four staff members, including a woman, of their livelihood. They are now either working as daily wage coolies in fields and on construction sites or desperately searching for jobs. About a month ago, the management of the P S N A college of engineering and technology in Muthanampatty insisted on putting the hostel staff through a general medical check which also included a HIV test. Four of them tested positive, including a woman. All four were given the sacking orders on January 13, a day before the Pongal festival. They had been drawing monthly salaries of about Rs. 3,000. S Ramakrishnan, the college's special officer, admitted he had given the four staff members the sacking orders. "We have sacked them. They are cooking for 2,000 hostel students. We cannot take the risk of having HIV positive cooks working in the college mess," he told The Times of India. When it was pointed out to him that HIV did not spread through food, Ramakrishnan quipped: "I can't fool around with the health of so many students." A Rajrathinam, an HIV activist in Dindigul, pointed out that it was a pathetic case of poor people being helpless about fighting back. "It also shows the ignorance of educated people and the stigma that is still attached to the disease," he said. Dr. G Rohini, the medical officer in-charge of the ART centre in the Dindigul government hospital, said she had the medical records of three of the four staff members. "All three have tested positive for HIV." Meanwhile, 38-year-old Muthammal (name changed), a widow hailing from Chengurichi hamlet, near Dindigul, among the four sacked staff members, is a dejected woman. "I don't know where to go for a job," she said. Her husband died of HIV a few years ago. She is now dependant on her old parents, daily wage earners in tamarind units. Well-known lawyer, Anand Grover, who has argued several cases in favour of sacked HIV positive persons, said the act of the college was "totally illegal." In several landmark judgments, the Mumbai and Delhi high courts have ruled that a person living with HIV could not be denied opportunity of employment merely on ground of his HIV+ status, he said. (Times of India 27/1/09)

### **'Mobilisation, networking needed to contain AIDS' (3)**

Bhubaneswar: A three-day State-level peers conference-cum-training to contain the HIV/AIDS, organised by the Orissa State AIDS control Society (OSACS), at Yatri Niwas was concluded here on Friday. Inaugurating the conference on Friday, OSACS Project Director Parameswar Swain emphasised on strengthening the outreach activities by engaging peers in responsible action, community mobilisation and networking across the project area needed for containing the epidemic. Peer education (PE) has been proved to be the most effective and sustainable tool for changing group behaviour regarding the disease. It was proved that PE-led outreach could help in increased identification of vulnerable groups, saturation of the coverage and access to services. The conference would help the peers in understanding their role in the project. Moreover, it would be beneficial in building organic linkages with core population like female sex workers, men having sex with men and different targeted intervention projects under the OSACS, Swain said. Among others, NACO Consultant Dr Bhagaban Prasad, State Director of the CARE Basanta Mohanty and Dr AK Sen from the UNICEF spoke at the inaugural function. Community consultants, social activists and representatives of the UN, bilateral agencies, Women and Child Development Department and Women Rights Commission were the resource persons on the occasion. More than 200 peers attended the conference. (Pioneer 1/2/09)

### **City scientists plan study on HIV link to nerve disorders (3)**

Pune: The latest in the West is studies on neuroAIDS, where the virus can sneak into the brain to cause dementia. But Pune is not far behind. The National AIDS Research Institute (NARI) has planned an ambitious study to find the prevalence of neuro-cognitive impairment in HIV infected individuals. NeuroAIDS is the clinical syndrome where patients forget phone numbers and at times their movement is slackened. But condition of not all HIV positive patients worsens and doctors can't predict who will go through this neurological disorder. Earlier, The Indian Express had reported that scientists at the NARI had standardised tests to suit the Indian population and detect the neurocognitive impairment of HIV

infected individuals. Now, armed with a battery of 'Indian culture specific' neurological tests to diagnose symptoms which afflict at least one in five people, a collaborative study will get underway in Pune. The study partners include NARI and University of California, said Dr R S Paranjape, Director of NARI. The Indian Council of Medical Research (ICMR) has given the green signal for the study, Dr Manisha Ghate, Assistant Director, NARI, said. Dr Sanjay Mehendale, Deputy Director, Senior Grade, NARI, who is the principal investigator, told The Indian Express that studies will be done on 300 HIV positive individuals and 300 participants who are not affected with HIV. The Pune Municipal Corporation (PMC) has provided a space at Model Colony for setting up an anti-retroviral treatment (ART) centre, apart from laboratory facilities. There is increasing evidence in the West that shows cognitive difficulties among HIV infected individuals and hence the study will include tests that check memory, motor skills and neuro-psychological function. According to Ghate, a pilot study using these tests had been conducted among 30 HIV infected individuals and 47 per cent showed neurological impairment. Access to anti-retroviral drugs has helped in improving the health, survival and functioning of HIV infected individuals. But since people are living longer with the virus, the overall prevalence of neuroAIDS appears to be increasing, researchers said. "In India, we need to answer questions like what is the prevalence of these neurological changes in HIV infected individuals, how do they manifest clinically and are there any neurological benefits of anti-retroviral therapy," Ghate said. .... (Indian Express 6/2/09)

### **Corporate houses move to fight AIDS (3)**

BERHAMPUR: Corporate houses have started to come out to help in fighting AIDS and HIV in Orissa. The fourth Anti Retro-viral Therapy (ART) centre of the State is going to come up with the help of Ballarpur Industries Limited (BILT) in Koraput district hospital. It may be noted that at present three ART centres are running in the State -- the MKCG Medical College in Berhampur, SCB Medical College in Cuttack and VSS Medical College at Burla. The ART unit proposed in Koraput would be the first public-private partnership project for the purpose in the State. It may be noted that BILT is a leading paper manufacturing company. Announcing this, project director of Orissa State AIDS Control Society (OSACS) Parameswar Swain said they had started approaching different corporate houses for establishment of another ART centre in Angul district, the second most HIV-prone area after Ganjam district. Mr Swain was in the city on Saturday to attend a workshop for media on HIV/AIDS. The Vedanta group has decided to set up an Integrated Counselling and Testing Centre (ICTC) for HIV positive persons at Lanjigarh in Kalahandi district. The Rourkela Steel Plant is coming up with an ICTC in Rourkela. The Tata company has committed itself to setting up ICTC units at its mining areas at Sukinda and Joda. Similarly the Paradeep Port Trust, Mahanadi Coalfields Limited and NTPC have promised to set up ICTC units at their areas of operation. Mr Swain said ICTC centres had been opened up in all the primary health centres of the district. Apart from it, efforts were on to open up link ART centre at Aska which would be connected with the parent ART centre in MKCG Medical College Hospital. The AIDS patients would be able to collect their medicine from the link centre at Aska without coming to the MKCG Medical College. (The Hindu 8/2/09)

### **Fight against Aids hits road block (3)**

NIZAMABAD: The district Aids control society (Dacs) is on the horns of a dilemma. On one hand, its efforts to motivate pregnant women to undergo Aids-related tests haven't evoked a positive response and on the other, social stigma is proving to be a major stumbling block in carrying out the tests. Of the 30,000 and odd pregnant women who have undergone three types of Aids/HIV tests in the last six months in the district, 600 have tested positive. Sources said about 6,000 people were found carrying the HIV virus in the last six years. The staff of Dacs visit villages falling under the limits of various PHCs and motivate the pregnant women to undergo the tests and go to hospitals for deliveries so that transmission of the HIV virus to the child could be prevented. "It's a fact that a majority of women are not coming forward to undergo the tests," an official said. "Our concern is aimed at rescuing the infants from getting infected with the HIV virus from their mothers," the official added. Experts working in Aids prevention said there's another problem they have to deal with. "The villagers tend to brand those who take the test as 'Aids patients' even before they are certified HIV-positive. The people just cannot bear the humiliation," an expert averred. A woman in Kammarpalli mandal made clear her dislike for the tests when she banged the door shut on a medical team. "Why should I undergo the tests. We have complete faith in the 'Pedda Sami' (village god)," the woman not wanting to be named told TOI. But Dacs chief T Dinesh Kumar said it was necessary for pregnant women to undergo the Elisa, Combs and Rapid tests. "Our job is to motivate

the women to undergo the test but we cannot force them. We are also convincing the women for institutional deliveries," he said. He admitted that the women are not coming forward for the tests. Sources said the problem is compounded with the doctors in private nursing homes declaring the women as HIV negative after conducting only the Elisa test. "Sometimes, the virus may not be found in Elisa and Combs tests. When the woman gives birth to the baby, he/she is found HIV positive. So, it is mandatory to undergo all the three tests at one go," Dinesh Kumar added. (Times of India 8/2/09)

### **HIV +ve suspect stopped from marrying (3)**

AJMER: People suspected of being HIV positive nowadays suffer social stigma which is worse than the victims of casteism. Such people are often humiliated and not allowed to marry. The panchayat of Mali Samaj has decided to boycott the family of an allegedly HIV positive patient. According to sources, the marriage of a certain Amit (name changed) had been scheduled on Friday night in the Dholabhata area of Ajmer. "The atmosphere was joyful and the bride and groom had known each other for the past three years. We all received the barat of a groom and finally performing the last ritual (phere) of the marriage," said Udai Singh, uncle of the bride. According to family members, some people from an NGO with a police constable came where the marriage was taking place and announced that the groom was HIV positive. "There was tension when we reached the spot to tackle the condition," said Alwar Gate police. According to them, the family and relatives of the bride were angry and accused Amit's family of trying to deceive them. "The NGO showed the HIV positive report and confirmed that they had advised him not to go for the marriage," said the father of the bride. Sources confirm that both parties fought and abused each other openly. "We then decided to go for a fresh test," said the uncle of the groom. Amit, with the relatives of the bride went to JLN Hospital at midnight and the report apparently confirmed his HIV positive status. "As soon as the message reached us, guests left. If we had known that the groom was suffering from AIDS we would have not permitted the marriage," said Kalu Singh, father of the bride. The bride had fainted by then. "I do not want that Amit should be punished. He is already facing hell," the bride told TOI later. She said that she was not aware that Amit was HIV positive neither had he disclosed it to her. "We met many times and he talked so normally that nobody could guess this about him," said the bride. When she was talking to the media her family members were trying to force her to register a case of cheating against Amit but she refused to do so. The members of groom family were humiliated and sent back. "Amit has a flower shop in Ajmer main market and he has had an affair with the bride for the last three years" said uncle of Amit. Meanwhile, the panch of Mali community called an urgent meeting early on Sunday morning and decided to boycott the family of Amit in every ceremony. "No member of the community would keep any relation with Amit's family and those who try to overrule the orders of the community would be punished severely," said Panch Amrchand Dagdi. According to him, this is the lesson for those youth who try to deceive girls' families. The medical department, when it came to know that an HIV positive patient was going to marry, applied to the city magistrate to stop the marriage. "We got the order, but lost time while searching for bride's house," said Dr Lal Thadani, deputy chief medical and health officer. According to him, the department never discloses the name of HIV positive patients but in this case it was necessary. (Times of India 16/2/09)

### **Aids is China's deadliest disease (3)**

Chinese officials have said that HIV/Aids was the leading cause of death last year, compared with other infectious diseases. It is thought to be the first time this has happened. A report by the country's state media said HIV/Aids had led to the deaths of almost 7,000 people in the first nine months of 2008. The number of deaths caused by tuberculosis and rabies fell back into second and third place. The numbers are increasing dramatically - China's Ministry of Health say that until three years ago, fewer than 8,000 people altogether had died from HIV/Aids. By last year, the total had risen to five times that many. Data on HIV in China are still unreliable. Official reporting of cases does seem to have improved. The central authorities seem more willing to recognise HIV as a public health crisis and address it with education campaigns. But there are still concerns that officials at local and provincial level are under-reporting, either by mistake or because they think it's not in their interest to show rises. This latest news comes as the spread of HIV in China has entered a dangerous new phase. Initially it was concentrated in high-risk populations, injecting drug users in particular. Infection from contaminated blood transfusions was also common. But now the main cause of transmission is thought to be unsafe sex. China is still a deeply conservative society - but it is also going through a period of rapid social change. Greater freedom of movement means millions of migrant workers have left small communities to enjoy the anonymity of

cities. Male workers, away from their families, have more sexual opportunity. Prostitution has increased. Premarital sex is also becoming more acceptable. On Tuesday, the World Health Organisation warned of a steep rise in HIV amongst Asian men who have sex with men, unless prevention programmes targeting them were greatly improved. (BBC News 18/2/09)

### **Why feel ashamed of HIV/AIDS? (3)**

TIRUCHI: Is incidence of HIV-AIDS confined to high risk groups like lorry drivers and commercial sex workers? What about doctors, lawyers, lecturers and others? All are evenly vulnerable to the dreaded disease. Only if people are sensitised to the fact that it is a threat to humanity can social ostracism of people living with HIV-AIDS be tackled, according to A. Thamil, Project Coordinator, Network for Positive People in Tiruchi. The affected people continue to suffer on counts of denial of water from public taps, inheritance rights, and education for children, she said, observing that of late the district administration has come forward to support them. Ms. Thamil was interacting with students of Seethalakshmi Ramaswami College on Thursday as one of the speakers in the panel discussion on 'HIV-AIDS awareness' organised by the College's Red Ribbon Club (RRC). Other speakers were A. Sonalee, Managing Trustee, Transgender Community Action Network, and K. Jeyapal of Integrated Counselling and Testing Centre at Annal Gandhi Memorial Government Hospital here. Creating youth awareness is of vital importance at this juncture to keep the disease at bay, she said, pointing out that the disease wiped out people in the prime of youth. Emphasising on peer counselling to face the challenge, Ms. Thamil felt there was no reason for the younger generation to feel ashamed of HIV/AIDS. Voluntary testing before marriage was as important as horoscope matching since, in numerous cases, women realised that they have been afflicted by the disease only during pregnancy. Ms. Sonalee exhorted the society to consider transgenders as women. Neglect by own families is the prime cause for the social exclusion of transgenders, she said, observing that their predicament was precipitated by denial of jobs. Explaining the chromosome factor as the determiner of physical and mental conditions of an individual, she said leading a pitiable life was not a matter of choice for transgenders. Ms. Sonalee lauded the Government's initiatives to create a welfare board for transgenders and provide them with ration cards as right steps. Mr. Jeyapal explained that the disease spread through unsafe sex, syringes and blood transfusion. There were methods to prevent mother-to-child transmission in the womb. Anti-retroviral drugs were available in all district headquarters hospitals, he said. RRC Programme Officer S. Vijayarani and Youth Red Cross Programme Officer Dhanalakshmi also took part in the panel discussion. (The Hindu 20/2/09)

### **500 babies born HIV-infected in State' (3)**

THIRUVANANTHAPURAM: Kerala has an HIV population estimated between 70,000 and one lakh. Roughly, 500 babies are born with HIV every year. And it is likely that there are at least 3,500 HIV positive children below the age of 10 in the State. These are statistics from the Economic Review 2008, which was tabled in the Assembly on Thursday. In 2008, 855 AIDS cases were reported in the State, out of which 186 people succumbed to the disease. Among those died, 133 were men, 49 women and four were children. According to the Review, 547 men and 270 women were detected with HIV in the past year alone. The first HIV positive case in the State was identified in 1987. Till 2004, the number of AIDS cases reported from various parts of the State is 2,003, of which 619 persons died. AIDS cases reported through the two care centres of the Kerala State AIDS Control Society in 2005 is 218, of which 67 persons died. HIV infection and AIDS cases were first detected in India in 1986. With more than 5.1 million estimated HIV positives, the country has the largest population of HIV-infected people other than South Africa. Manipur, Nagaland, Maharashtra, Andhra Pradesh, Karnataka and Tamil Nadu have been identified as high incidence States owing to the prevalence of the disease among the public in those States which is more than one percent. SUICIDE RATE: According to the Crime Records Bureau, the suicide rate in the State is almost three times the national average of 11.6 per one lakh. Kerala accounts for 10.1 percent of the total suicides in the country, while the State population is only 3 percent of the country. The tendency to commit suicide is a major problem in the State, which is reported at 28.8 per one lakh people. It is estimated that one percent of the population at any given time suffers from mental illness. CHRONIC DISEASES: Among the chronic diseases, cardio-vascular disease, cancer, hypertension and diabetes mellitus top the list. Kerala faces three major problems in the health sector, according to the Review. The first is the difficult access to healthcare and impoverishment of sizeable segment of the population owing to high out-of-pocket health expenditure. Second is the rapidly-increasing prevalence of diseases associated with lifestyle and ageing, and third is the prevalence of

environment-related diseases owing to problems of community hygiene and pollution. High prevalence of mental health problems including, higher suicide rates, health problems and death owing to road accidents and other traumas are other dimensions of the problems in the State's health sector, the Review said. (Express Buzz 20/2/09)

### **Growing HIV rates among gay, bisexual men in Asia (3)**

Hong Kong, February 20, 2009: The AIDS virus is spreading rapidly among gay and bisexual men in Asia as younger people shun condoms and authorities fail to increase awareness of the disease, health officials said on Friday. The epidemic will worsen dramatically in coming years unless there is better education and stronger political will to combat the disease, warned Massimo Ghidinelli, the World Health Organisation's regional adviser on HIV/AIDS. His comments came at a news conference after a seminar in Hong Kong at which regional AIDS experts discussed the growing trend. Asia is believed to have the world's largest number of men who have sex with other men, with a preliminary estimate of 10 million, according to WHO. While describing the figure as "extraordinary high," Ghidinelli said it still appeared to be conservative because of the stigmatization of male-to-male sex. WHO said fragmentary information from the region indicated a rapid spread of HIV among gay and bisexual men, but that full data weren't available. The seminar was called to strengthen efforts to study and address the problem, it said. Ghidinelli said low condom use among younger men in male-to-male relationships was fueling the transmission of HIV. (Hindustan Times 21/2/09)

### **Training programme held for Red Ribbon members (3)**

PUDUKOTTAI: The Red Ribbon Club of the H. H. The Rajah's College here conducted a day-long training programme for its volunteers recently. College Principal M. Chidambaranathan inaugurated the camp. G. Edwin, Senior Civil Surgeon, Valaiyapatti, said that AIDS was spreading mainly through blood. The spread of AIDS could be controlled to a large extent by transfusing only screened blood. Blood transfusion should always be safe, he said. S. Asokan of Tamil Nadu AIDS Control Society explained the various steps being initiated with the help of different agencies for checking its spread. Selvi, an AIDS patient, explained how counselling in the initial stage itself could mitigate the suffering. AIDS threat should be truly understood by the society in general and the family in particular. She said that her family members always supported her. The youths should always lead a perfect life to escape the dreaded disease, she added. Without remaining indoors blaming her misfortune, Ms. Selvi said, she has been extending counselling to the affected people and their relatives. The love and affection showered on the affected people by their relatives will bring lot of solace to them. Staff Counsellor of Red Ribbon Club S. Viswanathan spoke. (The Hindu 21/2/09)

### **Thalassaemic girl gets HIV (3)**

HALDIA: A 14-year-old thalassaemic girl from Tamluk in East Midnapore has been detected HIV+ after receiving blood from a government blood bank. The East Midnapore chief medical officer of health (CMOH) has initiated an inquiry and promised action against those found guilty of negligence. The girl has been living with thalassaemia since she was six months old and had to undergo regular blood transfusions. She last received blood from the East Midnapore Hospital bank a fortnight ago after which she developed some unnatural symptoms, including fever. A blood test revealed that she had contracted HIV. The School of Tropical Medicine in Kolkata also confirmed this. "I have two daughters. Our family has now been ostracized. The blood bank is to blame for what happened to my daughter," said the victim's father. CMOH Rabi Kinkar Nayek said that he has received a complaint and has ordered an inquiry. (Times of India 21/2/09)

### **Major political parties vow to fight HIV/AIDS (3)**

HYDERABAD: Cutting across party lines, leaders of various political parties unanimously agreed to include prevention of HIV/AIDS in their election manifesto. Legislators from major political parties resolved to put in collective efforts to fight the alarming spread of HIV/AIDS in the State notwithstanding the preventive and awareness measures. They adopted a resolution to this effect at a meeting on HIV/AIDS organised jointly by the AP Legislators Forum HIV/AIDS (APLFA) and AP State AIDS Control Society (APSACS) here on Saturday. Senior TDP legislator Ch. Rajeswara Rao referred to death of a weaver, who committed suicide along with his family of three besides poisoning his parents. While media reports said it was caused by starvation, the victim had actually contracted HIV and hence ended his life. B.

Kamalakar Rao (Congress ), Srinivas (CPI ), P.V. Srinivas (CPI-M) and Venu ( Lok Satta) backed the forum. (The Hindu 22/2/09)

### **AIDS cases increase in Uttarakhand (3)**

Dehra Dun (PTI): Uttarakhand, known for its scenic beauty and tranquility, has now a reason to worry as AIDS is slowly and steadily gripping the state in its clutches. Last year, 1,822 people were found to be HIV +ve in the state. Out of them, 10 per cent were children, who acquired the disease either through their mothers or through infected syringes, according to state AIDS control committee advisor Naresh Madpal. Madpal cited two main reasons for the increase in the menace. First, unemployed people of the state who go to cities and metros to earn a living get into unsafe sex and acquire the disease and then spread it after their return. Second, drivers are also hugely responsible for the spread of AIDS. "Two hundred sixty four people have died due to the disease in between 2000 and till last year," he said, adding red ribbon clubs have been opened in 13 district to control the menace and spread awareness. (The Hindu 23/2/09)

### **Punjab's Forgotten Women: A lonely war against AIDS (3)**

Chandigarh: Truck drivers from Punjab fall into the most high-risk category of HIV/AIDs victims. But what about the women and children they leave behind? Faced with the worst kind of social stigma and lack of financial help, these fatherless families often sink into oblivion. "I didn't even know what HIV was or how it is contracted. I never thought my family would be a victim. I am not very educated. I have grown up in a village," a truck driver's wife Pooja Thakur said. At 27, Pooja's face reflects almost nothing of the struggle she has endured. She lost her husband when she was just 21 years old to a disease she knew nothing about. But it was not long before Pooja discovered that she was HIV positive as well, and two of her three children were carrying the virus too. "After my husband died, his parents blamed me. They said if people die of HIV, why are you still alive? Why are your children alive? Then my in-laws threw me out," Pooja said. Pooja saw her life crumble into dust – she was homeless, poor, practically illiterate and thrown out onto the streets with three children to fend for. Without support or money for the first time in her life, Pooja took the giant leap of going to the Chandigarh State Aids Control Society, telling them of her plight, and begging for a job. It was just the lifeline that she needed. She is now the head of the Chandigarh network of people living with HIV Aids and uses her story to spread awareness. But her children remain her focus and her source of strength. "My middle son has started undergoing treatment. He himself asks for medicines even though they don't know the disease they have," Pooja said. "I hope if there is ever any cure for HIV it should be for my children first. They are so young, they have not seen anything yet," she added. (IBN Live 23/2/09)

### **HIV quickly evolving among large groups: Study (3)**

London: The AIDS virus is quickly adapting across large groups of people to avoid triggering the human immune system, posing another challenge in the search for a potential vaccine, researchers said on Wednesday. Scientists know the human immunodeficiency virus, or HIV, constantly mutates within individual people to find ways to attack cells. But the study published in the journal Nature suggests changes that help the virus do this are increasingly passed on in the wider population. "What was previously clear is the virus could evolve within each infected person but that doesn't really matter from a vaccine perspective if the virus at the population level is staying the same," said Philip Goulder, an immunologist at Oxford University who led the study. "The implication is that once we have found an effective vaccine, it would likely need to be changed to keep pace with the rapidly evolving virus." There is no cure for AIDS and 33 million people globally are infected with HIV. Cocktails of drugs can control the virus and keep patients healthy. AIDS has killed more than 25 million people since the early 1980s, mostly in sub-Saharan Africa. Researchers are trying to find vaccines that either prevent infection or would control the virus so that patients are less likely to transmit it – a so-called therapeutic vaccine. "The process of the virus adapting is happening before our eyes at quite a speed, and it is something we need to take into account when making our vaccines," Goulder said. HIV attacks the immune system, the body's natural defences. Like other viruses, it cannot replicate on its own but must hijack a cell and turn it into a virus factory. HIV must evade several genes to do this, including an immunity gene called HLA. The team, which included researchers from Australia and Japan, analyzed the genetic sequences of HIV and versions of HLA genes known to control the virus in 2,800 people. Some people have a version of the gene that is more protective. In the study, the researchers found that mutations that allow HIV to evade

immune responses directed by HLA were more common in people with the protective variant of the gene. This was strong evidence for HIV adaptation to the human immune system among the wider population, Goulder added in a telephone interview. This means the so-called escape mutation is circulating in more and more people and accumulating in the wider population of those infected with HIV, he said. (Indian Express 26/2/09)

### **HIV evolving to escape human immune system, says Oxford study (3)**

London (PTI): HIV is evolving rapidly to escape the human immune system, an international study led by Oxford University has found. The findings, published in Nature, demonstrate the challenge involved in developing a vaccine for HIV that keeps pace with the changing nature of the virus. "The extent of the global HIV epidemic gives us a unique opportunity to examine in detail the evolutionary struggle being played out in front of us between an important virus and humans," says lead researcher Prof Philip Goulder of the Peter Medawar Building for Pathogen Research at Oxford University. "Even in the short time that HIV has been in the human population, it is doing an effective job of evading our best efforts at natural immune control of the virus. This is high-speed evolution that we're seeing in the space of just a couple of decades." HIV has already killed 25 million people, and an estimated 33 million are currently infected globally. However, HIV does not kill all people at the same rate. On an average, an adult with HIV will survive for ten years without anti-HIV drugs before developing AIDS. But some people will progress to AIDS within 12 months while others can make effective immune responses to the virus and survive without any anti-HIV therapy for over 20 years. Genes encoding a key set of molecules in the human immune system called the human leucocyte antigens (HLA) are critically important. HLA determine the progress of many infectious diseases including HIV and enable the recognition and killing of HIV-infected cells. Humans differ from each other in the exact HLA genes they have and small differences can make the difference in how long it takes to progress to AIDS. The research team set out to determine whether HIV is adapting to human immune responses. They looked at HIV genetic sequences in different countries around the world, including the UK, South Africa, Botswana, Australia, Canada, and Japan, wanting to see whether the HIV sequences could be related to the different HLA genes present in the different populations. The collaboration between Oxford University, the Ragon Institute at Massachusetts General Hospital, Kumamoto University in Japan, the Royal Perth Hospital and Murdoch University in Australia and others analysed the genetic sequences of the HIV virus and human leucocyte antigen (HLA) genes in over 2,800 people. The work was funded by a number of organisations including the Wellcome Trust, the Medical Research Council, the US National Institutes of Health, and Oxford's James Martin 21st Century School..... (The Hindu 27/2/09)

### **HIV: Labourers at highest risk (3)**

DASPUR, Feb. 26: A study conducted by an international agency has revealed that industrial labourers in West Bengal are more likely to be infected with HIV-AIDS than their counterparts engaged in other professions. The study was conducted by NGO Francois Xavier Bagnoud (FXB) International in the village of Daspur, Midnapore West. Of the 84 families participating in the study, 34 were found to include one or more HIV-positive member. The study found that men in these families often visit brothels and engage in unprotected sex. As HIV-AIDS is a sexually transmitted disease, the wives of these men often become infected. Babies born to HIV-positive women may also be infected with the disease. The recent survey was part of a project launched by FXB International in 2002 with an objective to provide basic healthcare and education to HIV-AIDS affected families and to increase the families' net income. The NGO is currently administering monthly antiretroviral therapy to HIV-positive members within the 34 families. The project also encourages families to engage in various handicrafts in order to sustain themselves. FXB International had conducted a 2006 joint survey with the State Aids Prevention and Control Society covering Howrah and Hooghly districts, as well as North and South 24-Parganas. It was found that labourers in the jute and textile industries were statistically more likely to have HIV-AIDS than residents working in other industries. The latest survey has shown a similar trend is underway in Daspur. A spokesperson for FXB International said awareness must be raised amongst all industrial labourers in the state, as workers were continuing to have unsafe sex. The last widely recognised survey of people living in India with HIV was conducted in 2007 by UNAIDS and NACO and estimated that between two million and 3.6 million people were infected with the disease. (Statesman 27/2/09)

### **63 pc of HIV+ inmates in Tihar are drug abusers: authorities (3)**

New Delhi, March 01, 2009: About 63 per cent of the HIV positive inmates of Tihar jail were found to be drug abusers, who are not aware of their status, jail authorities have said. "A total of 953 inmates have undergone tests for HIV at the recently established Integrated Counselling and Testing Centre (ICTC) at the jail hospital. Of these, 84 were found HIV positive," a senior jail official said. Among the 84 HIV positive inmates, 53 were found to be intravenous drug abusers, the official said and informed that they come from a very low strata of society. The ICTC, which was established in June last year, has helped the jail authorities ascertaining the HIV status of an inmate and provide timely treatment and help. "Earlier, when ICTC was not in the jail premises, we have to send them to ICT centres located in hospitals outside. And most of the time, those who have consented for the test would change their mind and refuse to take the test, as there was a time gap between their consent and them going for the tests," the jail official said. "We have to take an inmate's consent before sending him for HIV/AIDS test," he said, adding that after the centre was established, the inmates get no time to change their mind. As soon as a prisoner is found HIV/AIDS positive, he or she is put on Anti-Retroviral Treatment (ART) at the Link Anti-Retroviral Treatment centre inside the jail complex, which has started functioning at the jail hospital from September last, the official said. These HIV/AIDS positive inmates are also put on specialised diet in the jail. Currently, there are about 59 HIV/AIDS positive prisoners lodged in various jails of Tihar. Of these, 53 are men and six are women. Rest have been released, the official said, adding that a majority of the HIV/AIDS positive prisoners were undertrials. (Hindustan Times 1/3/09)

### **Pilot insurance scheme for people living with HIV/AIDS (3)**

SALEM: At a time when insurance corporations balk at the idea of providing life cover to people who are living with HIV and AIDS (PLHAS), a micro insurance project of mutual participation, devised by the non-governmental organisation Project Concern International (PCI) and Care India and named 'Jeevodhayam,' has been floated. A press release from PCI says that a recent study among the PLHAS has shown that their life expectancy has increased after ART support. Jeevodhayam is important for financing the mortgage of PLHAS and to ensure social security requirements. The project is a pilot programme thus insuring the lives of PLHAS through a micro Insurance programme with a mutual model. The program targets 2,000 PLHAS in the pilot phase. The study reveals that survival versus mortality rate of a group of 2,312 PLHAS registered in Salem was analysed from September 2003 to September 2008. Mortality rate among the PLHAS is found to be reduced from 54 per cent to 10.75 per cent during this period. On the basis of sufficient statistical material net life insurance premium is calculated. The formation of this mutual committee in order to implement this Micro-Insurance scheme among the PLHAS is to be closely monitored and to be scaled up in near future. (The Hindu 2/3/09)

### **HIV count down in pregnant women (3)**

Mumbai: The prevalence of HIV among pregnant women in Mumbai is on the decline. Records provided by the Maharashtra District Aids Control Society (Mdacs) indicate a sharp fall in the percentage of pregnant women detected with HIV last year. Among the 1.03 lakh pregnant mothers who underwent HIV tests before delivery last year, only 706 (0.68 %) were detected positive, said Dr SS Kudalkar, project director, Mdacs. The total number of pregnancies during the period was estimated to be 1.80 lakh. The prevalence of HIV among pregnant mothers was found to be 0.9 % as only 1,070 of the 1.17 lakh women who took confirmatory tests at government and civic hospitals and anti-natal clinics tested positive. Kudalkar attributed the decline to increased awareness amongst citizens about the disease. "Along with various NGOs and the BMC, Mdacs volunteers have been able to reach out to high-risk areas and spread awareness about the disease, its causes and affects," he said. The HIV prevalence in this particular category has been on the ebb since 2005, when it was pegged at 1.2 %. The administering of free navirapine prophylaxis (NVP) to protect babies whose mothers had detected positive from contracting the infection, however, continued to be below the target set by the National Aids Control Society (Naco). Over 28% HIV +ve mothers could not be administered the drug in 2008. Naco had set the target at 80 % for 2008. Mdacs officials said that a few cases could not be tapped on account of delivery at home and migration to other states, among other factors. Meanwhile, Mdacs is keen to extend its reach in 2009 and has decided to spread awareness using the television medium, Kudalkar said, adding that the society planned to rope in celebrities to drive home the message. Mdacs also plans to open its clinics and testing facilities at private maternity homes. (DNA 3/3/09)

### **'Only 30 percent of AIDS patients receive treatment' (3)**

New Delhi (IANS): With over 33.2 million people living with AIDS virus in the world, only 30 percent of them receive treatment, Nobel laureate Françoise Barré-Sinoussi said. Barré-Sinoussi, who won Nobel Prize in Medicine last year, said the prevention of HIV infection still remain a big challenge before scientists. She was speaking at the inauguration of four-day symposium here to discuss the trends and specifications in HIV Infection Management. "There are numerous challenges before us and we need promote early diagnostic steps to check spread of HIV infection. We have to work to develop new therapeutic and vaccine strategies for tomorrow," said Barré-Sinoussi. The symposium organised by Foundation Merieux aims at reviewing the HIV situation in India and other Asian countries in light of the strong prevalence of viral hepatitis and tuberculosis. More than 100 scientists, clinicians, public health actors in the field of HIV, hepatitis and tuberculosis from various countries will share their knowledge and experience at the event. According to estimates, India has an estimated 2.5 million people living with AIDS. (The Hindu 5/3/09)

### **AIDS campaign makes good impact on villagers (3)**

TIRUNELVELI: The recent campaign conducted in 19 blocks of the district through mobile cultural troupes to create awareness among the rural masses about HIV/AIDS has created significant impact over the villagers. In an effort to prevent HIV/AIDS transmission and create awareness of the prevention services available in the districts for pregnant mothers and rural population under the programme 'Vaazhkkai Vaazhvatharke...' (Life is to Live), Tamil Nadu State AIDS Control Society (TANSACS) has initiated a State-wide campaign in association with district administrations across 10 districts. As many as 12 mobile teams with elaborate information on HIV / AIDS and the services available, cultural troupes with 96 performers would cover Kanyakumari, Tirunelveli, Virudhunagar, Madurai, Theni, Tiruchi, Namakkal, Salem, Dharmapuri and The Nilgiris districts during the 50-day campaign. Printed materials available in the vans and cultural performers disseminate information on understanding HIV/AIDS, existing programmes and health services to prevent transmission of HIV from parent to child, information on treating sexually transmitted infections and the nearest service providers to the village. When the cultural troupes recently visited nearly 180 villages of the district to reach out over 1.50 lakh population through varied communication formats, the impact left behind in the village was tremendous as the villagers could get new information about the dreaded disease and erased some of their misconceptions. In addition to the cultural teams, exhibitions set up in the villages clarified the doubts of the villagers. Ten well-trained volunteers further moved into the interior parts of the villages and reach out to the people individually with information on STIs, preventing the parent to child infection and the nearest services available. "Some fallacies we had about AIDS and HIV infection have been removed, thanks to this campaign and hence it should be," said K. Murugan of Reddiarpatti. According to TANSACS, Tamil Nadu stands first in responding to the HIV epidemic in the areas of prevention, treatment, care and support services. This has helped to reduce HIV prevalence in the State to 0.25 per cent. The ongoing campaign is likely to intensify TANSACS' attempts on preventing the prevalence and ensure that people in rural areas have full information regarding HIV/AIDS and access to proper services. Prevention of infection from parent to child counsellor at Tirunelveli Medical College Hospital, Sahayarani, noted that adequate services were available free of cost in the nearest Primary Health Centres and hence the women should understand that HIV/AIDS can be prevented from affecting their children. They could speak to the local outreach workers before coming to the centres. Positive People's Welfare Society member Kumar of Kokkirakulam said this campaign was very timely and would have good impact over the poor and uneducated women. "Now, the women would have understood that prevention of HIV infection from mother to children is possible," he noted. (The Hindu 6/3/09)

### **Help pours in for HIV+ kids (3)**

Kolkata, March 06, 2009: Within a day of HT highlighting the plight of nine HIV+ children at a home near Kolkata, the Bengal government dispatched a team to Ananda Ghar on Thursday, with the promise of medical help within 48 hours. HT on Thursday had reported about the plight of nine HIV+ children, aged between 6 and 11, who are compelled to endure severe dental problems for more than a year, as no surgeon was found to extract their teeth. The first offer of help came from dentist Radha Hariharan, who volunteered to treat the children. Later the officials of Aids Prevention Council — Pallab Bhattacharya, Anindita Maitra and Maya Ghosh — reached Ananda Ghar and have promised immediate help. (Hindustan Times 6/3/09)

### **HIV+ girl had inaugurated centre for AIDS patients (3)**

VADODARA: Surprising it may sound but the HIV positive 15-year-old girl, found dead with her sister and parents, who allegedly committed suicide here on Wednesday, had inaugurated the Anti-Retroviral Treatment (ART) centre at SSG Hospital in January. The girl and her four-year-old sister had inaugurated the centre on January 27 at a function that was attended by their parents and health officials. "The girl, who was diagnosed as HIV positive, was asked to inaugurate the centre that was started to treat AIDS and HIV patients. They were regular at our centre and living a normal life," said Manisha Salunke, president of AP+, an association of people living with AIDS/HIV. AP+, which works closely with ART centre, had organised the inaugural ceremony of the centre wherein the young girl was invited. "We wanted some HIV positive child to inaugurate it and hence the young girl and her sister were invited. The entire family was present at the function," ART centre sources said. "We don't think that the family took the extreme step owing to social stigma or for financial reasons. They had come to us for counselling a couple of weeks ago and didn't seem under any pressure," Salunke told TOI. Sources said the husband was an outreach worker of District Aids Control Programme Control Unit (DACPCU) for primary health centre (PHC). "He was working for DACPCU for the last four months where he used to counsel and educate HIV and AIDS patients. It is surprising that he took such a step," said a source. The HIV positive family, including husband, wife and the two daughters, were found dead at their residence in Makarpura. Police believe the couple consumed poison and also gave it to their children. "We are investigating. We have registered a case of murder against the couple for giving poison to their daughters," said LK Katara, Makarpura police inspector. (Times of India 19/3/09)

### **96 children affected by HIV/AIDS (3)**

TIRUCHI: Notwithstanding the awareness programmes of HIV/AIDS prevention conducted by government and non-government organisations, the scourge persists in the district, which, along with the districts of Namakkal, Salem and Karur, account for the majority of 2.6 lakh affected people in Tamil Nadu. A recent study carried out by Dominic Meldvicks, a social work student of Bishop Heber College, under the guidance of lecturer Arun Kumar, also reveals that 96 children have been affected by HIV/AIDS in Tiruchi. The mental health of the affected people is pathetic; they live in constant fear of discrimination by the society. The proverb, 'prevention is better than cure', aptly suits the fight against HIV/AIDS, said Dominic, citing the rising number of affected people visiting the Government hospitals. . The study was followed by a phone-in programme on mental illness aired through Suriyan FM, and a programme on 'Importance of Screening HIV/AIDS before Marriage' at the College, in collaboration with Anbalayam, a Social Work organisation, earlier this week. Addressing the programme, T.K.S. Senthil Kumar, Founder and Secretary, Anbalayam, spoke on the grim realities of the illness and called upon students to volunteer their services to social work organisations in their fight against HIV/AIDS. J. Godwin Prem Singh, Reader, presided over. Later, a rally highlighting the programme topic was flagged off by Jenova, Anbalayam executive. About 150 students of Youth Red Cross, Good Samaritan, NSS volunteers, besides staff of Anbalayam took part in the rally that was taken out from the college to the District Court. (The Hindu 20/3/09)

### **HIV+ husband marries off woman to another man (3)**

HISAR: In a heart-warming tale of "true love" coming out of Haryana hinterland, notorious for its skewed sex ratio, an HIV/AIDS patient from Sindhwa village of the district has arranged for a wedding of his wife to another man. "It took some time, but she finally agreed to give her consent for remarriage," Kamal (name changed) told TOI. A matriculate, Kamal had married young, about three years ago, and was waiting to bring his bride home. However, when it was time to visit his in-law's place for the gauna (when bride comes to stay with her husband), he got to know of his HIV positive status. Though shocked and traumatised, he refused to give himself to despair and told his wife about it the day she came to live with him, convincing her to lead a life without him. "When she did consent to marry again, I started looking for a suitable match, and one auspicious day, solemnised her marriage". The marriage took place this Wednesday. A relieved man today, Kamal spends his days tending to the fields. "I have never visited a woman in my life. Maybe, I contracted the virus through an infected needle. It (marriage of wife) was a difficult decision. But I was clear in my mind that I could not ruin an innocent woman's life. I now plan to launch a public awareness campaign about HIV/AIDS." The villagers have already started calling him their hero. "He has taken the right step and saved the life of a woman from being ruined," claimed his neighbour Nihal Singh. (Times of India 21/3/09)

Care delay: HIV+ woman's ordeal ends in death (3)

CHANDIGARH: Her condition may have had no cure, but the insensitivity that greeted her when she sought treatment could certainly have been prevented. An HIV positive woman from Sangrur, Jaspal Kaur, who was initially denied treatment at the PGI, died at the hospital on Friday night. The hospital staff had not allowed her admission for five days. She was admitted only after TOI highlighted her situation on Thursday. She had tested positive at a hospital in Patiala. Kaur had come to PGI with her brother and HIV positive husband. She was suffering from high fever. Her brother said when they reached the hospital, the doctors kept sending her back and forth between the anti-retroviral therapy (ART) centre and emergency, while her condition deteriorated. "The doctors just examined the sputum for tuberculosis. That report is yet to arrive. Till the time we were in PGI, no investigation was carried out despite my sister's serious condition," complained Sant Ram Singh. Emphasising the need for instant care, Sarvinder Gandhok, consultant physician at a Sector-32 based private hospital said, "HIV positive patients have very weak immune systems and need emergency care on priority, which gives them a chance at survival. They should not be denied treatment. Doctors should step forward and conduct tests on their own to set an example for the paramedical staff." PGI doctors said Kaur was asked to go to the ART centre in Patiala as it was the closest to her residence, and added she was not allowed in the hospital emergency due to lack of beds. "Over 100 patients visit the emergency here every day. About 5,000 get treatment at the hospital daily. Patients coming from other states are pressing our limited resources," said Subhash Verma, PGI's head of internal medicine. He added, "Jaspal Kaur died of pneumonia. She was provided timely care." Advocate Karan Bhardwaj, associated with a lawyers' collective for HIV positive people's rights, said, "Article 21 of the Constitution provides for right to life and treatment for everyone. This discrimination should definitely be opposed." Though this was the first time that treatment in an HIV case was delayed at PGI, there have been other cases of care falling short at the hospital. April 16, 2008: Due to non-availability of a ventilator, Sarvesh Sahni, 53, a resident of Sector 17, Panchkula, died January 12, 2009: Roshandeen, 37, from Himachal Pradesh died as no bed was available at the ICU of the hospital. He had brain haemorrhage and had to wait in the general ward for five days January 30, 2009: Blood-matching procedure of Randeep, 37, was delayed due to a three-hour power cut. He died subsequently PGI has a shortage of beds, ventilators, trolleys and manpower The hospital's emergency has to handle twice the number of patients as compared to its capacity The institute's computerization has not finished despite having gone on for the past 10 years. Most of the reports are filed manually, which wastes the staff's time It's a gross violation of human rights. PGI is duty-bound to treat the patients and cannot deny the basic right of an individual. I think Punjab and Haryana High Court should be moved against PGI's negligence - Ranjan Lakhanpal, HC advocate and human rights activist (Times of India 22/3/09)

Study: HIV cases on rise in the State (3)

BHUBANESWAR: HIV prevalence among adults in the State has increased by three folds between 2002 and 2006, said a multi-centre study. This piece of information assumed significance as HIV prevalence among adults in the country came down from 0.45 per cent to 0.36 per cent of the population in the same period. According to a report appeared in Indian Journal of Medicine, in 2002, the adult HIV prevalence in 2002 Orissa was estimated at 0.06 per cent while it climbed to 0.22 per cent in 2006. Orissa was among seven low prevalence States, where increasing epidemic trend was noticed by various agencies during the five-year period. The other States were Puducherry, Jammu and Kashmir, Jharkhand, Bihar, Rajasthan and West Bengal. Researchers from organisations such as the National Institute of Medical Statistics (NIMS), Indian Council of Medical Research (ICMR), National AIDS Control Organisation (NACO) and All India Institute of Medical Sciences (AIIMS) had come together to prepare the report. They said the increasing epidemic trend in seven States including Orissa needed attention of the policy and programme managers. More importantly number of people living with HIV/AIDS (PLHA) in all ages had seen a dramatic increase in Orissa. As per the study, there was a rise of nearly five folds among numbers of PLHA from 2002 to 2006. Estimates said 9,717 people living with HIV were detected in 2002 in the State that went up to 48,248 in 2006 in the State. HIV prevalence among adults (15-49 yr) was 0.36 per cent in 2006. Overall prevalence in the high prevalence States was 0.8 per cent and in low and moderate epidemic States was 0.2 per cent. Prevalence was highest in Manipur at 1.70 per cent followed by Nagaland at 1.41 per cent, and Andhra Pradesh at 1.04 per cent The estimated number of PLHA in the population of all ages was 2.5 million. The number of people living with HIV was highest in Andhra

Pradesh at 5,25,560 followed by Maharashtra at 495,488, Karnataka at 2,76,129 and Tamil Nadu at 2,46,473. (The Hindu 22/3/09)

Victims undergo medical tests, counselling on cards (3)

MUMBAI: The two young victims of the Mira Road incest case underwent a battery of medical tests at the Thane civil hospital, including DNA profiling and an HIV test. The results of the reports are expected to arrive on Monday. "Section 164 (A) of CrPC provides specifications on the evidence to be collected. Apart from DNA profiling, the girls underwent a general mental condition test which alone took two days. HIV and STD tests were also conducted. The girls were examined for injury marks," said sub-divisional police officer Maithili Jha. The girls' description of the incident was also recorded. The police has also been interacting with a couple of NGOs for counselling the girls. "The older girl will particularly have to be counselled as she is severely traumatised. While her family always posed as if everything was normal, she has never really lived a normal teenager's life," Jha said. The girls would undergo counselling either at a women's shelter or at their uncle's residence. The police is contemplating applying the Drugs and Magic Remedies Act on Rathod. "So far, investigations have revealed the sexual abuse that took place. We will now investigate if he also gave any medicines or carried out any kind of rituals," Jha informed. Meanwhile, the State Women's Commission has asked the Mira Road police to prepare a detailed report on the case. They are likely to meet the victims soon. The police have not conducted blood tests of the accused and victims, nor collected the clothes worn during the time of the incident as the case occurred over a period of nine years. Doctors at the Thane civil hospital have collected the victims' vaginal swabs which will be sent to the state forensic laboratory. (Times of India 23/3/09)

Number of people infected with TB and HIV increases: WHO (3)

New York: The number of people infected with both tuberculosis and HIV is twice than what researchers previously estimated, a UN health agency report said. The annual report released by the World Health Organization reveals that one out of four TB deaths is HIV related, twice as many as previously recognised. In 2007, there were an estimated 1.37 million new cases of tuberculosis among HIV-infected people and 456,000 deaths. About 700,000 people were infected with both in 2006. "These findings point to an urgent need to find, prevent and treat tuberculosis in people living with HIV and to test for HIV in all patients with TB in order to provide prevention, treatment and care. Countries can only do that through stronger collaborative programmes and stronger health systems that address both diseases," said WHO Director-General Margaret Chan. The report reveals a sharp increase in HIV testing among people being treated for TB, especially in Africa. In 2004, just four per cent of TB patients in the region were tested for HIV, in 2007 that number rose to 37 per cent, with several countries testing more than 75 per cent of TB patients for their HIV status. This figure reflects an improvement in the quality of the country data, which are now more representative and available from more countries than in previous years. However, the number of new tuberculosis cases remained stable in 2007 and the percentage of the world's population becoming ill with the disease has continued the slow decline. Because of increased testing for HIV among TB patients, more people are getting appropriate treatment though the numbers still remain a small fraction of those in need. In 2007, 200,000 HIV-positive TB patients were enrolled on co-trimoxazole treatment to prevent opportunistic infections and 100,000 were on antiretroviral therapy. "We have to stop people living with HIV from dying of tuberculosis," said Executive Director of UNAIDS Michel Sidibe. "Universal access to HIV prevention, treatment, care and support must include TB prevention, diagnosis and treatment. When HIV and TB services are combined, they save lives." TB/HIV co-infection and drug-resistant forms of tuberculosis present the greatest challenges, the report says and expresses concerns over an increasing shortage in funding. To meet the 2009 milestones in the Stop TB Partnership's Global Plan, the funding shortfall for these 94 countries has risen to about USD 1.5 billion. "The financial crisis must not derail the implementation of the Global Plan to Stop TB. Now is the time to scale-up financing for effective interventions for the prevention, treatment and care of TB worldwide," said Michel Kazatchkine, Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria. (Indian Express 25/3/09)

**Supreme Court helps HIV positive man from Bihar (3)**

New Delhi (PTI): The Supreme Court on Thursday came to the help of an HIV infected person from Bihar who was denied the second line of anti-retroviral therapy (ART) at a Mumbai-based government hospital. A Bench headed by Chief Justice K G Balakrishnan directed the LNJP hospital here to provide free

treatment to the patient who had to take the assistance of NGOs after J J Hospital, Mumbai, refused him the second line of treatment. The NGOs working in the field of AIDS control Programme had contended that he could not be denied free treatment under the programme of ART initiated by National Aids Control Organisation (NACO). Senior advocate Colin Gonsalves pleading the case of the person submitted that second line of treatment was necessary as he developed drug resistance to the first line of treatment which he had undergone in Bihar. The Bench was told that the government, which had planned to set up 60 ART centres by December 2008, had failed to come up with even one for providing second line of treatment in Bihar, forcing the HIV positive patient to move out of his state. Additional Solicitor General Gopal Subramaniam said the government will provide all possible treatment to the victim but the case of the Bihar resident should not be treated as a general one. (The Hindu 27/3/09)

### **SC to HIV patient's rescue (3)**

New Delhi, March 27, 2009: The Supreme Court on Thursday came to the rescue of an HIV positive man who was denied treatment, second line of anti-retroviral therapy (ART), by a government hospital in Mumbai. A Bench headed by Chief Justice of India K.G. Balakrishnan has asked the Delhi-based LNJP hospital to provide free treatment to Ramdev (name changed). Ramdev, from Bihar, was forced to seek help from NGOs after JJ Hospital, in Mumbai, refused to treat him. The NGOs, working for AIDS control, had contended that Ramdev couldn't be denied free treatment under the ART programme initiated by the National Aids Control Organisation (NACO). Senior advocate Colin Gonsalves said the second line of treatment was necessary, as Ramdev had developed resistance to the first line of treatment that he had undergone in Bihar. He said the government, which had planned to set up 60 ART centres by December 2008, had failed to come up with even one for providing second line of treatment in Bihar and Orissa, forcing the HIV positive patients to move out of the states. Additional Solicitor General Gopal Subramaniam said the government would provide all possible treatment to the victim; however, the case of the Bihar resident should not be treated as a general one. Gonsalves accused the government of backtracking on its promise to bring HIV positive people, receiving ART, under the Antodaya Anna Yojana Card Scheme (AAYCS). This would help HIV positive people to avail benefits like those below the poverty line (BPL). In 2008, the Centre had told the court that there was a proposal to provide benefits to those receiving ART under the AAYCS. HIV and AIDS patients were to be provided with a job card and employment in accordance with the National Rural Employment Guarantee Act scheme. However, the latest affidavit filed by the government did not mention AAYCS and job cards under NREGA. (Hindustan Times 27/3/09)

### **Live and let us live, say AIDS patients (3)**

MYSORE: The very thought of AIDS may seem awfully frightening. But meet this bunch of people tested +ve with HIV and chances are you will end up feeling the Acquired Immune Deficiency Syndrome can be overcome and the patients too can lead a contended life. However, what keeps them going is the sheer determination to live. Meet S Noori, 60, managing trustee of South India Positive Network (SIPN) and Asylum for AIDS orphaned children from Chennai, who is living with the disease for 22 years. If anybody asks her age, her cryptic reply is: "you are asking my age or my my AIDS age?" It is an indication that she has taken the disease in her stride and conquered it. She has a sordid saga of entering into prostitution at a tender age of 14 after she was orphaned following the untimely death of her parents. "With no alternative left for survival I took up the profession and got afflicted with this deadly disease," she says, adding initially it was tough to face the people. "But later I realized that I should face the people and live along with the AIDS," she says advising other patients to treat this deadly disease as any other disease and live with it. Noori also visits foreign countries to create awareness among the sex workers on HIV. Laksmi and Rashida, sex workers from Gujarat, are living with the disease for six years, but they were reluctant to disclose it. "After coming here to participate in the Positive Habba, we have decided to disclose about our suffering. Our only worry is about our children getting the right life partners. All that we tell the society is 'Live and let the AIDS patients live harmoniously'," they say. Over 500 HIV +ve sex workers from seven states are participating in the festival. Vijay from Mumbai feels such festivals act as a platform for the patients to exchange their views and ideas about the disease and government facilities available for AIDS patients. "I was tested positive three years ago. However, I neither feel guilty nor threatened as I have kept the disease under control by taking proper medications and precautions ever since I learnt about it." For the welfare of the members of their community, the workers will soon launch an HIV +ve sex workers union. (Times of India 29/3/09)

### **AIDS counselling centre at Central Jail sees encouraging response (3)**

VARANASI: Perhaps majority of the prisoners of the Central Jail here did not know that their high risk behaviour had exposed them to HIV/AIDS. But, the beginning of integrated counselling and test centre (ICTC) at this jail is enabling them to become aware about their ailments and get proper treatment as well as preventive measures. The initiative of UP State AIDS Control Society resulted in constitution of the ICTC at the Central Jail in the beginning of 2009. And, it resulted in detection of two new cases of HIV positive inside the jail. The detection of HIV positive cases inside a jail was not surprising. The increasing number of AIDS cases among the prisoners of the jails in the state that came to light in recent years compelled the agencies like UPSACO to take such initiatives. According to senior jail superintendent SC Srivastava, the UPSACO selected five jails of the state to begin the ICTC and the Central Jail was the first to get this centre. By March-end about 500 prisoners and jail staff turned up at the ICTC of the Central Jail. But the test report of 300 prisoners whose blood samples were taken from January 1 to February 28 for the tests like Comb AIDS and Bidot resulted in detection two fresh cases of HIV positive, admitted Srivastava. With this detection the number of HIV positive cases in this jail has reached three. Three prisoners at the overcrowded Central Jail had been detected AIDS victims by the mid of 2008. After their cell count was done through CD4 test at the centre of National AIDS Control Organisation at Banaras Hindu University, their treatment had been started from Anti-Retro Viral Therapy centre. Two of these prisoners were released after completion of the period of their imprisonment. After these developments the ICTC came into existence at this overcrowded jail that accommodates over 1,800 prisoners against its capacity of only 840. Counsellor of this ICTC, Awadhesh said that when he introduced himself the prisoners started turning up at his centre voluntarily. Of total prisoners who turned up to this centre, three-fourth had come voluntarily while rest were referred from the jail hospital. He said that during counselling it came to light that the two inmates with HIV positive were trucker and vendor and exposed to the disease due to their high-risk behaviour. Their treatment had also been started from ART BHU and they are enjoying normal life at the jail under the monitoring of the ICTC of the jail. Srivastava said that all the prisoners were aware about AIDS and ways of its transmission, hence their behaviour had not changed with the prisoners who had been exposed to this disease. But, as a precaution the jail authorities have cautioned the inmates not to indulge in homosexuality as it could also prove a cause of the transmission of the disease, though Srivastava claimed that no cases of homosexuality had come to light inside the jail in past two years. The ICTC of the jail has targeted to cover all the prisoners of the jail in coming three-four months while jail staff are also being encouraged to come forward for voluntary test. (Times of India 1/4/09)

### **Two day 'Partners Meet' begins with 40 NGOs participating (3)**

Mysore, Mar 31 : Nearly 150 representatives from 40 NGOs working in arresting the spread of HIV/AIDS in the state, are participating in the two-day 'Chaitra Samagama' (Partners' Meet), which was inaugurated here today by Karnataka Health Promotion Trust (KHPT) Executive Director Vandana Gurnani. The Meet was inaugurated by symbolically showing that it is a myth that HIV/AIDS was incurable. The Meet has been organised by KHPT in association with Swami Vivekananda Youth Movement (SVYM), Saragur, H D Kote. Ms Gurnani presented a paper detailing the experiences with data on strategic shifts undertaken by KHPT in its programmes. Striving for control of spread of HIV/AIDS in partnership with the trust and setting up a forum for the voluntary organisations to facilitate exchange of experiences and expertise in the field are the main agenda of the two-day meet. A panel discussion on making healthcare more accessible for target population. Dr Balasubramanya will lead the discussion. 'establishing linkages with other government departments in HIV control programme - success as challenges" will be the theme of the panel discussion (New Kerala 1/4/09)

### **Striving to prevent HIV, AIDS (3)**

MYSORE: "Chaitra Samaagama", a two-day convention of representatives of non-governmental organisations (NGOs) striving for controlling the spread of HIV/AIDS in the State, began here on Tuesday. As many as 40 NGOs, which are actively involved in the control and prevention of HIV/AIDS, are taking part in the event which was jointly organised by the Karnataka Health Promotion Trust (KHPT) and the Swami Vivekananda Youth Movement (SVYM). KHPT Executive Officer Vandana Gurnani inaugurated the event. Stephen Moses of Manitoba University, Canada, M.A. Balasubramanya of Swami Vivekananda Youth Movement (SVYM), Ananda Jyothi Network for Positive People Secretary Sharath

and others were present during the inauguration. The convention was inaugurated in a unique manner by freeing a volunteer dressed like a parrot from a cage, to show that AIDS patients can also lead their life like a free bird. On Wednesday, a panel discussion on the topic, "Establishing linkages with other government departments in HIV control programme – success as a challenge", will be held during which the participants will get an opportunity to share their experiences on the prevention of HIV/AIDS. (The Hindu 1/4/09)

### **43 NGOs engaged in combating AIDS in Mizoram (3)**

Aizawl, Apr 1 : As many as 43 non-governmental organisations (NGOs) are engaged in the 'Targeted Intervention Projects' covering the entire state of Mizoram in battling the killer AIDS. Working under the Mizoram State AIDS Control Society, the NGOs are targeting the high risk groups like injecting drug users, commercial sex workers, homosexuals, truck drivers and migrants. Directors and project managers of the NGOs held a review meeting of the projects here today wherein it was underscored that the performances of the NGOs were satisfactory. Mizoram State AIDS Control Society is regarded as one of the best performers under the National AIDS control organisation, particularly in the Integrated Counseling and Testing Centre. According to report given by Lallianzuala, consultant (UNICEF), 60-70 per cent of the HIV infected persons were not aware they had been infected with the virus. About 50 per cent of persons, who are aware they are HIV+ve, do not take anti-retroviral treatment, the report added. During 2008-2009, tests were conducted on 13,935 expecting mothers and 18,361 high risk and other groups. It is reported that 174 new cases of HIV+ve with tuberculosis were discovered from the test, and 53 HIV+ve mothers were delivered, of which 52 newborns were given Nevirapine to prevent infection from their mothers. Besides the 25 ICTCs, test can be conducted 24 hours in all the Primary Health Centres in addition to the seven private hospitals in Aizawl namely, Greenwood, Nazareth and Aizawl Hospital. (New Kerala 2/4/09)

### **HIV-hit women demand their due (3)**

BHUBANESWAR: Even as politicians appeared to be glossing over many issues during their campaign in Orissa, they might take note of some emotive matters to be raised by special category women. More than 150 women living with HIV assembled here on Sunday to draw their strategy to make poll-bound politicians understand as to how they were leading life in a society that carried a lot of misconception about the disease. In a first of its kind convention jointly being organised by Orissa AIDS Solidarity Forum, ActionAid (International charity) and the existing HIV positive networks and Sexuality Minority Groups of Orissa, HIV positive women leaders from 14 districts are fine-tuning their list of demands including second-line anti-retroviral treatment (ART) for those living with advanced HIV. "We have only three ART centres in the State. We want such centres to come up in every district. There is no provision for second line treatment. While many women have advanced to critical stage after being affected by HIV positive, political leaders should show consensus and make provision for second line treatment," said Namita Nanda, president of Shradha, a network of HIV-affected women. She said Rs. 200 was being given to disabled, widow and HIV-affected persons under Madhubabu Pension Yojna, but HIV positive women were finding it difficult to manage with the paltry sum. The amount should be raised to Rs. 500, Ms. Nanda, who did not want to hide her name, demanded. "It becomes doubly cruel in case of children. What did happen when HIV-positive parents of a child died? There is nobody to look after him. Political leaders should prepare a mechanism to shelter these orphaned children and the mechanism should be implemented whoever would come to power," she demanded. Similarly, Binita Rout (name changed) from Ganjam district came down heavily on Union Government for not passing the HIV/AIDS bill which would have taken care of all concerns of HIV positive persons. "We are facing stigma in our everyday life. Society treats us with discrimination. Women are living in such a disadvantaged position so that they cannot muster courage to raise their voice," Ms. Rout said. These women would present their charter of demands to leaders of different political leaders on Monday. (The Hindu 6/4/09)

### **HIV-afflicted seek positive action (3)**

BHUBANESWAR: Orissa has a sizeable population of over 20,000 people infected by HIV/AIDS and their number seems to be increasing by the day. While no political party has mentioned this issue in their manifesto, a group of women living with HIV, orphans, sex workers, sexual minority groups and Injecting Drug Users (IDU) got together on Monday to release a charter of demands that they want addressed by the government that comes to power. "It is ironical. Everyone finds it fashionable to talk about HIV and

AIDS. We have studied the manifestoes of almost all the parties, but none have any mention of us," said Namita Nanda, president of Shradha, an organization for women living with HIV. "People with HIV/AIDS suffer social discrimination and are ostracized. Women and children are the worst sufferers as they are punished without any fault of theirs. It is the duty of the government to provide them their right to live and live with dignity." Niraj Mishra of Solidarity Forums said, "The disease should be made a political and election issue. Political will and commitment are crucial in fighting the killer disease. Politicians could help reduce the stigma and discrimination against those afflicted by it. Also high on our agenda is pressurising the political parties to pass the HIV AIDS Bill introduced in the Parliament last year." They demanded increase in the pension from Rs 200 to 500 and to undertake comprehensive policy to provide social security mechanism for the PLHIV. They demanded availability of ATR (Anti-Retroviral Therapy) in all the districts and to make available second line ART in Orissa. Free legal services should also be provided by the government to give these people their property rights. Politicians from different parties attended the conclave and promised to fulfil their demands if they come to power. However, no one had anything to say when they were asked about how they would go about making the lives of these people better. "We know we have not made any impact on politicians. In fact, they have forgotten us. We want to remind them of our presence and want them to work for us when the next government is formed. We want to live with pride and want the parties to support us in this endeavour," Nanda maintained. (Times of India 6/4/09)

### **Ways to save future generations from HIV/AIDS discussed (3)**

IMPHAL, Apr 7: HIV/AIDS has become a burning topic in the present scenario of our state – how it is spreading, specially among the youth and how to control it. Many NGOs and organizations are working wholeheartedly to minimize it, to create awareness among the masses through campaigns and awareness programmes. And this year their target groups are the youths and the students. For they are the future generation and reaching them and making them aware about HIV/AIDS means saving a generation and even the next. Today, in a one-day HIV/AIDS awareness programme organized by AMSU and sponsored by MACS at Ananda Singh High Sec. Academy, many renowned resource persons discussed the issues of HIV/AIDS. H Pradipkumar, consultant, Youth Affairs, MACS, discussed about HIV/AIDS – how it is spread and how to control it - especially with the students present. He explained about the changes taking place in the adolescents, physical as well as biological, the instinct, drive, the impulse to experiment. He further said that they need to control such impulses and try to develop a positive attitude. Life skills will help them to say no to peer pressures, no to drugs, sex and such unwanted behaviors. Value education and life skill training will help youths and students to develop their personality in the right way. Regarding HIV/AIDS, he said proper knowledge about it will be of great help and they should take preventive measures to avoid it like using condoms, no sex till marriage, being faithful to one's life partner and so on. Students should engage themselves in something creative and develop their skills. This will help them from going astray, he added. K Langamba, ex-secretary general, AMSU, said in his speech that such awareness programmes on HIV/AIDS is the right approach. HIV/AIDS has destroyed many lives. Many youths and adults have been lost due to HIV/AIDS. Many students, who will be the pillars of the future, have also become victims of HIV/AIDS, he said adding that there is a fear in the minds of many that our state Manipur is likely to be erased from the world, what with people dying due to HIV/AIDS on the one hand and many more killed in fake encounters without any proper proceedings or trials. So the youths, especially the students, should be educated and made aware about HIV/AIDS as that they can spread the message in their homes, in their neighborhood and to their friends, thus saving the present as well as the future generations. He further said that preventive measures is the best step and for this youths and students should be helped so that their moral character and personality are properly developed from childhood onwards. AMSU, the main organizer of today's awareness programme, aims to bring about a mass awareness on HIV/AIDS, so as to save the state and society. For this, they opt to work hand in hand with NGOs, and other organizations and organize such awareness campaigns not only in the valley but also in the hilly regions. They appealed to the masses to extend their support and cooperation, so that the state can be made free from HIV/AIDS. (Kangla online 9/4/09)

### **NARI set for monitoring trends and levels of HIV epidemic (3)**

Pune: Even as the surveys in 2006 and 2007 reported a decline in HIV, the annual exercise of tapping the trends for prevalence of the virus will now begin on April 15. City-based National AIDS Research Institute (NARI) will commence the exercise for eight states from Wednesday. Dr R S Paranjape, director, NARI said that the core team of epidemiologists is located at the institute and has been involved in training the trainers on how to conduct the survey. National AIDS Control Organisation (NACO) conducts this annual exercise all over the country with the help of National Institute of Health and Family Welfare and National Institute of Medical Statistics since 1998. This surveillance monitors the trends and levels of HIV epidemic among different population groups in the country. It was estimated in 2007 that there are 2.31 million people living with HIV/AIDS in India with an estimated adult HIV prevalence of 0.34 per cent. An overall decline in HIV prevalence was also found among ante natal care clinic attendees. Dr Sanjay Mehendale, deputy director, senior grade, NARI who is coordinating the HIV sentinel surveillance programme said that NARI has been entrusted the task since 2006 for seven states of Maharashtra, Rajasthan, Madhya Pradesh, Goa, Gujarat, Dadra and Nagar Haveli and Diu and Daman and for Mumbai as a separate location. A total of 97 sites in Maharashtra, 54 in Madhya Pradesh, 46 in Rajasthan, 50 in Gujarat, 8 in Goa, 17 in Mumbai, two in Diu and Daman and one in Dadra and Nagar Haveli have been identified to conduct the surveillance. "NARI is responsible for the training, monitoring, supervision and improving the quality of the programme since 2006," says Mehendale. (Indian Express 14/4/09)

### **Treating HIV earlier cuts risk of death drastically (3)**

Toronto (IANS): Initiating anti-HIV treatment early on could cut the risk of death by up to 94 per cent, according to a study. The study said treatment should start as early as possible, which has always seemed to apply to most diseases except HIV-AIDS, which is only treated once a certain number of immune or white blood cells called CD4+ cells have disappeared. The results of the study, which involved the team of Marina Klein of the Research Institute of the McGill University Health Centre, run contrary to this consensus. The findings, based on an analysis of data from 17,517 patients between 1996 and 2005, show that the risk of death in seropositive patients decreases by 69-94 percent if they start treatment earlier than officially recommended. Seropositivity is development of neutralising antibodies in individuals who have been exposed to the human immunodeficiency virus (HIV). More precisely, the risk of death decreases by 94 percent for patients who begin anti-HIV treatment when their CD4+ cell counts are above 500 cells per mm compared with those who start with a count below 500. Patients who begin treatment with a CD4+ cell count between 350 and 500 cells per mm see their risk of death reduced by 69 percent compared with those who begin at a lower count of 350. "The official guidelines recommend starting anti-HIV treatment when the patient's CD4+ cell count is less than 350 cells per mm. This recommendation was formulated from data based on older medications that produced more side effects than current treatments," explained Klein. "Current therapies cause fewer side-effects, are better tolerated and more effective so we can safely start treating patients earlier." This study is the first of its scope to measure the risk of death based on the progress of infection at the start of treatment. The information was drawn from a number of databases in North America, including one managed by Klein at the Montreal Chest Institute, said a McGill release. (The Hindu 15/4/09)

### **Rahman to perform for HIV+ children (3)**

Thiruvananthapuram (IANS): Malayalam superstar Suresh Gopi has a new mission in his life - a school for HIV positive children. And joining him is double Oscar winner A.R. Rahman who will stage a musical night in Kerala for free. 'Jai Ho' musical night is scheduled for May 3 at the Corporation Stadium in Kozhikode. Rahman and his 103-artist group will perform in front of an expected 50,000 strong crowd. The proceeds of the night will go towards the building of the school. "We expect to raise Rs.15 crore (Rs.150 million) from the sale of tickets and sponsorships. After meeting the expenses, we target a figure of Rs.10 crore (Rs.100 million), which would be the first capital for the school," Gopi told IANS Tuesday on the sidelines of a function held for the sale of tickets. The programme is being held under the initiative of Global Kerala Initiative-Keraleeyam, an NGO of which Gopi is a patron. "The ideal location for the school should be somewhere in the central districts of the state. It will cater not only to the HIV positive children from Kerala but also from neighbouring states. If everything goes as planned, the school should be ready in two years time," Gopi said. Gopi said that he has already spoken to state Education Minister M.A. Baby and got an "excellent response" from him. According to Gopi, there are close to 100 HIV positive kids in state. "What wrong have these hapless kids done to get this dreaded disease? Their sufferings begin right from the day they are born and even before they learn to begin their lives. They are

shunned by the society for no fault of theirs," pointed out Gopi. The proposed school would be fully residential with all amenities and will also have the best of faculty, he added. The actor said that the NGO will distribute 'hundis' (copper vessels) among the people to encourage them to save at least Re.1 a day for the project. "We will be distributing 1 lakh (100,000) hundis to people and they will be opened after a year. This will also be added to the kitty for the school project," Gopi said. (The Hindu 16/4/09)

### **Chennai to be centre for drug, HIV prevention activities in prisons (3)**

CHENNAI: The United Nations Office on Drugs and Crimes (UNODC) will promote Chennai as a centre for Drug and HIV prevention activities in prisons in South Asian countries. The programme is aimed at showcasing best prison practices when it comes to drug prevention, de-addiction and rehabilitation, UNODC Prison Expert, Jayadev Sarangi, said. "We are impressed with the work of the Tamil Nadu Prison Department in HIV and drug prevention. Though our core area is prison reforms, the thrust remains on drug prevention and de-addiction. Chennai can not only cater to the needs of prisons in southern states, but also in countries such as Sri Lanka and Maldives," he told The Hindu on Wednesday. Dr. Sarangi, who was here to hold preliminary discussions with Director General of Prisons R. Natraj, visited the Puzhal Central Prison. He said UNODC would facilitate in enhancing the counselling skills of prison staff by organising training in capacity building. "We intend to hire resource persons who would share their expertise in management of drug addicts... our office will also provide basic infrastructure and supply medicines for de-addiction process. Prison officials of other countries/States can participate in these activities and adopt the schemes as per their local conditions. The UNODC has operations in all the South Asian Association for Regional Cooperation (SAARC) countries." The UNODC official took part in an Alcoholics Anonymous and Drug De-addiction awareness programme in the Puzhal prison. "It is a welcome move that Chennai will become a nodal centre for prison reform activities. We have about 110 prisoners tested positive to HIV in the State. While 20 inmates volunteered to undergo de-addiction process, there could be many more who might come forward after some counselling. Prison officials have been told to identify drug addicts in all prisons," Mr. Natraj said. He said the UNODC programme on de-addiction in the Puzhal central prison would be launched in a couple of months in association with the T.T. Ranganathan Clinical Research Foundation, Chennai. (The Hindu 16/4/09)

### **AIDS NGO charged with funds misuse (3)**

MUMBAI: In a first of its kind, a voluntary organisation working in the field of HIV/AIDS has been charged with cheating, misappropriation of funds and harassment of HIV+ persons by a government body. The joint chief of the Mumbai District AIDS Control Society (MDACS), Harish Pathak, lodged a complaint with the Goregaon (W) police, levelling these charges against the NGO, Sanmitra Trust, on Tuesday after he received written complaints from 11 current and former employees, earlier in the day. Brushing aside all allegations, NGO officials, however, said the civic body had been trying to evict them from the hospital premises and the police complaint was merely a new pressure tactic. The MDACS move is significant as it is the first time that a government body has actually initiated action against an NGO working in the HIV/AIDS sector after the World Bank raised a stink about corruption rampant in NGOs working in the field in late 2007. (see box). "We received complaints from employees and initiated action as there seems to be some truth in the allegations," said Dr Pathak, joint director of MDACS. For instance, the NGO had been claiming funds from the MDACS for staffers, but the money was not disbursed among employees, he added. The staffers, many of whom are persons living with HIV/AIDS (PLHAs), have also complained that their HIV-positive status was revealed to visitors coming to their office without their consent and alleged that the trust has been paying them salary less than that sanctioned by the MDACS. The trust receives around Rs 22 lakh from the MDACS for its various projects annually. TOI has a copy of the complaint letters submitted by the employees. An outreach worker said the NGO earlier paid them Rs 2,500 per month as opposed to the MDACS-sanctioned Rs 2,750. When the sum was raised to Rs 5,000, they were given only Rs 4,000. "The NGO took a cut in the salary without us knowing about it. They also made us sign on blank vouchers," said an employee, adding that their complaints to trustees had fallen on deaf ears. Prof Prabha Desai, chairman of Sanmitra Trust, known for its work since 1999, in her turn, said the trust "had high accounting standards" and was ready to face any inquiry. "They have tried to evict us from the hospital premises and wanted total closure of our projects. Since we refused to leave, the MDACS has been torturing us. This is a pressure tactic," she said, adding that the allegations were "all cooked up" and that the MDACS had roped in HIV-positive persons to make false complaints. "Fourteen of our employees lost their jobs after MDACS closed the projects. Those who have lost their jobs are

making allegations," she said. Denying the claims of misappropriation of funds, she claimed the MDACS had asked them to give travel allowances without vouchers and had been harassing her, after she objected. "The MDACS hasn't issued any showcause notice. Why did they go to the police when they have the authority to audit our accounts?" (Times of India 22/4/09)

### **HIV man threatens to kill himself (3)**

CHANDIGARH: An HIV positive man raised the roof at central treasury office on Wednesday when he threatened to kill himself following UT reportedly turning a deaf ear to his pleas for the job of a chowkidar for the past two years. Visibly running out of patience, Rakesh Kumar, 30, approached joint financial commissioner Raji P Shrivastava, special secretary finance, and warned her that if he further remained unemployed, something drastic could befall him. I have been trying my luck at private places also but my HIV status comes in the way, said Kumar. Apparently living under squalid conditions with a friend who sometimes helps him with finances, Kumar claimed, Whatever little money I have is spent on my treatment which costs around Rs 10,000 a month. I won't be able to continue this way without a job. I have also written to the governor and deputy commissioner, but none has come forward with help. Confirming Rakesh's fit of anger, Shrivastava added, He has written a complaint in which he has held me culpable for anything that may happen to him. But he is demanding a job which has not been advertised. Moreover, I can't give him a job without following procedures. He's also overaged to get the chowkidar's job. Stepping in at this juncture was State AIDS Control Society, which hoped to help provided the election commission did not object to work being offered at a time when elections were on in the country. Integrated Counselling and Training Centre will have an opening of 10 posts for HIV positive people with a monthly salary of Rs 3,000 as part of its outreach program. We have requested the election commissioner to exempt these recruitments from model code of conduct, said Vineeta Gupta, director, UT SACS. (Times of India 23/4/09)

### **Review of HIV awareness programmes held (3)**

PERAMBALUR: The Perambalur district branch of the Indian Red Cross Society (IRCS) in association with the World Vision India organised a day-long district level NGO meet with the objective of analysing the effectiveness of the HIV / AIDS awareness programmes being implemented in the district. The meet also framed out the action plan for the effective implementation of the awareness programmes in future. Participants representing various NGOs discussed different issues from their own views and experiences. Based on their discussions, an action plan was prepared for carrying out future activities. The action plan favoured differentiating the target people including sex workers, transgenders, students, etc., and giving awareness uniquely based on the need. All the television channels should have special telecast time for social awareness programmes and the government should enact legislation in this regard. The other decisions taken at the end of the discussions included forming cultural groups in the community for outreach programmes, educating the teachers, parents and students, utilising the services of NSS, NCC and YRC students for the awareness programmes and creating a guideline centre. Honorary Chairman of Perambalur branch of the IRCS K. Varadharaajen, in his special address, highlighted the high risk stage of the present youth and need of the effective awareness programmes for them. IRCS vice-president M. Thangaraj discussed about the physiological and medical aspects and facts about HIV /AIDS. He insisted on the effective programme implementation for preventing the spread of AIDS among the younger generation. IRCS Honorary secretary I. Cicil Ignatius gave a brief introduction about the history of the Red Cross movement and the various activities launched by it. The Programme Manager, World Vision India, Vani Victor, Sahaya Prabhu, Community Development Coordinator, Paster Agestine Gandhi of CSI Church, Manisha Gowrala and Lavayna of the Transgenders Association also spoke. The programme commenced formally with the dignitaries jointly unveiling the portrait of Jean Henry Dunant, Founder of the Red Cross movement. Over 40 NGOs working in the field of HIV / AIDS projects including Indo Trust, Andimuthi Chinnapillai Trust, Perambalur Social Service Society, Perambalur Positive Network, Human Uplift Trust (HUT) and REEDA participated in the programme. (The Hindu 1/5/09)

### **Nearly 20,000 infected with HIV in Iran report (3)**

Tehran, May 03, 2009: At least 19,435 Iranians have been infected with the HIV virus, with more than 1,000 new cases recorded since December 2008, the ISNA news agency reported on Sunday, quoting the health ministry. Of those infected, 1,875 are already confirmed as having AIDS, it said. It said the highest rate of HIV infection, 40.2 per cent, was among the 25 to 34 age group, with most victims being

men. Males accounted for 93.3 per cent of all infected cases. With testing facilities limited and HIV-infected people or those living with AIDS often unwilling to come forward, the health ministry estimates that Iran actually has 80,000 HIV cases -- four times higher than the registered figure. According to official ministry figures, however, at least 3,236 people have died in Iran after developing full-blown AIDS, although the report did not say when such deaths started being recorded. The main cause of infection remained intravenous drug use, the report said, with 77.5 per cent of people contracting the virus this way. Infection through sexual contact accounted for 13.1 per cent, while transmission from mother to baby accounted for 0. (Hindustan Times 3/5/09)

### **Jail status report (3)**

Imphal, May 02 2009: Prison expert of the United Nations has collected a report on conditions of the people currently imprisoned in Central Jail Sajiwa and Central Jail Imphal in connection with drug abuse and related crimes. UN prison expert Dr Jayadev Sarangi collected the report on drug abuse and related crimes at Imphal in the last two days (April 30 and May 1), informed an official source. Dr Sarangi visited Central Jail Imphal and Central Jail Sajiwa. There Sarangi interacted with drug addicts and other inmates imprisoned with drug related crimes as well as with jail staff. The UN expert also talked with activists of NGOs working in the field of HIV/AIDS. Dr Sarangi also collected reports on the situation of HIV in Manipur from the NGOs. He also held meetings with MACS project director/commissioner Vulumthang on the prevailing situation of drugs, crimes and HIV/AIDS in Manipur and with the Additional Chief Secretary (Home) DS Poonia. (E-PAO 3/5/09)

### **Some home truth for elders living with HIV (3)**

Vadodara: The first of its kind Old Age Home for people afflicted with HIV/AIDS, by the Government of Gujarat (GoG), now seems to have hit a stumbling block. The issue in question is that of the seven acres of land that was to be given for the said project. The Vadodara-based NGO, Lakshaya, which is headed by Prince Manvendrasinh Gohil, had mooted the idea to set up the home on the banks of the Narmada, at Kumbeshwar village in Nanod taluka of Narmada district. Jayant Trivedi, an NRI, had given five acres of land in the same area for the project and had approached the state government for another seven acres of land. Gohil said: "Six months ago, Trivedi donated his share at Kumbeshwar and approached the government for seven acres of land. The GoG agreed and asked Trivedi to undergo a few procedures." The protocol was duly followed, but Gohil was recently told that the land belongs to the Forest Department. "Earlier, we were told that the land was declared waste and could be given for the Old Age Home. Soon after we approached the district administration, the area was fenced overnight," said Gohil. He added: "Trivedi has donated his five acres of land, and we will continue with the project, but not up to that extent. The figures of Lakshaya show that there are 50 HIV/AIDS patients in Narmada district alone. I am well aware of this fact that the district administration has fenced the land for afforestation. They will grow trees, but the survival rate is always a riddle. I support the concept of growing trees. The point is, how serious is the administration and why has it realised it suddenly." (Indian Express 5/5/09)

### **Swine flu: WHO warns HIV-infected (3)**

New Delhi: People with HIV infection are at greater risk of contracting the deadly swine flu virus and should be considered as "priority population" for preventive strategies, the World Health Organisation (WHO) has said. According to the international health organisation, "HIV people should be among those prioritised for anti-viral treatment with Oseltamivir or Zanamivir which shortens illness duration and severity of seasonal influenza. Individuals with advanced HIV infection may not mount an adequate antibody response to the influenza vaccine. They are one of the groups of people who can be affected more than people who are healthy." Keeping in view their high vulnerability, the WHO has advised countries that their pandemic preparedness plans for influenza should, therefore, address the needs of HIV-infected persons, especially in high HIV prevalence countries. The WHO proposes to monitor this vulnerable group carefully as the virus spreads. However, India, which has a huge HIV-infected population, is waiting for the virus to erupt in India before taking any precautionary measure for this susceptible group. "There is no question of giving extra attention to the people with HIV infection when India is free from the virus. Let it reach and then we will see what has to be done for the HIV-infected people," said a senior official in the Union Health Ministry. According to Dr B B Rewari, ART consultant with the department of AIDS control, "while HIV-infected people are prone to all sorts of infections, they are as protected as anybody else is if their CD count is fine. HIV patients have been instructed

accordingly for travel henceforth." Meanwhile, 22 countries have so far officially reported 1,516 cases of influenza A (H1N1) infection. (Indian Express 7/5/09)

### **Only 39% sex workers know about HIV prevention: Study (3)**

PANAJI: After the demolition of the Baina red light area in 2004, only one in five female sex workers in the state have had access to the free condoms provided by the National AIDS Control Organisation (NACO). This number should have been close to 80% as envisaged under the national AIDS control programme. Further, with sex workers in Goa now widely dispersed, only 38.7 % have had exposure to HIV prevention methods while 30.7 % have no knowledge of the disease. Moreover, only 21% female sex workers (FSWs) have been able to avail of free condoms from the government or NGO. While 15.8% don't use condoms, another 29.7% were forced to indulge in sexual activity sans any protection. In a majority of cases, however, customers tend to bring condoms to the FSW, reveals a study titled, "The burden and determinants of HIV and sexually transmitted infections in a population based sample of female sex workers in Goa". Conducted by two NGOs, namely Sangath and Positive People, it is published in the journal, Sexually Transmitted Infections' in 2009. NACO classifies FSWs in the high risk group and, to ensure an overall reduction in the epidemic, their targeted interventions are aimed to effect a behavioural change through awareness. "Youth and illiteracy, indebtedness and support of dependents, migrant status and exposure to violence, limited access to HIV prevention and sexually transmitted infections (STI) treatment services, contribute to the vulnerability of sex workers," said Maryam Shahmanesh, who is part of the study. The Goa State AIDS Control Society (GSACS) project director Pradeep Padwal said that the mapping of areas where the "needy" are placed is in progress. "We have to identify where the needy are or, conversely, they will have to approach places where we are based. We are trying our best to reach the needy," he said. However, this is easier said than done. "Sex workers have spread across the state. NGOs don't have access to them and they don't want to avail of government facilities for the fear of being identified or stigmatized," said Arun Pandey of Arz, an NGO which was used to work with trafficked victims at Baina. The study comprises a sample of 326 female sex workers in the state. It reveals that infections were common with a 25.7% prevalence of HIV and 22.5% prevalence of bacterial STIs in sex workers. A majority of the FSWs studied are in the age group of 21 and 25. While most were from Karnataka, there were about 54 from Goa and 37 from Andhra Pradesh selected for the study. Sex workers are widely dispersed; practising in 557 different lodges, establishments and other areas. While 57.8 % resort to bar, lodge or brothel-based sex work, there are about 28% home-based sex workers and 22.7% street-based sex workers in Goa after the demolition of the Baina red light area. About 20.6 %, FSWs started young, at the age of 16, the study added. (Times of India 8/5/09)

### **HIV+ women close ranks in unequal battle (3)**

Lucknow: With the number of HIV positive women on the rise in the state, the Uttar Pradesh Network of Positive People (UPNP), a motley group of HIV positive people with nearly 6,000 members, is organising a two-day convention to discuss the problems faced by the afflicted women. There are 2,500 women members in the group, of which around 400 are widows left to fend for themselves by their in-laws. In the absence of any support like pensions or employment, many of them, tagging along their children, are fighting a battle for survival. The two-day convention in Lucknow beginning Saturday will focus on the problems faced by the HIV positive women in the state. "In India, being HIV positive is a social problem and not a medical one," says Ajita Yadav (name changed), a member from Allahabad. There are horror tales the members recount. Meena Gautam (name changed) of Ghazipur was thrown out of house by her in-laws when her husband, working in a Mumbai factory, died of AIDS. "They all held Meena responsible for his condition although it was the other way round. And when they realised even she is HIV positive, they made her an outcast. Meena now lives alone in another village and is doing menial jobs to support herself and her two children. She gets some medical support from the government but there is no nutritional support as she is very poor," says Anita Maurya from Ghazipur. Similarly, Lakshmi of Gorakhpur (name changed) was also spurned out of her house after her husband, an HIV positive, died of TB. (Indian Express 10/5/09)

### **HIV positive housewife wants to live, save foetus (3)**

Tatipaka (Konaseema): The social stigma attached to HIV/AIDS seems to be slowly disappearing, particularly in rural areas. Urbanites may have some inhibitions, but innocent villagers, like those in

Tatipaka, are treating two HIV positive persons with no discrimination. On Friday night, a couple, B. Muneeswara Rao and Umamaheswari, attempted suicide in Pasarlapudi village, Mamidikuduru mandal, in East Godavari district. They had married only eight months ago. Recently, she tested HIV positive following a test conducted in a private hospital. She was also found to be three months pregnant. Her husband Rao was asked to go for a test and he also tested positive. Ms. Umamaheswari's relatives supported the family and assisted her in going to hospital once a week. However, the couple discussed their HIV cases at length during the nights for a month. On Friday they consumed pesticide and Rao died on the spot. She was rushed to Tatipaka hospital. However, on Saturday, the additional DMHO who is the AIDS control officer, Pavan Kumar, went to Tatipaka to counsel Umamaheswari. He was left with the choice of shifting her to Razole hospital where a gynaecologist is available. Meanwhile, Ms Umamaheswari told her relatives that she will fight back to save herself and the foetus. (The Hindu 11/5/09)

### **Over 30,000 HIV positive cases in Manipur (3)**

IMPHAL, May 10 – Amidst all the outcries against the numerous human rights violations and atrocities occurring in Manipur, HIV/AIDS still remains, perhaps, one of the biggest issues of the State with the stigma and discriminations surrounding it besides over 30,000 HIV positives recorded in the State. However, of lately, the issue has been directed towards children living with the disease and their welfare, especially education. Taking up one such initiative is the Carmelite Sisters better known as Nirmalabas sisters which established the Carmel Jyoti, a care centre for children living with HIV/AIDS. Set up on February 20, 2008, the Centre supports about 45 HIV/AIDS infected and affected children out of which 24 are on ART and looks into their education. Addressing the foundation day here recently, Sister Pauline George asserted that the main objective of Carmel Jyoti was to give education to the poor. Organised jointly by the Carmel Jyoti family, CRS partners, Manipur Network of Positive People (MNP+), SASO, Kripa Foundation, Bosco Mangal, Sneha Bhavan and Congregation of Mount Carmel (CMC) at Luwangsangbam Mantripukhri, the occasion called for more care of the children who were in need of special care and support. The occasion further called for education of these children. Many of the children at the Carmel Jyoti talking to the press narrated of a change in their lives after having come to the Foundation and being taken care of by the Carmelite Sisters. MNP+ along with other noble philanthropists launched education support of 40 children from six districts living with the disease on January 18 this year. Abjiram Mongjam, joint director, Manipur AIDS Control Society (MACS) called on the philanthropists and the general public to take up initiatives and not wait for the government to do something about these children especially in education. No doubt, HIV/AIDS is a major issue in the State. However, the issue has become a matter of great concern in the State especially in terms of their health conditions and education. Besides these, the stigma and discrimination surrounding them has also become a major issue. In the recent past, many organisations had called for an end to such stigma and discrimination attached with the disease which eventually affects the infected and the affected. (The Assam Tribune 11/5/09)

### **One HIV+ child, many HIV orphans find new parents (3)**

Pune: Five years ago, when the Shah family from Thane adopted an HIV-positive child from Society of Friends of Sassoon Hospital (SOFOSH) in Pune, those working in the adoption agency thought the tide had finally turned. But that first adoption remains the last from any such agency. What is raising fresh hopes is the trend of families adopting children of HIV-positive mothers. Over the past 10 years SOFOSH has successfully placed for adoption 103 children, born of HIV-positive mothers but themselves HIV-negative. "Also significant is that unlike earlier, when only foreign couples would go for such adoptions, in the last 3-4 years local or NRI parents have taken this step," said Madhuri Abhyankar, SOFOSH director, who reads this as a change in acceptance level. Bhartiya Samaj Seva Kendra (BSSK) has seen about 25-30 adoptions of children of HIV-positive mothers in the last few years. "The major concern adoptive parents have is that the child should not contract AIDS later. That's when our doctor explain to them that if the child is ELISA positive but tests PRC negative at age 18 months, it means he or she is like any other normal child. If anyone wants to take a second medical opinion we encourage them to do so. Once the family doctor says the same thing, the hesitation goes," said Maina Shetty, assistant BSSK director. No child's medical history is hidden from adoptive parents. "Every month we have parent preparation workshops where remaining doubts are cleared," Abhyankar said. Many children come from hospitals

after the death of their HIV-positive mothers; many other afflicted mothers on their own give up their child after delivery (Indian Express 13/5/09)

### **HIV: second line treatment needs focus (3)**

Rajahmundry: The second line treatment for HIV positives is missing in East Godavari district as the number of such cases for Anti-Retrieval Treatment (ART) centre at district headquarters is increasing day after day. Over 3000 HIV positives have been registered in Kakinada ART centre and out of which there are 700 dropout cases who are not turning up at the centre due to failure of follow-up and concentrated monitoring by doctors. The second ART centre at Rajahmundry, which opened almost six months ago, is yet to open its account as there is no medical officer to look after it. The efforts of district AIDS nodal officer to bring a doctor to the centre failed and pressure on Kakinada centre mounts due to awareness in HIV positives in recent times. According to Dr. Pavan Kumar, nodal officer for HIV/AIDS, the percentage of HIV cases is 8.56 per cent till July last year, but there is little alarming in the case of anti-natal positive cases where the percentage is 18.4. Among the 44,794 cases tested, the pregnant women with HIV positive are 8,233. However, it is shocking that the HIV is spreading in agency areas also in East Godavari. The district nodal agency has identified 45 anti-natal cases and spoke to ITDA project officer Yogita Rana to bring them to Kakinada ART centre for treatment. Apart from these cases, positives among the tribal men are also in good number, who are not coming to testing centres. "We want to strengthen outreach workers network first to track down 700 dropouts and take follow-up case by case. We also want to see that Rajahmundry centre should also function to minimise the pressure on Kakinada." However, he has admitted that there is shortage of ART drugs, which are very costly, in the beginning, but it is sorted out. But, NGOs, who are working in this field, are complaining that second line treatment is missing in ART centres and drug supply is also not on time (The Hindu 14/5/09)

### **Govt hospital staff in UP identify HIV-positive patient, refuse aid (3)**

Allahabad: In open violation of the guidelines of National AIDS Control Organization (NACO), the staff of state-owned Swaroop Rani Nehru hospital, a part of Moti Lal Nehru Medical College, brazenly pasted an 'HIV' sign on the wall behind the bed of a patient and refused him treatment. The HIV positive man from Pratappur block, suffering from acute infection, was brought to the SRN hospital on Tuesday. The doctors initially refused to admit him, said sources. They relented only after the Allahabad Network for People Living with HIV Positive (ANP Plus) took up the matter with the district magistrate and the hospital administration. The next morning, the staff wrote "HIV" on a piece of paper and pasted it on the wall behind his bed in surgical emergency ward. When the attendants of patient objected and reported the matter to ANP Plus, the sign was removed on the instruction of Dr Amitabh Upadhaya, anti-retroviral officer of SRN hospital. (Indian Express 22/5/09)

### **Wrong HIV report: Hosp transfers errant staffers (3)**

MUMBAI: A month after Goregaon (E) resident Firdos Sagar was given a report erroneously labelling her as HIV-positive at civic-run M W Desai Hospital, the apex AIDS body--Mumbai District AIDS Control Society (MDACS)--has transferred two staffers and issued them warning memos. TOI reported on Wednesday how a Goregaon couple had complained to various agencies after mother-of-two Firdos had a miscarriage allegedly because of the trauma she underwent after she was handed an HIV-positive report. Two subsequent tests at other hospitals showed she was HIV-negative. AIDS chief S Kudalkar told TOI on Thursday that the agency had taken a strong note of the incident and passed instructions to all testing and counselling centres to strictly follow counselling guidelines. "Lab technician Sheetal Salve and counsellor Raju Choure were issued warning memos and transferred out of the hospital as they were wrong," said Kudalkar. It now emerges that Firdos had gone for the test as part of a procedure for medical termination of pregnancy. Her husband, Naazim, said he had raked up the issue only because he didn't want anyone else to suffer the agony that he and his wife went through because of a wrong report. (Times of India 22/5/09)

### **Abusive relationships raise women's HIV infection risk (3)**

Washington, May 22 : Women who are in physically abusive relationships are at higher risk for HIV infection, reveals a new US study. The study, which involved nearly 14,000 women, appears in the May/June issue of the journal General Hospital Psychiatry. The research shows that "intimate partner violence," which is physical or sexual assault of a spouse or partner has become a significant public

health concern around the world. Researchers led by Jitender Sareen, M.D., used data from the National Epidemiologic Survey on Alcohol and Related Conditions, which conducted interviews with women ages 20 and older during 2004 to 2005. They analyzed information from 13,928 women who reported being in a romantic relationship during the last 12 months. Researchers asked the women whether they had experienced physical or sexual violence from their partner during the last year, and whether they had received a diagnosis of HIV during the same time. The researchers found that 5.5 percent of the women in relationships reported abuse by their partners. The rate of HIV infection in the women was 0.17 percent. The results showed that women who experience violence from their partners were more than three times as likely to have HIV infection as women who do not. In addition, almost 12 percent of HIV infection among women was due to intimate partner violence. "These numbers are solely due to forced sex on women from their infected partners. It is a substantial percentage," said Sareen, an associate professor of psychiatry at the University of Manitoba in Canada. "This is a very large sample of people and, on methodology side, it's a decent study, so people will need to pay attention to it," said Julia Heiman, director of The Kinsey Institute for Research in Sex, Gender, and Reproduction at Indiana University. "The relationship between the two is definitely known worldwide," Heiman said. "The partner violence issue, however, is an important one that often gets lost. The numbers that the researchers found should make people take notice that partner violence is definitely a risk factor for HIV," she added. (New Kerala 23/5/09)

### **Positive people network gives hope to HIV patients (3)**

ALLAHABAD: Akash was found to be HIV+ eight years ago. He was thrown out of the ICU and looked down upon by everyone. "Everything around me was dark and horrifying. I was on the verge of committing suicide when I met a doctor who told me that I had another 20 years to live and that too with a purpose," Akash says. Today, he is working with Allahabad Network for People living with AIDS/HIV (ANP+). Ratna, too, works with this Network. "My world crumbled when I realised that I was HIV+. But, I was motivated to take care of myself and work for others like me," she says. Today, she helps patients for their check-ups at ART centre in SRN Hospital and arranges for all other base line tests, medicines, counselling and other logistics required for them. "Even a slight indication of HIV+ status shatters a person. It is pertinent to talk to such persons, encourage and motivate them. We need to make them believe that HIV+ does not mean the end of life. By disclosing our status to them we give them hope that they too will live," Ratna adds. The Network works for capacity building of HIV+ people. It provides advocacy, pre-counselling, post counselling and peer counselling as also facilitating health services, government and non-government schemes, employment opportunities for them. It is mainly involved in spreading awareness regarding AIDS, and motivating AIDS patients to take the prescribed medicines regularly and the required precautions without fail. Even today AIDS is a dreaded word and hence persons afflicted with AIDS are victimised and discriminated against in educational institutions, work places and even hospitals. "There are many cases when patients with AIDS were not admitted in hospitals and we had to take it up vociferously with higher authorities," says Vimlesh Kumar from the Network. There is a need to ensure a continuous supply of second line medicines, medicines for Opportunistic Infections (OI) and availability of blood for HIV+ patients. We need to make all these easily accessible to AIDS patients in hospitals, adds Mohd Alam Ansari. "It is important that we move beyond fear and ignorance and embrace people living with HIV and AIDS by replacing stigma and discrimination with understanding and support," says Dr Amitabh Upadhyay from ART centre, SRN Hospital. Dr Meesham, district Aids control officer too agrees and adds, "we need to increase access to prevention, treatment and cure of HIV and AIDS. Let us all be a part of the solution and spread awareness regarding HIV and AIDS." (Times of India 24/5/09)

### **4,200 HIV positive cases in Dharmapuri (3)**

Dharmapuri (PTI): As many as 4,200 HIV positive cases have been identified in Dharmapuri district, official sources said. All the infected persons were given treatment in various Anti Retrieval Therapy (ART) centres, Dothurai, Personal Assistant to Collector said, while speaking at a workshop on 'HIV and AIDS', jointly organised by Tamil Nadu Aids Control Society (TNSACS) and Dharmapuri district administration. Special awareness camps were being conducted and the district administration was also distributing various welfare assistance to the infected persons, which include sewing machienes, house site pattas and also bank loans. (The Hindu 25/5/09)

### **'Don't discriminate against those living with AIDS' (3)**

Belgaum: Members of various non-governmental organisations, community-based organisations and officials of the Health Department joined hands with Spandana, a network of people living with HIV, to pay homage to those who lost their lives to HIV and AIDS by observing "International Candlelight Memorial Day" here on Saturday evening. Flagging off a candlelight procession, Spandana president Mahantesh Mali expressed his gratitude to those who gave him moral support to lead a happy life despite being infected by HIV. In his appeal to the people, he pleaded against discriminating those living with HIV/AIDS. Ravi Basaralli, Joint Secretary of the zilla panchayat, said information and knowledge of HIV and AIDS played an important role in the treatment of the disease. District Surgeon Ashok M. Murgod said efforts were on to find a vaccine for prevention of HIV. Spandana counsel Nagarathna said that social stigma and discrimination killed more people than AIDS. However, the situation was changing as HIV infected people were being accepted by general public. She said HIV positive people lose immunity and were prone to diseases such as TB, diarrhoea, etc. Providing medicines for such people should be the priority of government hospitals. (The Hindu 25/5/09)

### **State Information Centre on HIV/AIDS inaugurated (3)**

CHENNAI: State Information Centre on HIV/AIDS was inaugurated by Health Minister M.R.K.Panneerselvam at the office of the Tamil Nadu State AIDS Control Society here, on Friday. TANSACS, along with its partners, has put together a library containing various types of awareness materials. The Society's own publications, and flipcharts, research studies including periodic surveillance reports produced in collaboration with the AIDS Prevention and Control Project and the Tamil Nadu AIDS Initiative, Voluntary Health Services, including the periodic surveillance reports, handbills, and audio-visual equipment are on display. Visitors can use the materials placed there for reference and information, but can also take away materials which they can use to generate awareness in their areas. Audio-visual tools have also been placed at the centre for the use of visitors. V.K.Subburaj, principal secretary, Health and S.Vijayakumar, project director, TANSACS, were present during the inaugural function. (The Hindu 30/5/09)

### **HIV/AIDS patients rely on marijuana (3)**

An international study suggests that a significant percentage of HIV/AIDS patients use marijuana to alleviate their symptoms, and rate it as HIV/AIDS patients relying more on marijuana than prescription drugs to ease symptoms (Getty Images) effective as prescribed or over the counter (OTC) medicines. Scientists associated with the University of California, San Francisco (UCSF) International HIV/AIDS Nursing Research Network have revealed that patients generally use marijuana as a symptom management approach for anxiety, depression, fatigue, diarrhoea, nausea, and peripheral neuropathy. They made these findings while examining symptom management and quality of life experiences among those with HIV/AIDS in the US, Africa, and Puerto Rico. The purpose of their study was to gain a fuller picture of marijuana's effectiveness and use in this population. Along with data from a multi-country randomised control clinical trial, the researchers used four different evaluation tools to survey demographics, self-care management strategies for six common symptoms experienced by those living with HIV/AIDS, quality of life instrument and reasons for non-adherence to medications. The researchers found that the participants who used marijuana rated their anxiety significantly lower than those who did not, and that women who used marijuana had more intense nausea symptoms. For those who use both marijuana and medications for symptom management, antidepressants were considered more effective than marijuana for anxiety and depression, but marijuana was rated more highly than anti-anxiety medications. The participants who used marijuana were less likely to comply with their regime of anti-retroviral (ARV) medications. But those who used marijuana to target a particular symptom were actually more likely to stick closely to their ARV regimen too. The researchers say that patterns of how marijuana use interferes with patients' adherence to medication regimens, along with other drugs, warrant further study. According to them, data suggest that marijuana is a trigger among those susceptible to psychosis, and is also associated with the risk of suicidal thoughts. But it is not linked to an increased risk of lung cancer. The question of the use of marijuana for symptom management when legal drugs are available remains a practice and policy issue. "Given that marijuana may have other pleasant side effects and may be less costly than prescribed or OTC drugs, is there a reason to make it available? These are the political ramifications of our findings. Our data indicate that the use of marijuana merits further inquiry,"

says study leader Inge Corless The study has been published in the journal Clinical Nursing Research. (Times of India 31/5/09)

### **NACO launches programme for HIV prevention among truckers (3)**

New Delhi (PTI): Away from homes and families, they spend hours at the wheels and this tiring schedule of millions of truckers drive them to unsafe sex, making them a potential target of HIV/AIDS. The nearly five-million strong population of truck drivers and other crew are considered a potential medium for transporting AIDS virus from high-risk groups like sex workers to their regular partners or wives. To thwart the menace of the "rippling" spread of HIV/AIDS, the National Aids Control Organisation has launched a programme for HIV prevention among truckers. The programme launched by NACO under its National Aids Control Programme-III involves raising AIDS awareness and promoting safe sex through use of condoms at transport hubs in the country, Dr A K Khera, Additional Director General NACO told PTI. A total number of 131 such locations have been identified across the country and NACO has tied up with the Transport Corporation of India for technical and logistical support for execution of the programme. In the national capital, it has identified three areas Azadpur Sabji Mandi, Tughlakabad container depot and transport centre, all the three places see heavy movement of truckers. The truckers are a critical group because of their "mobility with HIV", said Dr. Khera and can carry the virus from high prevalence areas to a lower ones. Dr. Khera said the AIDS prevalence among truckers and the migrant population is nearly three times higher than that among the general population. Among sex workers this rate is more than 10 times higher as compared to the general population. "Quite often these truckers are clients or partners of male and female sex workers because of their separation from regular partners for long time. Such sex practices make them vulnerable to sexually transmitted disease which they can transmit to other persons," Dr. Khera said. He said that women constitute forty per cent of the total of 2.3 million HIV positive people in the country. The TCI, which is among the Technical Support Group of NACO, has already been conducting a programme – Project Kavach – among the truck drivers and other staff under the grant from the India AIDS initiative of the Bill & Melinda Gates Foundation. The project which covers eight states along the national highways 2 and 9, is working for implementation of a large scale effective HIV preventive intervention among the truckers. In the capital, the Delhi State Aids Control Society has been given a task to identify NGOs and community based organisations for the execution of the targeted intervention programme among the truckers. "Being a bustling commercial hub, nearly 35,000 long-distance truckers station in Delhi everyday and therefore it is critical to make them aware about the HIV/AIDS and promote safe sexual practices," said A K Gupta of Delhi State Aids Control Society. (The Hindu 31/5/09)

### **AIDS infected sex worker gets a foothold in life (3)**

IMPHAL, Jun 1: A girl who did not know anything about the facts of life and who worked as a commercial sex worker to fulfill her mother's demands is now surviving as a PLHA, or People Living with HIV/AIDS. Sophirna (name changed) is 18 years of age and hails from Churachandpur. She has lost both her father and mother due to HIV/AIDS and has been ex-communicated from her family by her relatives and left by herself to move on with her life. But later she was accepted in the family after much convincing by the NGOs. Today she gets ART treatment every six months and is carefully looked after by her relatives. Speaking to IFP Sophirna explained that though her family members are not fully convinced with the fact that the HIV/AIDS is not transmitted through living with them, they are slowly accepting her in the family and being the eldest daughter among five siblings she noted that she was not aware of HIV/AIDS before she lost her father in 2000 and her mother, who was also a commercial sex worker as well as IDU. She was asked to join the trade her mother was in and with no option left in her life she also started working as commercial sex worker and kept fulfilling her mother's demands. But early this year she lost her mother and she was left with HIV/AIDS. She was rebuked in the family as everyone thought she had committed a sin and even tried suicide. "I felt like dying at that point of time when I realized that I have been infected with HIV/AIDS and didn't want to share anything with anyone," said Sophirna who has come so far fighting and struggling and who has also faced social stigma and discrimination. However, today Sophirna is admitted at Shalom Community Care Centre, Churachandpur and is looked after by various doctors who give her all forms medicine which will make her health better and also provide her counseling. She feels good to be at the centre where she can move freely and share everything with her mates who are also staying in the centre. Churachandpur, the second largest town in Manipur, next only to Imphal, is also the name given to one of the nine districts of the state and because of its proximity to

Myanmar which acts as main source of supply of Heroine (No. 4) to India and other countries, Churachandpur has been a natural pathway for trafficking this drug to other places for a long time now. It is little wonder that the youth of Churachandpur have been very vulnerable to drug abuse and HIV infection because of the above and other factors. Churachandpur was once the worst affected district in Manipur, perhaps even in the whole country and has recorded 1841 (official figure) HIV positive cases till November 2007. Haopu, one of the core member of SHALOM, expressed to IFP that the said girl Sophirna was admitted to the Community Care Centre few months back due to her weakness in health and she didn't talk to anyone and at that time her CD4 count was also very weak. But after her proper treatment in the centre her health improved and today she talks with the people and doesn't feel alone anymore, though she would prefer to stay at home with her brothers and sisters. He further noted that we should help PLHAs to live positively by providing accurate and up to date information on HIV/AIDS by conducting regular group sessions, meetings which help them in countering fear and ignorance and also by sharing personal experiences and skills and through mutual learning and support.(Kangla Online 2/6/09)

### **Hospital refuses to admit HIV positive woman'(3)**

DHENKANAL, 3 JUNE: In an incident, a woman with HIV/AIDS, who had been to the district headquarters hospital for delivery, was allegedly denied service by the doctor and other staff. She was again refused by a local nursing home, when the nursing home staff came to know of her case. Fortunately, the second nursing home admitted her and helped her deliver her child, here on Sunday.

Sources said that the woman from Belitikiri gram panchayat was rushed to the obstetrics and gynaecology department of the district headquarters hospital by her relatives. She had reportedly started feeling labour pain and needed cesarean operation. When the surgery preparations were on, her blood test for HIV was found to be positive. The moment the doctors and hospital staff came to know of her blood test report, they left the ward let alone attend her. With none to be seen around, she was moved to a nearby nursing home, which too denied to admit her. Fortunately, the second nursing home admitted her. Gynaecologist Dr Prasant Kumar Samal operated on her and she gave birth to a boy. "Both the mother and the child are in good condition," Dr Samal said. This was her third child, the other two being girls, her relatives said. When contacted, the chief district medical officer Dr Promod kumar Rath refuted the allegation that the patient was denied service. "She herself left the hospital after knowing her blood test report," he claimed while adding that the child has been administered necessary medicines. The woman, however, said that the hospital staff asked her to move to Cuttack. "I was denied service at the government hospital. It is a pity that despite all the awareness campaign, none other than the doctors are still have poor perception of the disease," she rued.(Statesman 3/6/09)

### **Neighbours thrash HIV patient (3)**

KOLKATA: An HIV positive patient and his wife were allegedly assaulted by their neighbours on Friday. To add to the couple's woes, police only allowed them to lodge a general diary and not an FIR. Jiban Brahma, the 48-year-old HIV+ patient, and his wife Chhaya incurred the wrath of two of their next-door neighbours, including A K Singha who is said to work in the police department, following an altercation. The incident occurred at Bachharpara in Thakurpukur. Police were completely insensitive, too. "Can there be any special rule for HIV positive patients? How can the complainant, who was badly beaten up, himself come to the police station to lodge a complaint? However, we will look into the case," said Dibyendu Bandyopadhyay, officer-in-charge of Thakurpukur police station. South 24-Parganas superintendent of police Ajey Ranade said he was not aware of the incident. Jiban, who works as a community care coordinator at the School of Tropical Medicine, said he could not go to work on Friday as he was unwell. "I informed my office that I would not be able to go as I was not feeling well. After sometime, Singha along with another person came to our house and started complaining that we had dumped waste into their compound. As I protested, Singha started abusing me and my wife, using filthy language," he added. Then, there was a heated exchange and Singha allegedly hit Jiban and pushed him hard. The latter fell to the ground and sustained injuries in his head and chest. "When I tried to resist, Singha pushed me as well," alleged Jiban's wife Chhaya. The HIV positive patient later went to Vidyasagar Hospital for treatment. After getting first aid, he went to Thakurpukur police station to lodge a complaint. "Police were reluctant to take the complaint. No police officer has so far come to us to know what happened," he said. Both Jiban and Chhaya said Singha abuse them quite often. "I was detected

with the HIV virus back in 2001. Since then, I have been working to spread awareness about the disease. For this, many people come to our house for counselling and Singha always tried to malign us in the locality, using abusive language as much as possible. I have never tried to hide myself from society. We get cooperation from all our other neighbours except him," Jiban complained. "We are not sure as to what Singha does but we have heard that he works in the police department," Chhaya said. Singha though could not be contacted as he was not at home. Those who were in his house neither wanted to speak on the matter nor give Singha's contact number. (Times of India 7/6/09)

### **NGO demands passing of HIV/AIDS bill (3)**

Ludhiana: The Punjab Networking of Positive People Society has made a plea to Centre to pass the HIV/AIDS Bill, 2007. Addressing a press conference in the city, Jagjit Singh Maan, Founder Chairman of the NGO, said, "It was in 2007 when with the help of different social organisations, the HIV/AIDS bill was drafted. The bill proposes that all HIV/AIDS patients should be able to raise their voice against injustice." He said in the last couple of years, discrimination against HIV patients has spiralled. The society strongly advocates immediate implementation of the bill. Maan also said, "I will now meet Manish Tiwari, MP, and request him to raise the issue in the Parliament. Others present at the press conference included Dr Manjit Singh, Mehar Singh, Satnam Singh Dhaliwal, President, Universal Human Rights Organisation. (Indian Express 7/6/09)

### **HIV victims resort to suicide, despite counselling: study (3)**

Stigma surrounding HIV and AIDS has been a major barrier in the prevention, care and treatment of the disease, resulting into rampant discrimination. With an aim to provide support systems to victims of HIV and AIDS, a study has tried to tap the stigma attached with the deadly disease. The Social and Development Communication unit of Mudra Institute of Communication Research (MICORE), has undertaken a series of empirical research on HIV-related stigmatisation, based on information collected between September 2008 and March 2009 in different cities and villages of three districts of Gujarat. According to the 2006 estimates of NACO, national adult HIV prevalence in India is approximately 0.36 percent, amounting to between 2 and 3.1 million people. The estimate says that if an average figure is taken, this comes to 2.5 million people living with HIV and AIDS; almost 50 percent of the previous estimate of 5.2 million. The study raises doubts about the programs designed by policy-makers and health communicators like National AIDS Control Policy (NACP) and UN agencies, when it comes to addressing HIV-related stigmatisation. "While many studies discuss various effects of stigma, the real process or mechanism involved with its dynamics and the factors behind them remain unearthed. In spite of the procedures and the actual time phases involved with the counselling processes, people infected with HIV/AIDS resort to suicide. This only shows that the programs planned by the policy makers to change perceptions is largely unrealistic," says Satyajeet Nanda, who is heading the research along with research associate Aparimita Pramanik. The study reveals that perceptions across different levels of exposure differ significantly due to a variety of factors involved at individual as well as institutional levels. Factors such as knowledge of HIV infection cycle and not merely few routes as advertised by different agencies, society's attitude towards HIV positive people that reflects the victims' worthiness, social resilience, infected person's adaptability and availability of supports needed in the physical or economic form, are responsible for the intensity of the stigma. The researchers believe that understanding the dynamics of the stigma at different times and contexts can help policy-makers and health communicators to design need-based programs. Nanda suggests that comprehensive programs need to be designed in order to provide support systems based on the need of people affected and not merely counselling on few psychological aspects that exist in some Indian government hospitals. Nanda further says that counselling should start before the blood test results are known, since stigmatisation takes shape before the results come, often leaving little space for adapting to counselling with the HIV discovered in the body, thus resulting stringent actions. The team is now conducting further study to uncover details in terms of stakeholders at different institutional and societal levels, and their role in stigmatisation process at different stages of HIV and AIDS. (Business Standard 12/6/09)

### **55,167 HIV-positive persons in State (3)**

KOLLAM: As per a survey conducted between October 2007 and January 2008, there are 55,167 HIV positive persons in the State. Figures on the survey conducted by the National AIDS Control Organisation were released to the media here on Wednesday by the State AIDS Control Society. The survey shows

that there is no alarming rate in the rise of HIV positive persons in the State. According to the figure, 0.26 per cent of the people of the State are HIV positive persons. The survey also shows that there are 2.1 lakh HIV positive persons in the country. The figures were given at an HIV and AIDS workshop organised at the Kollam Press Club in connection with the P.K. Thampi Commemoration function. The bulk of the HIV positive persons in the State are drug addicts who use syringes to administer narcotic substances. (The Hindu 18/6/09)

### **HIV+ woman labelled outcast and paraded in hospital (3)**

Jamnagar/Rajkot: In a shocking display of inhumanity, two doctors and a nurse of Guru Govindsinh Hospital (GGH) in Jamnagar not only refused to treat an HIV+ patient, but stuck a strip of Band-Aid tape on her forehead which said that she had tested HIV+. Sources said the two doctors made the young woman walk through different wards of the government hospital with the damning tape stuck to her forehead. According to reports, when the 40-year-old woman, who is two months pregnant, went to the hospital on Saturday to get her pregnancy terminated, Dr Nalini Anand and Dr Dipti Joshi, both gynaecologists, took the help of a nurse, Praffula Ramani, to stick a Band-Aid adhesive tape on the patient's forehead. The tape had the words: 'HIV Sero Positive', written on it. The young patient was then walked through different wards of the hospital before being taken to the hospital's laboratory where she was asked to sit and wait. Other reports, however, said that the patient was found HIV+ only on Saturday after the tests conducted on her at the hospital. When members of Jamnagar District Network of People Living with HIV positive (JDNP+), a social organisation that works for HIV+ people, came to know of the incident, they organised a protest against it. Following the protest, the two doctors said they were willing to remove the tape from the woman's forehead. JDNP+ members, however, refused to budge and continued to demand the suspension of the two doctors and the nurse. "The hospital superintendent, Dr Vyas, has apologised and given us the assurance that disciplinary action would be taken against the two doctors and the nurse," said Ms Priti Chavda, president of JDNP+. Meanwhile, state health minister Jaynarayan Vyas has ordered the doctors and the nurse to go on indefinite leave until the issue had been resolved. "We have asked them not to report for duty and proceed on indefinite leave," Vyas told DNA. "Appropriate action would be taken on the basis of the report of the committee that has been constituted to go into the incident. The committee has been asked to give its report within three days." (DNA 21/6/09)

### **HIV+ve prisoner who cried for treatment is dead (3)**

Mumbai: A 30-year-old prisoner, whose petition in the Bombay high court had highlighted the lack of medical treatment for HIV-positive inmates in Maharashtra's jails, has died of Aids at Pune's Yerwada prison. His application had prompted the HC to set up a committee to look into the lack of medical facilities for HIV-positive prisoners. And, on Monday, when the petitioner's lawyer Rajesh Bindra told the court that his client (name withheld) had died, the HC set up another committee to look into why HIV-positive prisoners were dying in jails. The committee, to be headed by inspector-general of prisons, has to submit its report in two weeks. Bindra had earlier argued in court that as many as 32 HIV-positive inmates had died in the Yerwada jail between 2001 and 2006. His client, sentenced to life, died in March and another HIV-positive prisoner died in April, he said. Bindra's client had alleged that jail officials were flouting National Aids Control Organisation (Naco) guidelines on taking HIV-positive prisoners to Anti-Retroviral Therapy (ART) centres on a timely basis. The petition said that denial of treatment to prisoners suffering from life-threatening conditions, like being HIV-positive, was a violation of their fundamental rights. Bindra had sought his client's release on bail to enable him to get proper treatment. While the HC took up the petition on lack of treatment for HIV-positives, it kept the bail application pending. In January, the HC had directed the Maharashtra State AIDS Control Society to conduct a voluntary HIV-testing programme in four jails across the state. Earlier, the HC had sought the assistance of lawyers Yug Chowdhary and Anand Grover in improving facilities in jails for HIV-positive prisoners. They had suggested that if the number of HIV prisoners was high then authorities could consider having ART centres within prisons. Chowdhary said on Monday that despite recommendations, sanctioned posts of medical officers in jails were not being filled up. Last July, the Nagpur bench of the HC had said that prison authorities should consider putting all undertrials and convicts through an HIV test. This was in response to a letter by a rape convict who alleged that he became HIV-positive during his stay in jail as the "barber in the jail shaves several inmates with the same blade". (DNA 23/6/09)

### **HC seeks status report on HIV+ jail inmates (3)**

MUMBAI: Posts of medical officers in Maharashtra's jails are yet to be filled despite the Bombay high court ordering the state to look into the issue of HIV-positive inmates. Advocate Yug Chaudhary told the court that despite the HC appointing a committee to monitor the facilities for HIV-positive inmates, posts of medical officers were yet to be filled. Public prosecutor Satish Borulkar blamed it on the unwillingness of doctors to join prison services. The high court has directed the additional chief secretary, public health department, and IG of prisons to file an affidavit in two weeks on the measures taken. (Times of India 23/6/09)

### **Docu highlights discrimination faced by HIV-AIDS affected people (3)**

GUWAHATI, June 23 – Despite the big talks and countless assurances of the government and the society that people with the dreaded HIV/AIDS would get a fair deal, the reality paints a totally different picture. I WANT TO LIVE—a documentary made from a legal angle but successfully capturing the pathos of the HIV-AIDS affected people spoke out loud and clear that stigma and discrimination greet the HIV-AIDS affected in every step of life. Screened on Tuesday for the media here, this documentary made by the Human Rights Law Network exposed the loopholes in the government system which has caused great inconvenience and brought untold sufferings to the HIV-AIDS affected people across the country. “This is but a small effort to show the real condition of the HIV-AIDS affected people in India,” said functionaries of the Human Rights Law Network before the screening of the documentary, further adding that it was not the disease but the attitude of the society that killed the HIV-AIDS affected people. It may be mentioned here that the documentary was screened on the sideline of a day long workshop organized by the Human Rights Law Network, Assam chapter and the Assam Network of Positive People. The workshop mainly remained focused on how the HIV-AIDS affected people could seek legal help when they feel that they have been looked down upon by the society. The session also discussed the HIV-AIDS situation as a human rights issue and dwelled at length on the implementation of the 19 points commitment made by the National Aids Control Organization (NACO) to the Supreme Court of India. “Any HIV-AIDS affected individual facing discrimination at work, or victim to promises of miracle cure, or denied treatment, confidentiality, right to education or faced medical negligence should take the help of law,” the Human Rights Law Network appealed to the affected community. Well known theatre personality Jerifa Wahid released two books on the occasion.(Assam Tribune 24/6/09)

### **State records rise in pregnant women opting for HIV/AIDS test (3)**

Ahmedabad: The number of pregnant women opting for HIV/AIDS tests is increasing over the years. As per data, the six government hospitals attached with medical colleges in the state had tested 26,688 pregnant women for HIV/AIDS in 2007-2008; 34,265 women in 2008-2009; and 4,536 pregnant women in April and May this year. According to state government figures, in 2007-08, of the 26,688 women, 184 tested HIV positive, and 84 of the deliveries happened in government hospitals. Similarly, in 2008-2009, out of 34,265 women, 212 tested HIV positive, of which 173 deliveries were conducted in the six hospitals. Again, for the months of April and May of the 2009-2010 period, 42 women tested HIV positive out of which 30 deliveries happened in the hospitals. The additional project director of Gujarat State AIDS Control Society (GSACS) said: “The government has been putting immense effort in dealing with HIV related cases. If we compare last two years’ records, the number of tests of pregnant women has increased tremendously.” Officials also said that the mishandling of the HIV positive woman in a Jamnagar hospital is an isolated case. The Guru Gobind Singh Government Hospital in Jamnagar, where the incident had occurred, incidentally, has a fair record in handling such deliveries. According to GSACS records, in the year 2008-2009, the hospital had conducted as many as 8,112 HIV tests on pregnant women, and out of 16 HIV positive pregnancies, 14 deliveries happened in the hospital. For the two months of April and May of the year 2009-2010, over 1,300 tests have been done, and one delivery has happened in the hospital. (Indian Express 24/6/09)

### **Probe ordered after woman was branded as HIV positive (3)**

Gandhinagar, June 22, 2009: The Gujarat government has ordered an inquiry after staff of a hospital pasted a tape on the forehead of a pregnant woman, branding her as an HIV positive. The 27-year-old woman was in the state-run Guru Gobindsingh Hospital of Jamnagar, about 400 km from here, for a brief while and was discharged Saturday. During her stay there, some employees had stuck a medical adhesive tape on her forehead. As rights activists protested the inhuman treatment of the woman, the state government asked three employees to proceed on leave and ordered an inquiry. "Both the doctors

involved and a nurse has been asked to go on leave and an inquiry has been ordered. The report is expected within three days," Health Minister Jay Narayan Vyas said here Sunday. Hospital authorities have said that a nurse had been told to mark the patient so that she can be provided proper treatment. (Hindustan Times 24/6/09)

### **Thanjavur one among high HIV prevalence districts" (3)**

THANJAVUR: Thanjavur is one of the high HIV prevalence districts in Tamil Nadu according to a report by National AIDS Control Organisation (NACO). The district has been classified as category B district by NACO. As per 2007 surveillance report, the estimated number of HIV infected people in the district is 3471. A comparison of HIV prevalence from different settings over the last three years indicates that there is still work to be done to control the HIV/AIDS epidemic in Thanjavur. Thanjavur was one of the districts which has high vulnerability of HIV/AIDS due to its multi dimensional socio-economic and professional scenarios, the report said. There were several factors driving the epidemic in the district. They were core groups i.e., female sex workers (FSW) who were 1562 in number and male sex male (MSM-Homosexuals) who were 874 in number. Bridge population was the other drivers of epidemic i.e., truckers, migrants, factory workers, high volume mobile men and women due to a number of pilgrimage centres in the district. There was no particular brothel or designated areas in the district and most sex workers were lodge based, home based, street and highway based. While there was Targeted Intervention (TI) for female sex workers and male sex male, there was no intervention currently for the bridge population. In Thanjavur, there were 29 Integrated Counselling and Testing Centres (ICTC) supported by Tamil Nadu State AIDS Control Society. Twelve of them were located in Government hospitals, fourteen in block Primary Health Centres, two in Municipality and one in private hospital. In all blocks there was at least one ICTC. (The Hindu 1/7/09)

### **HIV+ patients seek centres for free treatment (3)**

MUMBAI: HIV positive persons who can't afford to pay for their medication came forward on Tuesday to make themselves heard. Saying that second-line anti-retroviral (ART) treatment was too expensive, they demanded that the government increase the number of centres providing free treatment, even as officials said they would offer 'alternative treatment' in Maharashtra soon. In Maharashtra, the second line drugs are available only at JJ Hospital. Second line drugs are essential for some persons living with HIV on whom the first line drugs have failed because their body has become resistant to those medicines. However, alternative drugs are those which are given when persons develop side-effects to the first-line treatment. "I was being given the first line drugs, but then the doctor said these would not work anymore. They advised me to start the second line ART. When I went to JJ Hospital, they did not provide the medicines. I cannot afford them on my own," says Alpana (34). Santosh, another HIV positive person, says, "I have been on the first line treatment for two years. My doctor said that now I need the second line. But at JJ Hospital, they said that I need alternative treatment." Alternate therapy is different from second line therapy, say doctors. "They are two different lines of treatment. Patients have to understand that taking the wrong treatment can cause further harm to their systems," says Dr Manisha Ghate of the National AIDS Research Institute, Pune. "Often, the doctor might think the patient needs the second line treatment, but in reality, the patient needs alternate therapy. The problem arises when the patients are made to do tests again in JJ Hospital and are prescribed a separate type of treatment," says Dr Rekha Jain from NACO. "Alternative treatment will start in Maharashtra in August-September. We cannot promise the patients anything, but we are trying to work towards their betterment," says Ramesh Devkar, project director of MSACS. (Times of India 1/7/09)

### **HIV affected woman denied treatment, delivers outside hospital (3)**

Faizabad (UP): An HIV affected woman was forced to deliver her baby outside a government hospital after she was allegedly denied treatment by the doctors in eastern Uttar Pradesh's Ambedkar Nagar district. The 28 year old pregnant woman, a resident of Jahageeraganj locality in Amdedkar Nagar, went to Mahatma Jyotiba Phule district hospital last evening in the district, 60 km from here. "Doctors and other medical staff refused to treat the woman, as she was HIV positive and asked the family to take her somewhere else," social activist Manoj Mishra told reporters here. "The woman delivered the baby outside the hospital gates when she was being taken to another facility". District Chief Medical Officer Liaqat Ali said that an enquiry has been initiated into the incident. "It is yet to be conclusively established

that treatment was denied because the patient was HIV positive," he said. Mishra, however, contended, that staff of the district hospital knew the couple very well as both had gone through HIV tests in this hospital. Asked about the condition of the mother and the newborn, Ali said: "They are under our supervision. Both of them are doing fine". (DNA 1/7/09)

### **HIV-positive kids ask celebs tough questions on AIDS Bill (3)**

New Delhi, July 10, 2009: It was a step towards getting the voices of HIV- and AIDS-affected children heard. And children who took the stage fired a volley of hard-hitting questions at lawmakers, as well as eminent personalities from other walks of life, during the interaction organised by Plan India, an NGO, on the HIV/AIDS Bill. Most questions revolved around the Bill that has been awaiting debate in Parliament for over two years. Drafted by the National AIDS Control Organisation (NACO), the Bill seeks to protect the rights of those infected by HIV as well as their families and to promote prevention, awareness, care, support and treatment programmes. The provisions of the Bill prohibit discrimination against those infected by HIV/AIDS, give them the right to confidentiality and strengthen their rights to education and property. "Will the Bill ever get passed? It has been with the government for more than two years. What should we expect now?" they asked. Cynicism was clear in their voices, but there was also some hope. "If the Bill gets passed, we can live a normal life. The society discriminates against us at all steps. This Bill will help us live freely," said a HIV-infected child. The children, who came from different parts of the Capital, interacted with parliamentarians Agatha K Sangma and Oscar Fernandes, film director Nagesh Kukunoor and cricketer Virender Sehwag, all of whom pledged to support the Bill. "Children are the future of the country. I will support the Bill as it ensures that the rights of HIV/AIDS-affected children are protected," said Rajya Sabha member Fernandes. He concluded his speech with Michael Jackson's famous song We are the world. Agatha Sangma, the youngest minister in the UPA government, said: "I will do all I can to mobilise this Bill in Parliament.... I will raise my voice for your rights." NACO estimates say approximately 1 lakh children under the age of 18 are infected with HIV. An estimated 70,000 children below the age of 15 are infected through parent-to-child transmission every year. "Every number has a story and a face behind it. This makes it more difficult for me to speak here today. I appeal to the MPs to make this Bill their top priority," said Kukunoor. "I am here to express support to this cause. This Bill must be passed," Sehwag said. (Hindustan Times 10/7/09)

### **5,503 AIDS patients in state (3)**

JAIPUR. It is official now. There are 5,503 AIDS patients in the state and the highest number of the AIDS-infected persons are in Jaipur district where the number is 500. The other districts where the AIDS patients are in large numbers are 444 in Pali, 416 in Jodhpur, 408 in Nagaur, 353 in Udaipur, 258 in Barmer, 289 in Sikar, 273 in Jalore, 238 in Bhilwara, 228 in Jhunjhunu and 189 in Dungarpur, 142 in Rajsamand. AA Ahmed Durumiyan, health minister, informed the Vidhan Sabha on Thursday in a written reply to Banwari Lal Singhal (BJP) that these patients were given free treatment at the various ART centres in government hospitals. Durumiyan said the state received Rs 1.63 crore from the Centre to provide care to the patients and the National AIDS Prevention Organisation has provided medicines to ATR centres. The health minister added the state government was running 182 centers for detecting AIDS and to prevent spread of the disease. Various health centres were regularly examining blood collected by the blood banks. Various tests were undertaken to detect HIV before using the blood. Durumiyan said 55 NGOs have been involved by the state government to prevent AIDS and educate people about the dreadful disease.. He said there are 176 AIDS cases detected in Alwar district, 99 in Bharatpur, six in Baran, 92 in Banswara, 26 in Bundi, 122 in Chottorgarh, 118 in Churu, 23 in Dholpur, 62 in Hanumangarh, 22 in Jaisalmer, 25 in Jhalawar, 45 in Kota, 412 in Karauli, 23 in Pratapgarh, 152 in Sirohi, 31 in Sawaimadhapur, 60 in Sriganganagar, 86 in Tonk and 48 in Dausa. (Times of India 10/7/09)

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provide care to the patients and the National AIDS Prevention Organisation has provided medicines to ATR centres. The health minister added the state government was running 182 centers for detecting AIDs and to prevent spread of the disease. Various health centres were regularly examining blood collected by the blood banks. Various tests were undertaken to detect HIV before using the blood. Durumiyan said 55 NGOs have been involved by the state government to prevent AIDS and educate people about the dreadful disease.. He said there are 176 AIDS cases detected in Alwar district, 99 in Bharatpur, six in Baran, 92 in Banswara, 26 in Bundi, 122 in Chottorgarh, 118 in Churu, 23 in Dholpur, 62 in Hanumangarh, 22 in Jaisalmer, 25 in Jhalawar, 45 in Kota, 412 in Karauli, 23 in Pratapgarh, 152 in Sirohi, 31 in Sawaimadhopur, 60 in Sriganganagar, 86 in Tonk and 48 in Dausa. (Times of India 10/7/09)

### **Parents demand expulsion of kids' HIV+ schoolmates (3)**

MUMBAI: In a shocking development, the parents of 150 students have threatened to withdraw their children from a zilla parishad primary school in Latur district if the ten HIV-positive students in the school are not expelled immediately. The school, set up a decade ago, has a total of 220 students in classes one through six. Since the school reopened in the second week of June, these 150 students have remained absent for fear of infection. "We fear that if our children play with HIV-positive kids, they too will contract the dreaded disease. We don't want our students to continue their education in this school," a parent told TOI on Saturday. School education secretary Sanjay Kumar and Latur education officer Vilas Joshi confirmed the development, adding that it was unfortunate. "The isolation of HIV-positive students is not possible. We'll have to meet the parents who are seeking the expulsion of HIV kids. We'll intensify counselling. I'm sure our efforts will yield positive results," Sanjay Kumar said. The government has ordered a probe into the episode. A senior government official said the government wanted to ensure that not a single HIV-positive child was expelled. Local journalist Ravi Baptaley has set up an NGO called Sevalaya in Hasegaon village, Latur district, to provide shelter to HIV-positive children. From a couple of dozen HIV-positive students, ten were admitted to the zilla parishad primary school. Initially there was support for Sevalaya's efforts. But soon after the academic session for the primary section began, the students' HIV status became a hot topic of discussion, not only in the school but in the entire village. The parents of 150 children in the school then decided they would not send their children to classes until the HIV-positive students were expelled. When the matter reached district headquarters, Joshi, along with a team of doctors, visited the village to pacify the agitated parents. "We had several rounds of talks with the parents. We explained that their children would not get AIDS. However, there was no answer to one question: Can the infection be passed on if an HIV-positive student bites another student? Since the doctor couldn't provide an explanation, the parents decided to withdraw their children from the school," a senior official said. To further pressure the zilla parishad administration into expelling the students, the villagers at a well-attended meeting unanimously passed a resolution to withdraw their children from school if the HIV-positive students were not expelled. Activists working for the welfare of the HIV-positive students were shocked by the approach of the education officer, who reportedly promised the agitating parents that the HIV-positive students would be segregated. "At a juncture when we are treating HIV and non-HIV students on par, Joshi's assurance is shocking. He must ensure that there's no discrimination," an activist said. (Times of India 11/7/09)

### **HIV-affected children denied entry into school in Nalgonda (3)**

NALGONDA: In a shocking incident, the management of an aided school here has allegedly denied entry to 21 HIV-affected orphans, including nine girls, to their classes at Panagal. The school management's decision was allegedly due to pressure from the parents of other students of the school, sources said. The incident came to light following submission of a memorandum by the victimised children to Collector S.A.M. Rizvi on Friday. In the memorandum, the orphaned children of Charumathi Child Care Centre deplored the management's action. They said they were on the verge of discontinuing their studies due to denial of access to the school, and appealed to the Collector to provide them an opportunity to study. It is painful "We are already victimised for no fault of ours, and now refusal of entry into the school due to HIV status is more painful than the killer infection," one of the children told The Hindu. The children joined the school recently after the special RBC of Rajiv Vidya Mission was closed this year for mainstreaming the students in regular schools, said the centre's president S. Nagasena Reddy. The Collector said that the matter had been referred to the District Education Officer for inquiry, and appropriate steps would be taken to ensure education to the orphan children. (The Hindu 11/7/09)

### **HC notice to NHRC, Govt (1)**

KOCHI: The Kerala High Court on Friday ordered to issue notices to the National Human Rights Commission(NHRC), the Kerala State Aids Control Society(KSACS) and the State Government on a petition challenging a NHRC order dismissing a HIV-infected person's petition that he was denied treatment at a private hospital in Thiruvananthapuram. The petition was filed by the Foundation for Integrated Research in Mental Health on behalf of Ashok N Nair, who is HIV positive. The petition alleged that Ashok was denied treatment at the Cosmopolitan Hospital, Thiruvananthapuram. Though Ashok was admitted to the hospital, he was discharged soon on being revealed that he was HIV positive. Subsequently, Ashok lodged a complaint with the NHRC. The KSACS and the hospital authorities submitted before the Commission that they did not deny treatment or show discrimination to the patient. They also stated that the hospital had provided treatment to many HIV positive people. "The petitioner was sent back as he was in need of a surgery for which the hospital did not have the facilities," they stated. NHRC accepted the explanation by KSACS and the hospital authorities and had dismissed Ashok's petition. (Express Buzz 11/7/09)

### **'Stop discriminating against people with HIV' (3)**

Bangalore: Project Director of Karnataka State AIDS Prevention Society (KSAPS) R.R. Jannu on Friday called upon the people to stop discrimination against People Living with HIV (PLHIV). He was speaking at a consultation programme organised to take feedback from HIV positive networks, experts, NGOs, community-based organisations, government departments and donor agencies. "The best way to do it is by allowing Greater Involvement of People Living with HIV-AIDS (GIPA) in the HIV prevention programmes of both the State and other health agencies," he said. "This consultation is an initiative to bring out their problems so that we can take proper action and thereby can reduce stigma." Saroja Putran, president of Karnataka Network of People Living with HIV (KNP+) and Kaushalya, president of Positive Women's Network (PWN+) also spoke. They thanked the KSAPS for agreeing to start a Women's Forum of People Living with HIV in the State in association with KNP+.Nandini, a teenager infected by the virus at birth, urged the authorities to provide proper education to the affected children. "Many schools are sending out children once their HIV status is revealed. We need to show love and affection, not stigma," she pleaded. Many groups of sexuality minorities and nearly 100 PLHIV from various organisations across the State participated in the programme. The meet holds importance because of the National AIDS Control Programme III of NACO envisages to "Halt and reverse the HIV epidemic over the next five years." (The Hindu 12/7/09)

### **PIL for rights of kids battling HIV (3)**

CHANDIGARH: Crippled by disease and penury, 171 children who are either infected by HIV or have lost a parent to the deadly disease have nobody who could look after their day-to-day survival. Residing in this prosperous city, these kids don't know where the next meal would come from or who would pay their medical bills. Coming to their aid, an NGO, Human Rights Law Network (Chandigarh chapter) is on the verge of filing a public interest litigation in the court. Strongly advocating the rights for these children, students of law at Panjab University and Amritsar-based Guru Nanak Dev University have volunteered to be a part of the campaign and work with the NGO in this direction. Veena Sharma, under whose supervision students would outline the PIL, said, "These children need special care as their nutritional and medical needs are different. However, they are met with hurdles everywhere, be it at hospitals or schools." The NGO is working along with Chandigarh network of People Living With HIV and AIDS. "According to data provided by the network, of the total 171 kids, 113 have been infected with the deadly virus," added Sharma. According to UNAIDS 2006 report, approximately 7,00,000 children contracted HIV, with 95% of them getting the infection from their mothers. Presently, neither National AIDS Control Society nor UT administration provide any special monetary help to these youngsters. "We had sent an estimate to the administration for providing pension to widows and children who have lost husband/family members to HIV. However, we are yet to receive complete information about these people. Hence, the process is stuck," said Kavita Chavan, the officiating director of UT State Aids Control Society. "Taking a cue from HP government, we suggested UT officials to start special monthly scheme entailing a grant of Rs 700 to children and Rs 1,000 to widows. But it has been hanging fire for past two years," said Pooja Thakur, president of People Living with HIV and AIDS, Chandigarh network. Stressing that these kids need help, Sharma said, "There is a nine-year-old HIV positive patient who has no means to getting

admitted to PGI as his teenaged elder brother - a rickshaw puller is his only family." (Times of India 13/7/09)

### **Separate provision for HIV +ve students: Minister (3)**

Latur, Jul 13: The Maharashtra state minister on Sunday, Jul 12 said the government is planning to make a 'separate provision' for children affected with HIV positive students here. Earlier, 10 HIV positive students were staying in the Ashram Sevalaya in the village, run by Amhi Sevak, an organization serving orphans and children inflicted with the disease. Later the students were admitted to ZP school due to which parents of 148 students out of 240 stopped sending their children to the school. Dileep Deshmukh, after meeting the villagers said it is not proper to take action against the parents. "The parents are afraid that their children will also be affected by AIDS. We will think of making some separate provision for these children. We will also try to discuss the matter with the chief minister and do our best to sort out the issue amicably," Deshmukh said. Reacting to Deshmukh's statement, Director of the 'Sevalaya' Ravi Bapatley said, "It is the society that has given me the land and the money to run the organisation and the ashram for the AIDS and HIV-affected children. These children have very short life and even in this shorter span of life should they be kept away from the society?". (One India 13/7/09)

### **Women progress faster to AIDS than men! (3)**

Scientists in the United States said on Monday they could help explain why women infected with the human immunodeficiency virus (HIV) One of the enigmas about the AIDS pandemic is why women, after infection with HIV-1, seem better able to combat the virus in its early stages but then advance faster to AIDS compared to men infected with a similar level of the virus. The answer lies in the response of a key component in their immune system, and hormonal differences may account for it, according to a paper published online by the journal Nature Medicine. If right, it throws up new possibilities for drugs that would hinder the process, its authors added. The study focuses on plasmacytoid dendritic cells (pDCs), which are "first responders" in the immune system. They detect a microbial intruder and then alert other defenders. The pDCs recognise the AIDS virus through a little docking point called Toll-like receptor 7, or TLR7. Once their TLR7 is switched on, the pDCs call up an important immune-system molecule called interferon alpha. Researchers at the Ragon Institute of the Massachusetts General Hospital were intrigued by lab-dish tests that showed higher levels of the female hormone progesterone intensified pDC activation. The team then linked interferon alpha to the activation of one of the heavy artillery of the immune system -- CD8 cells. Previous research has already spotted an intriguing phenomenon. The more CD8 cells that are stimulated, the faster a patient progresses to acquired immune deficiency syndrome (AIDS), the stage whereby the immune system is so devastated that the body becomes prey to opportunistic disease. Why this is so is unclear, though. Ragon Institute investigator Marcus Altfeld said that the results suggest men and women may differ in an important way in how their immune systems respond to HIV. In the early stages of infection, a stronger activation of their immune system could be beneficial to women, he said. But in the long run, the persistent viral replication and chronic activation of the immune system -- as indicated by the CD8 cells -- can lead to faster progression to AIDS. Altfeld said the study raised new questions about how sex hormones modulate the molecular cascade to HIV infection. One interesting idea, he added, could be a drug that stops or slows the TLR7 alarm system. "Focussing on immune activation separately from viral replication might give us new therapeutic approaches" to tackling the virus, he said in a press release. (Times of India 14/7/09)

### **HC worried over rise in HIV+ cases (3)**

PATNA: The Patna High Court on Friday directed the National Aids Control Organisation (NACO) to state what steps should be taken up by the Bihar State Aids Control Society (BSACS) in view of alarming rise in the number of HIV+ cases in the state. The order was passed on a PIL of Alok Kumar Sinha who submitted that only 27 cases of HIV positive were detected in the state in 2002 while the number of such cases has gone up to 23,000 now. The court said NACO, BSACS and NGOs need to make joint efforts to control Aids in the state. Advocate general P K Shahi said the matter is serious and he would take instructions from the state officials concerned in this regard. The petitioner alleged financial irregularities and lack of willpower on the part of authorities to fill up vacant posts in BSACS as the causes of rise in HIV+ cases in the state. (Times of India 18/7/09)

### **AIDS: 100% awareness among urban mothers still a distant dream (3)**

CHANDIGARH: Contrary to the general perception that awareness levels regarding AIDS/HIV are especially low among the rural uneducated lot, a six-year long survey among mothers of students undertaking medical courses shows that urban women also lack basic knowledge on the disease. In a recent study conducted by GMCH-32, 12% of respondents said that HIV/AIDS is a curable disease, while 52% did not know that AIDS leads to other diseases on account of lack of immunity. The study also came up with a set of recommendations, which stated that women across the social spectrum should be targeted by awareness campaigns chalked out under the National AIDS Control Programme, phase II and III. Under the findings, around 83% knew that HIV/AIDS occurs mainly through sexual intercourse, while factors like blood transfusion were known to only 75% of the respondents. Besides, 74.6% believed that the best way to curb the disease is prevention. Nearly 76% stated prevention of sexual transmission is possible by adopting use of condom, while 73% thought that use of disposable syringes and needles can also help in keeping the disease at bay. The study, which was conceptualized and conducted by department of community medicine over a period of six years, attempts to highlight the lack of awareness regarding modes of transmission and methods of prevention of HIV/AIDS. Besides, it also aims at exploring the attitude of urban women towards prevention and control. The study gains importance because of the fact that majority of population in the city belongs to middle and upper class strata. Mothers of 260 medical undergraduates were questioned for the purpose. It was revealed that out of the 260 respondents, 193 (74.2%) were in age group of 45-54 years, while 50 (19.2%) were below 45 years. As many as 72.3% belonged to middle class group, while 72 (27%) were from upper strata. It was also gathered that 83.5% had heard of HIV/AIDS. However, only 66% knew that the disease is caused by HIV virus. (Times of India 20/7/09)

### **Alarming rise in HIV-positive cases in Nizamabad (3)**

NIZAMABAD: This doesn't bode well for the health of Nizamabad district. For, six persons are testing positive -- on an average -- for HIV every day. Little wonder, there has been an alarming rise in HIV-positive cases in the district in the last few months. Among those afflicted with HIV, a majority of them are gays and pregnant women. Sources said 180 HIV-positive cases have been registered in the last one month alone. "Despite the claims of vigorous awareness campaigns, the rising numbers tell a different story," a volunteer involved in anti-AIDS movement said. According to the district AIDS control authorities, 7,969 people were carrying the HIV virus. But sources said the numbers could be much more. "When compared to urban areas (0.5 per cent), the HIV-prevalence rate is high (3 per cent) among rural people," an official said. A volunteer working in a HIV/AIDS prevention project hit the nail on the head when he said: "The virus is spreading rapidly only because of gays who generally do not like to use a condom. Armed with the court ruling, the gays even in the rural areas are coming out of the closet." The authorities' efforts have also gone waste as there are no takers for the 'blue boxes', containing free condoms, in villages and towns. "People have very little knowledge about condom use," a worker in AIDS prevention organisation said. District AIDS Control Society head T Dinesh said despite preventive measures, the rise in HIV-positive cases is worrisome. "Around 150 to 180 people are diagnosed with the virus every month," he said, admitting that HIV prevalence is high in the rural areas. According to statistics, 1,081 people have been declared HIV-positive in the first six months among the 30,347 people who underwent the relevant tests. Sources said 1,893 HIV-positive cases were recorded last year. "It has been an upward trend for the last six years. Unless the government steps in and takes harsh measures, the district will soon outbeat Guntur which is in the forefront in HIV-positive cases," a senior official said. Representatives of voluntary organisations working on AIDS prevention projects said due to lack of adequate awareness about HIV and prevention methods, the people are not practising safe sex methods. A voluntary organisation head S Siddaiah said regular interaction with HIV-afflicted goes a long way in checking the spread of the disease. "Apart from creating awareness on preventive methods, the government should make efforts to educate children on HIV/AIDS," he added. (Times of India 22/7/09)

### **HIV concern for sex workers (3)**

Imphal, July 21: The number of HIV-positive commercial sex workers is on the increase in Manipur, state health minister Pheiroijam Parijat Singh today informed the Assembly. "The estimated number of adult HIV-positive people in Manipur was 1.67 per cent in 2006. The rate has come down to 1.57 per cent in 2007. The result for 2008 is still awaited," the health minister said, replying to a question from Opposition member I. Ibohalbi. Parijat Singh said the reason was an increase in the population of commercial sex

workers in the state. The minister, however, said the HIV rate among men having sex with men had come down from 29 per cent in 2003 to 16 per cent in 2007. "The increase in HIV-prevalence among sex workers is a cause for concern. The government and the State AIDS Control Society are working on ways to prevent the spread of the disease among this high risk group," he added. According to a survey by Imphal-based NGO Meitei Leimarol Sinnai Sang, under a project called Intervention for Women at Risk, taken up under the State AIDS Control Society, Imphal city alone has more than 1,600 sex workers. M.C. Rita, the chief functionary of the NGO, said the violence in which married men were dying and poor economic conditions where the husband could not feed the family, turned many women into sex workers. Manipur is one of the six high prevalence states in India. The prevalence rate among pregnant women is 1.3 per cent. Manipur, with hardly 0.2 per cent of India's population, contributes nearly 8 per cent of the country's total HIV positive cases. According to the latest statistics with the state AIDS control society, nearly 30,000 people have tested as HIV positive. The minister also admitted that security agencies were harassing sex workers and promised to check the incidents. (Telegraph 22/7/09)

### **HIV transmitted by pre-chewed food too (3)**

First three cases of HIV infection have suggested that the deadly virus could be transmitted from mothers or other caregivers to children. Led by Dr. Aditya Gaur, of St. Jude Children's Research Hospital, the researchers have uncovered the above three cases, and found that the source of HIV in the pre-chewed food was most likely the infected blood in the saliva of the people who pre-chewed the food before giving it to the children. The findings indicated that HIV-infected mothers or other caregivers should be warned against giving infants pre-chewed food, and directed toward safer feeding options. The cases indicate that physicians and clinics should routinely include questions about pre-chewing food in their health screening of infant caregivers who have HIV or are suspected of the infection. Also, possible cases of HIV transmission through pre-chewed food should be reported to public health agencies to help increase understanding of the prevalence of such transmission. Gaur said that already it is known that giving infants pre-chewed food could transmit infections like streptococcus and the hepatitis B virus, there was evidence that the blood-borne HIV could be similarly transmitted until the discovery of the above cases. He said that the source of blood in the saliva of the person pre-chewing the food for the child could have been visible or microscopic bleeding from the gums or some other part of the mouth. In the study, the researchers described three cases in which pre-chewed food was likely the source of HIV transmission to infants. The case that led to the study was a 9-month-old infant who was referred to St. Jude because she was HIV positive after earlier tests had been negative. "Her HIV-positive mother had not breastfed her, and further investigation had ruled out transmission by blood transfusion, injury or sexual abuse," said Gaur. The genetic testing revealed that the daughter had been infected with the same HIV strain as the mother. "Fortunately, the St. Jude nurse practitioner, Marion Donohoe, was very thorough in her questioning about feeding practices, and she asked about pre-mastication. It turned out this mother had fed her daughter pre-chewed food," said Gaur. After that he encountered two similar cases previously reported by senior author Mitchell and colleague Rivera from the University of Miami. One case involved pre-chewing by an HIV-infected mother, and the other an HIV-infected aunt who was the caregiver. Gaur said that information in the three cases suggests that one factor aiding such transmission was mouth bleeding in the caregiver, as well as in the infant due to teething or infection. The findings of the study have been published in the journal *Pediatrics*. (Times of India 22/7/09)

### **Women in UP losing battle with HIV (3)**

The Centre is spending crores of rupees for awareness and prevention of HIV AIDS in the country, but the disease continues to spread its wings in UP. According to latest surveys of the United States Agency for International Development (USAID) and the National Aids Control Organisation (NACO), there are 1.25 lakh HIV-positive people in the state and 40 per cent of them are women. According to the surveys, this is the "worst positive male-female ratio" in the country. The situation has led the Indian Network of Positive People (INP Plus) to launch an exclusive project to provide peer support to women in UP. Of the 40 per cent HIV-positive women in the state, three to four per cent are unmarried adolescent girls and 30 per cent are widows, who have lost their husbands to AIDS. The highest number of positive women is reported from districts like Mau, Deoria and Allahabad — the high prevalence areas — and Ghazipur, Jaunpur, Siddharth Nagar, Ballia, Varanasi and Banda. Worse, very few of the HIV-positive women receive medical aid and support, as experts blame it on social stigma. Pratap Vikram, project manager for

the INP Plus' Strengthen Abilities to Manage and Respond Effectively to HIV/AIDS (SAMARTH), said: "AIDS is synonymous with social stigma. And for a woman, the stigma is even more. While women are way behind on the development index, being HIV-positive pushes them further down." Anupam Raizada, team leader of the Technical Support Unit of Uttar Pradesh State Aids Control Society (UPSACS), said it must be brought home that instead of women, men are the carrier of the virus. (Indian Express 3/8/09)

### **New HIV strain discovered in woman from Cameroon (3)**

WASHINGTON (AP): A new strain of the virus that causes AIDS has been discovered in a woman from the African nation of Cameroon. It differs from the three known strains of human immunodeficiency virus and appears to be closely related to a form of simian virus recently discovered in wild gorillas, researchers report in Monday's edition of the journal Nature Medicine. The finding "highlights the continuing need to watch closely for the emergence for new HIV variants, particularly in western central Africa," said the researchers, led by Jean-Christophe Plantier of the University of Rouen, France. The three previously known HIV strains are related to the simian virus that occurs in chimpanzees. The most likely explanation for the new find is gorilla-to-human transmission, Plantier's team said. But they added they cannot rule out the possibility that the new strain started in chimpanzees and moved into gorillas and then humans, or moved directly from chimpanzees to both gorillas and humans. The 62-year-old patient tested positive for HIV in 2004, shortly after moving to Paris from Cameroon, according to the researchers. She had lived near Yaounde, the capital of Cameroon, but said she had no contact with apes or bush meat, a name often given to meat from wild animals in tropical countries. The woman currently shows no signs of AIDS and remains untreated, though she still carries the virus, the researchers said. How widespread this strain is remains to be determined. Researchers said it could be circulating unnoticed in Cameroon or elsewhere. The virus' rapid replication indicates that it is adapted to human cells, the researchers reported. Their research was supported by the French Health Watch Institute, the French National Agency for Research on AIDS and Viral Hepatitis and Rouen University Hospital. A separate paper, also in Nature Medicine, reports that people with genital herpes remain at increased risk of HIV infection even after the herpes sores have healed and the skin appears normal. Researchers led by Drs. Lawrence Corey and Jia Zhu of the Fred Hutchinson Cancer Research Center in Seattle found that long after the areas where the herpes sores existed seem to be clear, they still have immune-cell activity that can encourage HIV infection. Herpes is marked by recurring outbreaks and has been associated with higher rates of infection with HIV. It had been thought that the breaks in the skin were the reason for higher HIV rates, but a study last year found that treatment of herpes with drugs did not reduce the HIV risk. The researchers tested the skin of herpes patients for several weeks after their sores had healed and found that, compared with other genital skin, from twice to 37 times more immune cells remained at the locations where the sores had been. HIV targets immune cells and in laboratory tests the virus reproduced three to five times faster in tissue from the healed sites as in tissue from other areas. "Understanding that even treated (herpes) infections provide a cellular environment conducive to HIV infection suggests new directions for HIV prevention research," commented Dr. Anthony S. Fauci, director of the National Institute of Allergy and Infectious Disease. That study was funded by the National Institutes of Health and the Tietze Foundation. (The Hindu 3/8/09)

### **Woman's plea admitted (3)**

Chennai: The Madras High Court on Monday admitted a writ petition filed by a Chennai-based woman seeking compensation for trauma caused to her by wrongful use of her picture and that of her baby in an advertisement issued by the Tamil Nadu State AIDS Control Society. The woman, a Triplicane resident, said posters issued by TANSACS had pictures of her and her child in their awareness campaign. Though they were both negative for HIV, they were stigmatised by society because of the posters. She claimed that her family was shattered, she had problems with her husband, faced discrimination from neighbours and was ostracised by relatives. Her baby girl, who was also in the advertisement, had suffered along with her. She prayed that the hoardings be removed and that she be granted a sum of Rs.1 crore as compensation. The court has issued notices to the respondents — the Health Department, TANSACS, and Chennai AIDS Prevention and Control Society. (The Hindu 4/8/09)

### **102 identified as HIV patients in Tamil Nadu (3)**

Thanjavur, Aug 15: As many as 102 persons were identified as HIV-infected patients in this district of Tamil Nadu from 2006-2009, according to District Collector M S Shanmugham. Speaking at the

sensitisation programme for members of voluntary organisations for creating AIDS awareness among people here yesterday, Mr Shanmugham said the incidence of HIV infection had come down in the district following awareness programmes launched by the State Government and implementation of containment programmes. The non-government organisations should play a major role in creating awareness among people on AIDS and swine flu, among other diseases, the Collector added. (New Kerala 15/8/09)

### **50 million Asian women at risk of HIV infection: UNAIDS (3)**

The "HIV Transmission in Intimate Partner Relationships in Asia" report by UNAIDS said the women at risk are either married or in long-term relationships with men who engage in "high-risk sexual behaviours." "That is, men who have sex with men, injecting drug users, the clients of sex workers," UNAIDS regional director Prasada Rao said. "(It's) a problem of great magnitude that the countries have largely ignored (and) a challenge that we may no longer ignore," Rao told reporters on the sidelines of the ninth International Congress on AIDS in Asia and the Pacific (ICAAP), which is being held on the Indonesian resort island of Bali. Women accounted for 35 per cent of all adult HIV infections in Asia in 2008, up from 17 percent in 1990, according to the report. In Cambodia, India and Thailand, the largest number of new HIV infections occur among married women and in Indonesia the virus is now spreading to long-term partners and sex workers, it added. "The facts speak for themselves. It is estimated that more than 90 per cent of the 1.7 million women living with HIV in Asia became infected (by) husbands and partners while in long-term relationships," Rao said. (Times of India 18/8/09)

### **Another HIV+ convict seeks bail (3)**

Mumbai, August 18, 2009: Lack of treatment to HIV positive convicts in prisons has become a cause of concern for the Bombay High Court, with yet another convict seeking bail. A man convicted to life for murder has approached the court, seeking bail. He has stated that he was diagnosed as HIV-positive and needs medication urgently. His advocates, Sushan Kunjuraman and Mahesh Kadam, argued that their client was not being provided with proper medical treatment. The court has asked Additional Public Prosecutor Poornima Kantharia to get a medical report from the Nashik jail where he is lodged. Last week, the court released another HIV-positive convict and even suspended his sentence after the Yerawada Jail authorities failed to take him to a government hospital and provide necessary medical aid. In the present case, the convict has filed an appeal against his conviction. It was admitted in February. He was diagnosed as being HIV+ and needing urgent medication, said Kunjuraman. (Hindustan Times 19/8/09)

### **'Safeguard right to education of HIV-affected kids' (3)**

Hyderabad: A broad consensus has emerged on the need for a policy decision to address the issue of right to education of children living with HIV/AIDS. Whether government or private, every school must be obligated to admit children living with HIV/AIDS.: A roundtable held here on Thursday called for mounting a unified response to safeguard the right of the affected children, particularly in the light of their open stigmatisation and denial of right to schooling. The roundtable was jointly held by the Centre for Advocacy and Research, Freedom Foundation, M.V. Foundation and Divya Disha. The recent incidents of children being thrown out of schools simply because they were HIV positive dominated the proceedings. While the landmark Education Bill passed by Parliament providing free and compulsory education was welcome, instances of discrimination against the affected children were cause for worry, the participants felt. It was agreed to launch a campaign to dispel the myths and misconceptions about HIV and ensuring education to the affected children without any discrimination. Every school should have a counselling resource group to carry out in-house programmes. A ten-member task force was formed to put in place a mechanism to ensure education of affected children and to take care of violations, if any. R.V. Chandravadan, Project Director, A.P. State Aids Control Society, said there were 50,000 HIV-affected children in the State of whom 17,000 were being reached through various programmes. Social activist Amala Akkineni said the greatest living experience parents could give to their children was to let them co-exist with HIV-affected children. Shashikala, a mother, said she did not withdraw her son Raj Kiran from the school where HIV affected children studied as she was educated and knew how the virus spread.(The Hindu 21/8/09)

### **Activists seek justice for HIV+ schoolkids (3)**

HYDERABAD: Civil society organizations made a strong pitch on Thursday for ending discrimination against HIV-positive children in schools by organising a roundtable. Lending celebrity support to the cause was former actress and TV host Amala Akkineni. Andhra Pradesh State AIDS Control Society, M Venkatrangaiah Foundation, Freedom Foundation, Centre for Advocacy and Research were the other organisations that participated. Addressing a press conference after the roundtable Amala said that schools should not discriminate against HIV-positive children. "Unfortunately, we are too immersed in our stigma. The fear of parents is quite real and as a parent the best education that I've given my son is to teach him not to discriminate against HIV-positive people," she said. Amala said that an HIV-positive individual should have the right to choose whether to disclose his or her status. "We should be prepared to deal with HIV and know what precautions to take," she said. Andhra Pradesh has the largest number of HIV/AIDS cases in India. Nearly 21 per cent of the 2.3 million positive cases in India are in AP. About 50,000 kids in Andhra Pradesh are HIV-positive, according to APSACS director, R V Chandravadan. He said that 3,000 children in the State were receiving Anti Retroviral treatment. The aim of the roundtable was to get together stakeholders in order to formulate a strategy to prevent discrimination against children with AIDS. The context was the removal of 24 HIV-positive schoolchildren from a Bolarum school in July due to pressure from parents. "We are asking the school to take the students back and if they won't, then we will try and get them admitted to other schools," said Chandravadan. A pilot project is being implemented in Kurnool to provide NIN approved nutritious food to HIV-positive children. HIV-infected children's rights becomes important in the context of the recently passed Education Bill passed by Parliament that mandates free and compulsory education for children. However, if the rights of infected children are not respected then the spirit of the Bill is violated. Stressing this point, Kishore Kumar of the Freedom Foundation said that schools should be sensitised by training the management and students about HIV/AIDS. Anupama, one of the participants in the roundtable who is a pediatrician said that there is no danger of HIV-positive children passing on the infection to other children in school merely by mixing with them. "The only danger is if a positive child cuts himself while playing and the blood is handled by other kids. However, with proper training the school management and children will be able to handle such situations," she said. (Express Buzz 21/8/09)

### **Centre to play support system to HIV patients (3)**

CHANDIGARH: The administration has decided to lend a helping hand to the HIV infected patients in the region, besides children whose parents have died due to the virus. UT administrator Gen (Retd) SF Rodrigues on Thursday decided to collaborate with Punjab to set up a centre with efficient support system for such families. Presiding over a high-level meeting attended by finance secretary (FS) Sanjay Kumar, secretary to Governor MP Singh, Punjab health secretary Satish Chandra and other senior officers of AIDS Control Society of Punjab, Gen Rodrigues said the facility proposed to be set up in or near the city would cater to the entire region. He asked the FS and the director of health department to identify the site and other infrastructural support needed to run the centre. He also urged the officers present to identify NGOs in the region who could help in this initiative. He further hoped that a suitable plan would be formulated to impart education to such children to ensure their proper rehabilitation in life. Children were increasingly being afflicted with HIV/AIDS and also suffering hardships due to absence of child-oriented support system, he rued. Meanwhile, revealing that there were 6225 AIDS cases in Punjab, out of which 385 were children of different age groups, Chandra gave an account of the measures taken for their treatment. "All these patients are given anti-retroviral therapy through various centres in the state. A well-structured system including integrated counseling and testing services are provided to them," he added. (Times of India 22/8/09)

### **Give free treatment to HIV positives: HC tells Naco (3)**

In a significant judgement for the HIV community in Maharashtra, the Bombay High Court has instructed the National AIDS Control Organisation (NACO) to provide free treatment to all HIV positive people who need 2nd line drugs. The treatment will be provided through the State AIDS Control Society (MSACS). In response to a public interest litigation submitted by the Network of Maharashtra People with HIV (NMP+), Chief Justice Swatanter Kumar and Justice A M Khanwilkar noted that 'the competent authority has taken a decision to provide free-of-cost appropriate treatment to the petitioners, who are allegedly suffering from HIV. The judgement was given last week. At an earlier hearing, when NACO pleaded that they could not afford it, the judge insisted that they provide treatment, saying he would order the state government to give them adequate funds to cover it. Second Line drugs are essential for survival of many people with

HIV. These are people for whom the normally available treatment for HIV, 1 st line drugs, have failed, cause too many side effects, or are no longer effective. These people need an alternative (that is, 2nd line or Alternate 1 st line) treatment, says Pravin Salunke Coordinator of the Samarth programme at NMP+. Ads by Google HK Electronics Fair Asia's biggest electronics event Register for free admission badge! www.hktdc.com/hkelecHIV/AIDS and India Search our online database of HIV & AIDS policy and research. www.Eldis.org. The government criteria by which people can access 2nd line have been too prescriptive. Patients have been assessed not on clinical need but on such factors as whether they had previously received paid-for treatment, or the number of years they have been on 1st line. Many poor people who do not fall into the Below Poverty Line category have had to devastate their finances to buy the drugs or go without and face the risk of death, adds Vincent McDonald, Communications Advisor at NMP+. (Indian Express 23/8/09)

### **HIV positive student turned out of school (3)**

LUCKNOW: A nine-year-old HIV positive student was turned out of a government-run primary school in Uttar Pradesh's Allahabad district as the principal mistakenly feared he would spread the virus among other children, officials said on Monday. A complaint was Monday filed against the principal of Belmonda Primary School in Allahabad for "humiliating" the the Class 4 student, a resident of Jasra locality, an official said. "We learnt that the nine-year-old was Saturday shooed away from the school by its principal for being HIV positive," Brijesh Mishra, official in-charge of primary education in the district, told IANS over telephone from Allahabad, some 200 km from here. "We still don't know how the school principal came to know that the boy was HIV positive. We have initiated an inquiry in this regard," he said. According to officials, the child's parents had died of AIDS in Soraon locality. While the mother died nearly three years ago, his father died last June. After his father's death, the boy's maternal uncle brought him to his home in Jasra and had admitted him to the school. "We assure that the student will not have to face any problems from the school administration. We will take stern action against the principal who was responsible for the incident," Mishra said. "The incident exposes that it's not only the illiterate, awareness about AIDS and HIV is quite low amongst the educated class as well," he added. (Times of India 24/8/09)

### **HIV+ kid thrown out of govt school (3)**

ALLAHABAD: Just how ineffective have been both the Central and state governments' unceasing campaign regarding AIDS awareness was painfully evident when an 8-year-old HIV positive kid, Raju (name changed), was stigmatised and thrown out of a government primary school in Belamundi, roughly 50 km from here. But someone was doing his job, and Raju's sorry fate was averted when a UP basic shiksha अधिकारी (BSA) Brajesh Mishra found that the school headmaster had struck off Raju's name — along with two of his siblings' — from the roster during a surprise check. In fact, on learning of the stigmatisation, Mishra sought out Raju and, holding him in his arms, gave an impromptu AIDS awareness demonstration, even as gawking parents — whose protests were responsible for Raju's plight — came to terms with it. Attendance in this school has dwindled drastically. From a total of 212, the number of kids in the last one week has dropped to 15-20. Mishra has now requested the DM to send doctors to Belamundi to educate the villagers. "It would be a pity if Raju is denied the opportunity to study," he told TOI. All this kerfuffle has left Raju perplexed. A student of class four, he has been through worse — for instance when his mother died of AIDS in 2004. He faintly remembers her and the better times when they lived in Allahabad's Khusro Nagar. His parents cultivated a small patch of land and made garlands to sell in the flower mandi. Things were tough but tolerable until his father, too, died of AIDS two years ago. Now orphans, Raju and his two siblings were packed off by neighbours to their reluctant grandparents. (Times of India 25/8/09)

### **HIV+ people with low CD4 count at higher risk (3)**

PUNE: National AIDS Research Institute (NARI) director Ramesh Paranjape on Monday said that HIV positive patients with a low CD4 count and irregular antiretroviral therapy might be at a higher risk to develop complications if they contract the H1N1 virus. Speaking to TOI, Paranjape further said that the advisory for HIV patients issued by the National AIDS Control Organisation (NACO) was awaited. The city has already reported a death of a patient co-infected with H1N1 virus and HIV. CD4 is a type of glucose found in human white blood cells which helps fight certain infections. "Immuno-suppressed people, including those with a low CD4 count and no antiretroviral therapy, experience more severe complications of the seasonal influenza. It is possible that these HIV positive people will also be at a higher risk for

H1N1 influenza-related complications," Sanjay Pujari, director of the Institute of Infectious Diseases (IID), said. This is based on early anecdotal reports, he added. "People suffering from leukaemia might also be prone to greater risk if they contract the H1N1 virus," Pujari said. "Since patients belonging to these categories have low levels of immunity because of the diseases from which they are already suffering, they also become prone to other viral infections like H1N1," the IID director added. Pune and Pimpri-Chinchwad have five ART centres run by the respective civic bodies. There are also five linked centres in the city. Sandesh Thorat, president of the Maharashtra State AIDS Control Employees' Federation, said, "The ART centres in Pune have over 10,000 registered HIV positive patients. Of these, 90 per cent come for treatment regularly. So there is not much reason to worry. Secondly, the counsellors at the centres also talk to the patients about the precautions that they need to take against H1N1 flu." Outlining the precautionary measures, Pujari said, "People who are HIV positive should follow the same cough etiquette, social distancing and hand hygiene measures as any other person. They should visit their hospital even if they show mild symptoms. And there is nothing to worry." (Times of India 1/9/09)

### **NGOs to set up liaison network for AIDS victims (3)**

MADURAI: Acquired Immuno Deficiency Syndrome (AIDS) was a serious condition for the individual was largely responsible, said A. Tamilarasi, Minister for Adi Dravidar and Tribal Welfare, on Wednesday. Addressing a gathering here after inaugurating the Network of Agencies Liaisoning on HIV/AIDS Among Migrants (NALAM) here, she said that the incidence of the syndrome was high among labourers in the age group of 18 to 49 years. Ms. Tamilarasi said that it took great efforts from the State and various organisations to remove the taboo attached to AIDS. Thanks to the developments in the medical field, life could be prolonged in AIDS cases, she added. Speaking on the need to provide an impetus to education in general, she said that it was the only means to empowerment because it provided a platform to bring about a social change. S. Sebastine, Corporation Commissioner, said that a good organisational network connecting major towns to create awareness among people and provide counselling to victims was a prime necessity. T. R. Jayabalan of Madurai Multipurpose Social Service Society said that migrant labourers who went to places like Tirupur, Coimbatore and Erode from southern districts to work came back with tuberculosis and AIDS. NALAM is the coming together of 6 NGOs, which have been working among the marginalised and downtrodden for quite sometime. The network aims to sensitise migrant workers and provide information related to health problems and migration issues. (The Hindu 3/9/09)

### **Two kids died after blood transfusion (3)**

JAIPUR: Two children died in the past four months after blood transfusion in Shyam Nursing Home, Anoopgarh, where a blood sale racket was unearthed recently. This was revealed in the probe report submitted to health minister A A Khan. One of the victims, two-day-old Manju, died within five hours after receiving blood on July 13. Seven-year-old Aman, died two and half months after receiving blood on June 3. The health department is yet to find out the cause of death as no post-mortem was conducted. "It has been found that two children, who received blood at the nursing home, had died in past few months. However, the reason can only be known after further investigation," Khan said. The minister had ordered an inquiry into the case by a three-member committee. However, the investigation officers are faced with a major challenge as there are widespread anomalies in the admission records at the nursing home. The health officials found records of only past four months and a code 'BT' was used to indicate blood transmission. The records show that eight children received blood in the past four months. Though blood was taken from their relatives, no blood test was conducted. "The laboratory was not authorised to collect blood. Eight cases had taken place in the last four months, indicating a connivance between the accused doctor and the laboratory operator," a senior health officer said. The health department has been able to trace five of these patients. It was earlier alleged that a HIV positive person had also donated blood at the laboratory. However, all the five children were given blood taken from their relatives and have been tested negative for HIV. An FIR was registered on August 30, following which the laboratory owner was arrested while nursing home incharge Dr Bharat Bhusan had been absconding. The health department has suspended the licence of the doctor and eight teams have been put to check the remaining 65 nursing homes and 102 laboratories in Sriganganagar. (Times of India 4/9/09)

### **Antibodies to target HIV more effectively (3)**

The discovery of two powerful new HIV antibodies will help tackle HIV more effectively. Researchers will now try to exploit a newfound vulnerability on the virus to craft novel approaches to designing an AIDS

vaccine. Besides, the global collaboration that led to the discovery of the two new broadly neutralising antibodies (bNAbs) are likely to produce more such antibodies. They may further reveal additional vulnerabilities of HIV, adding still more vitality to the effort to develop a vaccine against AIDS. "The findings themselves are an exciting advance toward the goal of an effective AIDS vaccine because now we've got a new, potentially better target on HIV to focus our efforts for vaccine design," said Wayne Koff, senior vice-president of research and development at the International AIDS Vaccine Initiative (IAVI), Scripps Research Institute. "And having identified this one, we're set up to find more, which should further accelerate global efforts in AIDS vaccine development," he added, according to a statement from the institute. (Times of India 5/9/09)

### **Nutritious support to HIV/AIDS-affected (3)**

KARUR: A new initiative to provide free access to nutritious support to the people living with HIV/AIDS in Karur district has been launched at the Anti Retroviral Therapy Centre here. The Karur Collector's ART Welfare Trust has been formed exclusively for providing financial support to the programme that would benefit over 2,800 clients currently registered with the ART Centre functioning from the Government Hospital here. The aim of the initiative is to inculcate the habit of nutritious dietary intake among the people living with HIV/AIDS. The pilot project would bestow immense benefits on the families of the AIDS affected. Children with AIDS/HIV would further stand to gain from the initiative with additional dietary support. This is perhaps the first time such an initiative has been launched anywhere in the State. The trust would fund the clients visiting ART Centre with nutritious dietary support, including free provision of one egg, 50 gm of cereals or pulses, 10 gm jaggery, 50 gm peanut and four dates, all of which come as a pack for every individual during their visit to the ART Centre. The pulses or cereals would be supplied in boiled and ready to consume conditions, according to Collector J. Uma Maheswari who launched the programme. Child clients who visit the ART Centre would get a cup of milk in addition to the package. (The Hindu 9/9/09)

### **Unwilling to pay for her HIV treatment, man kills niece (3)**

Lucknow , September 09, 2009: Three years ago 12-year-old Manjot Kaur's parents died. They had HIV/AIDS. On August 30, the railway police found the minor's body in a bag in an AC coach of Maharashtra Sampark Kranti (Delhi-Mumbai) Express. Her uncle had allegedly killed her because he said she too had AIDS. On Tuesday Mathura Government Railway Police (GRP) arrested Gurbas Singh (45) for his niece's murder. He has stuffed the girl's body in a bag and left it in the train. SSI (Mathura GRP) Premchand Yadav told HT over the phone, "Gurbas Singh said the girl was an HIV/AIDS patient and he was tired of spending money on her treatment." Earlier, Singh had told the police the minor was of 'bad character'. Kaur was staying with Gurbas Singh in Badarpur in Delhi while her sister Navjot (15) and brother Yashkaran (6) had been 'adopted' by other relatives in the Capital. The Mathura GRP, which was working on the case, said first the killer's photograph was obtained and when there was information that he was going to board a train from Mathura, the arrest was made. Singh will be sent to jail on Wednesday. On August 30, the train was detained at Mathura for over two hours following the recovery of the body. The train started from Hazrat Nizamuddin station in New Delhi around 8:40 p.m. on Monday. Soon, some passengers informed the RPF about foul smell emanating from AC coach A-1. Singh reportedly killed the girl at home and put the bag in the train at Delhi. (Hindustan Times 9/9/09)

### **Bias against HIV-positive persons resented (3)**

ANANTAPUR: Speakers at a meeting of people living with HIV/AIDS, Sammelan-2009, held here on Sunday urged the society not to discriminate people with HIV socially and instead help them lead a normal life. The disease had become an obstacle in the nation's development and it was the most critical problem dogging our society, they said. The disease could be prevented with discipline and sanity in life. Zilla Parishad Chairperson T. Kavitha stated that it was the responsibility of the society to create awareness among those who contracted AIDS to take treatment to extend their lifeline. Of the about 5.4 lakh HIV positives in the State only 54,000 were taking treatment, she said. The HIV positives were facing glaring discrimination, particularly in their neighbourhoods, among their relatives, offices and schools, she noted. "We all must not forget that by discriminating against them socially we are cutting short their lifespan as lack of moral support will make them lose confidence to fight the disease," the ZP Chairperson noted. Government Whip S. Sailajanath, who is also convenor of State HIV/AIDS Legislature Forum, said there were about 6,000 AIDS patients in the district and vowed to take up with the government to extend

social security pension scheme to HIV positives. The Asha-I and Asha-II programmes from 2005 had helped create awareness on HIV/AIDS among people by alleviating misconceptions. A total of about 1,700 HIV positives attended the meet. ANP president G. Veeranjanyulu, Ch. Padmaja, additional DMHO K. Manoramana and others also spoke (The Hindu 14/9/09)

### **18 month paid leave for HIV+ TN govt staff (3)**

CHENNAI: In a gesture of care and support to its employees with HIV/AIDS, the Tamil Nadu government has decided to give 18 months paid medical leave to those infected by the virus. A government order issued by the department of personnel and administrative on Friday said the state was the first in the country to extend such a benefit. It directed all departments to sanction leave to HIV-infected persons without any hesitation. Tamil Nadu State AIDS Control Society had recommended that people infected with HIV/AIDS be given leave without hesitation. "People with HIV/AIDS often fall sick as their immunity levels are low. We don't have exact numbers of people with the infection in the government sector. We wanted to set an example to several employers who ask infected people to quit fearing their productivity would go down. So, we recommended that the infection be included along with other diseases like TB, cancer and leprosy where leave is given with salary for 18 months. All the department heads would require a medical certificate mentioning the HIV positive status of the employee," said health secretary V K Subburaj. The HIV sentinel surveillance and HIV estimation showed a nationwide decline in the prevalence of the disease. Tamil Nadu, which had the largest number of HIV cases in the country in early 2000 has also seen a decrease, with the prevalence rate dropping from 1% to 0.25%. "We estimate about 1.84 lakh people with HIV/AIDS in the state. So far 1.4 lakh people have registered with our anti-retroviral centres and 54,000 of them have been getting the drugs free of cost," says TNSACS project director S Vijayakumar. Though the infection rate has been declining in the country, the stigma and discrimination of people living with HIV/AIDS have not come down, say people like Dr Lakshmi Bai, project director, TAI. The first HIV/AIDS case in the country was reported in 1986 in Tamil Nadu in 2007. (Times of India 26/9/09)

### **HIV/AIDS counsellors threaten to stop work next week (3)**

Bangalore: The health scenario in the State is likely to go in for a toss in the next 15 days. While government doctors, who have been demanding pay parity, incentives and time-bound promotions, are determined to resign en masse on September 29 as their demands have not been met, the 650 HIV/AIDS counsellors working for the Government are also planning to strike work from October 5 pressing for higher wages. All the 4,199 government doctors, including the Director (Health and Family Welfare Services) and joint directors, will submit their letters to the Principal Secretary (Health and Family Welfare) I.R. Perumal on Monday. "Although we will give 15 days for the Government to accept our resignations, we will be grateful if it relieves us on the first day itself. We will set up private clinics outside the hospitals where we are working and ensure that patients are not put to hardship," H.N. Ravindra, president of Karnataka Government Medical Officers' Association (KGMOA) said. He explained that the package announced after the Cabinet meet on Friday was just eyewash. "They have shown a house rent allowance of Rs. 2,810 for general duty medical officers. But only 500 of the 2,586 officers who are posted in urban areas are eligible for this. The rest working in rural areas will continue to get Rs. 700. This is an example of how the Government is hoodwinking us," Dr. Ravindra said. "The Government has fooled us by offering a marginal hike. We do not wish to continue working as bonded labourers," he added. Meanwhile, members of the Karnataka State HIV/AIDS Counsellors' Association, who have been demanding regularisation of their services and higher wages, have threatened to strike work from October 5. "We will not send the monthly report for September to the National AIDS Control Organisation (NACO). Although NACO had five months ago directed the Karnataka State AIDS Prevention Society (KSAPS) to double our salaries from Rs. 6,500, nothing has been done so far. Besides, KSAPS has threatened to terminate our services if we go ahead with the strike," Fayaz Ahmed, association secretary told The Hindu on Saturday. Though these counsellors were appointed on the basis of postgraduate employees' wage scale, they are paid Rs. 6,500. "We have been working for this amount for the last eight years. While most people want to stay away from HIV/AIDS infected people, our work is in association with them. Our main role is to prevent the spread and transmission of the dreaded disease from parent to child. Yet, we are paid much less than what graduate clerks are paid in other health offices," Mr Ahmed pointed out. (The Hindu 27/9/09)

### **HIV among high risk groups falling in Manipur (3)**

IMPHAL, Sept 26 – HIV/AIDS prevalence rate among the high-risk groups like Intravenous Drug Users (IDU), Men having sex with Men (MSM) and Female Sex Workers (FSW) has come down in Manipur during the last one decade. Officials of the Manipur State AIDS Control Society (MSACS) claimed this during a State-level workshop on HIV/AIDS for media persons here recently. Dr Kh Pramodkumar, Project Director (Technical) said, the prevalence rate among IDUs has been reduced from 70 per cent to 17.9 per cent in the last one decade. Likewise, such trend is also seen in other high risk groups, he claimed. However, HIV/AIDS being a very complex epidemic on its dynamics, infection rate among the pregnant mothers is comparatively increasing in Manipur Hills though it has decreased in the Valley districts, he said. But the prevailing infection rate among the FSWs and MSMs are not encouraging as the prevalence rate among these groups is slowly rising in Churachandpur and Imphal West districts. According to MSACS's latest sentinel surveillance reports, Manipur with as many as 25,655 HIV positive cases, has become the second Indian State having very high HIV prevalence among female sex workers (12.9 per cent) after Maharashtra (17.91 per cent). In 2006, the prevalence rate was just 11.6 per cent. Similarly, the prevalence rate of MSM in 2006 was only 12.4 per cent but it reached 16.4 per cent in the following year. Project Director Pradeep Kumar Jha of MSACS said getting HIV/AIDS does not mean it is the end of life. He also sought support from the media while covering 80 per cent of the State's population under National AIDS Control Programme III which is being implemented in the region. In this new programme, National AIDS Control Organization (NACO) is trying to focus more on the district level activities than the State by instituting district AIDS control units. Such district units were formed in Manipur, Mizoram and Nagaland as the epidemic continues unabated in these States. But some NGO leaders and media persons demanded immediate review of the 13 year-old State AIDS policy to accommodate the present requirements. MSACS officials confirmed the receipt of a recommendation by a review committee. (Assam Tribune 27/9/09)

### **End hardship of HIV positive persons, government urged (3)**

BIDAR: A district-level convention of HIV/AIDS affected persons on Wednesday urged the Union and State governments to take steps to solve the problems being faced by the patients such as unnecessary delay in conducting medical examinations. The convention was jointly organised by Prawarda; Organisation for Bidar Integrated Transformation (ORBIT); Beladingalu Network and Myrada, all non-governmental organisations of Bidar. The convention was held at Rangamandira in the city. In a memorandum submitted to Deputy Commissioner Harsh Gupta addressed to Prime Minister Manmohan Singh and Chief Minister B.S. Yeddyurappa, the organisers said district hospitals should have facilities to handle delivery cases of women with HIV/AIDS; doctors who refused to treat HIV/AIDS affected patients should be dismissed from service; and blood from blood banks should be given to HIV/AIDS affected patients free of cost. Their other demands were establishment of Anti-Retro Viral Therapy (ART) centres at all taluk headquarters; self-employment avenues for HIV/AIDS patients to make them earn their livelihood and children from HIV/AIDS families should be admitted in Morarji Desai, Navodaya and all other government-run residential schools. The memorandum said the Union and State governments spent crores of rupees on health, education, poverty alleviation, social justice and others every year but the problems faced by HIV/AIDS affected patients had not been given due attention. Bidar MLA Rahim Khan asked HIV/AIDS affected patients not to lose confidence in them. He assured the children of HIV/AIDS affected families to provide free education to them at his Roohi Education Trust in Bidar and also to assist the meritorious students with scholarships. Mr. Harsh Gupta said he was aware that all was not well with the District Hospital in Bidar and would prompt steps to bring in reforms in the functioning of the hospital. District Health and Family Welfare Officer Madna Vajjnath and District Surgeon Kashinath Gokhale were present. About 300 HIV/AIDS affected from across the district participated. (The Hindu 1/10/09)

### **4 million HIV people were treated in 2008: WHO (3)**

NEW DELHI: Over four million HIV positive people in low-and middle income countries received antiretroviral therapy (ART) in 2008, a 36 percent jump over the previous year and a 10-fold increase over five years, said a new report released Wednesday. The report, which was released in Geneva, was jointly launched by the World Health Organization (WHO), the United Nations Children's Fund (UNICEF) and the Joint United Nations Programme on HIV/AIDS (UNAIDS). "This report shows tremendous progress in the global HIV/AIDS response," said WHO Director-General Margaret Chan. "But we need to do more. At

least five million people living with HIV still do not have access to life-prolonging treatment and care. Prevention services fail to reach many in need. Governments and international partners must accelerate their efforts to achieve universal access to treatment," Chan said. India has an estimated 2.3 million people living with HIV and AIDS - there are 800,000 HIV people registered for treatment, of which 270,000 people are on ART. The Indian government has set a target of reaching out to over 300,000 adults and 40,000 children by 2012. At the moment, only 14,000 children are getting the therapy. "Access to antiretroviral therapy continues to expand at a rapid rate. Of the estimated 9.5 million people in need of treatment in 2008 in low-and middle-income countries, 42 percent had access, up from 33 percent in 2007," the report showed. It said that the greatest progress was seen in sub-Saharan Africa, where two-thirds of all HIV infections occur. "Prices of the most commonly used antiretroviral drugs have declined significantly in recent years, contributing to wider availability of treatment," it added. According to the report, "despite recent progress, access to treatment services is falling far short of need and the global economic crisis has raised concerns about their sustainability". "Many patients are being diagnosed at a late stage of disease progression resulting in delayed initiation of ART and high rates of mortality in the first year of treatment," it said. Though there had been improvement in the expansion of HIV testing and counselling and improved access to services to prevent transmission from mother to child, a majority of those living with HIV remain unaware of their HIV status, the report said. "Low awareness of personal risk of HIV infection and fear of stigma and discrimination account, in part, for low uptake of testing services."(Express Buzz 1/10/09)

### **India needs to commit more to fight HIV/AIDS' (3)**

New Delhi, October 02, 2009:: Some African countries like Kenya and Uganda are unable to sustain their HIV and AIDS prevention programmes due to the global economic recession and India should take lessons from that as it is home to the world's third largest HIV population after South Africa and Nigeria, says a UN official. "India has been doing a really great job. But the HIV prevention programmes should continue and the money should be available. It is not at all a cheap programme. There is a shortage of funds from international donors due to the global economic recession," Charles Gilka, UNAIDS country coordinator for India, told IANS in New Delhi. "The economic meltdown has not had much impact on India. India has a strong economy. But lessons could be learned from the way Africa has been badly hurt. The financial crunch is hitting the prevention programmes in some African countries like Uganda and Kenya. So India cannot be complacent in its approach to fighting HIV and AIDS," Gilka said. "In these African countries HIV and AIDS programmes were highly successful. But as they get funds from Global Fund and the US government, they could not sustain or expand their programmes because of funds shortages. These countries are now facing problems in carrying out their prevention programmes or providing treatment for new patients," he said. "But India is not in this position so far. The prevention, care and support programmes need continued political and financial support of the Indian government. India needs to commit more. The programmes are yielding results and so more focus is needed," he added. Approximately 5.2 million people in South Africa and 2.6 million in Nigeria suffer from HIV/AIDS, followed by 2.3 million in India. According to UNAIDS, there were around 33 million HIV positive people globally, while there were 2.7 million new infections and 2.0 million deaths from AIDS in 2007. The National AIDS Control Organisation (NACO), which forms policy and implements programmes for the prevention and control of HIV and AIDS in India, under its national AIDS Control Programme 2007-2012, has a budget of Rs.11,585 crore (\$2.4 billion), of which Rs.2,861 crore is invested by the Indian government -- nearly 25 per cent of the total. Gilka, who joined as the India head in November 2008, said that due to the global recession, the funds have been either frozen or are going down. "This poses a threat to successful HIV and AIDS programmes in the world. "Most of the programmes are externally funded and as the financial help is drying up and priorities are changing, there is a global threat that spotlight could shift from HIV and AIDS." He said UNAIDS Executive Director Michel Sidibé is visiting India for three days from Oct 7 and will stress on the need for continued and sustained support to the HIV and AIDS prevention programme by the Indian government. Sidibé, who is also Under Secretary-General of the United Nations, is likely to meet Prime Minister Manmohan Singh, who is head of the National Council on AIDS formed in 2005 with the aim to monitor public health agencies' progress on preventing the spread of HIV in India. He will also meet Oscar Fernandes, who heads the Parliamentarians' Forum on HIV/AIDS. "His (Sidibé's) visit will focus on the need for sustained support to the programmes by the Indian government," Gilka said. "If finances are not available for fighting HIV and AIDS, there is a fear that the epidemic might return.

Globally, so much money has been spent. All this could be a waste and many lives will be lost if we become complacent now," he added. (Hindustan Times 3/10/09)

### **HIV among high-risk groups falling in Manipur (3)**

IMPHAL, Oct 3 – HIV/AIDS prevalence rate among the high risk groups like Intravenous Drug Users (IDU), Men having sex with Men (MSM) and female sex workers (FSW) has come down in Manipur during the last one decade. Officials of the Manipur State AIDS Control Society (MSACS) claimed this during a State-level workshop on HIV/AIDS for media persons here recently. Dr Kh Pramodkumar, Project Director (Technical) said, the prevalence rate among IDUs has been reduced from 70 per cent to 17.9 per cent in the last one decade. Likewise, such trend is also seen in other high risk groups, he claimed. However, HIV/AIDS being a very complex epidemic on its dynamics, infection rate among the pregnant mothers is comparatively increasing in Manipur Hills though it has decreased in the Valley districts, he said. But the prevailing infection rate among the FSWs and MSMs are not encouraging as the prevalence rate among these groups is slowly rising in Churachandpur and Imphal West districts. According to MSACS's latest sentinel surveillance reports, Manipur with as many as 25,655 HIV positive cases, has become the second Indian State having very high HIV prevalence among female sex workers (12.9 per cent) after Maharashtra (17.91 per cent). In 2006, the prevalence rate was just 11.6 per cent. Similarly, the prevalence rate of MSM in 2006 was only 12.4 per cent but it reached 16.4 per cent in the following year. Project Director Pradeep Kumar Jha of MSACS said getting HIV/AIDS does not mean it is the end of life. He also sought support from the media while covering 80 per cent of the State's population under National AIDS Control Programme III which is being implemented in the region. In this new programme, National AIDS Control Organization (NACO) is trying to focus more on the district level activities than the State by instituting district AIDS control units. Such district units were formed in Manipur, Mizoram and Nagaland as the epidemic continues unabated in these States. But some NGO leaders and media persons demanded immediate review of the 13 year-old State AIDS policy to accommodate the present requirements. MSACS officials confirmed the receipt of a recommendation by a review committee. (Assam Tribune 4/10/09)

### **6 women fall prey to HIV in rural pockets (3)**

ALLAHABAD: At least six women in rural pockets of the district have been tested HIV positive mainly due to unabated use of infected syringes by quacks. Officials of the health department in association with Allahabad Network for People Living with HIV/AIDS (ANP+) are running from pillar to post to apprise villagers about harmful affects of infected syringes. However, it is not an easy task as rural folks especially women are not ready to listen to their pleas. The six women, who have been tested HIV positive, were allegedly administered drugs with infected syringes by quacks. To keep an effective check on such cases, the health officials are campaigning in rural blocks, apprising villagers about harmful affects of infected syringes. Talking to TOI, Vishal Chhari, joint secretary of Allahabad Network for People living with HIV/AIDS said that the ANP+ has conducted counselling of a number of women who got infected with HIV due to infected syringes. He said that villagers usually do not know anything about infected syringes and fall prey to deadly diseases due to lack of medical awareness. Chhari further said that most of the villagers do not visit primary health centres or community health centres located few kms from their villages. Instead, they prefer quacks for reasons best known to them, he said. Dr VK Srivastava, district programme officer, Aids control, said that the health officials are trying their best to create medical awareness among the villagers. Women in rural pockets used to force doctors to treat them with the same syringe which was used by their husbands. Some of these men, working in metropolitan cities, unknowingly pass the virus to their wives, he said. The situation has turned alarming with villagers shying away from visiting PHCs and CHC and approaching quacks for their treatment. The health department with the help of the district police has launched a drive against quacks. ANP+ office-bearers said that strict rules are needed to put an effective curb on quacks who do not hesitate in treating all patients with a syringe. Besides, steps are being taken to clear myths among villagers who think that a common syringe can treat all family members. Apart from unprotected sexual relationship, use of infected syringes is prime reason behind increasing HIV threat in rural parts. Insiders told TOI that apart from over 950 persons registered with ANP+, over 3,000 have been registered with ART centres reaching the number of HIV affected persons to more than 4,000. (Times of India 6/10/09)

### **Break in Article 377 logjam to give push to anti-AIDS drive (3)**

An international UNAIDS delegation, led by UNAIDS executive director Michel Sidibe, arriving next week, is likely to discuss matters relating to sustaining and possibly raising funds for the fight against AIDS. Charles Gilk, UNAIDS country head, in an interview with FE's Soma Das, talks on the new vistas that the decriminalisation of homosexuality has opened up in the country, on what shrinking funds to developmental causes could do to the HIV success story, and the need for statistics on Hepatitis B and C. Excerpts: Are you concerned that against the backdrop of the global financial crisis and the shrinking flow of funds to developmental causes, the battle against HIV could fall off the map? What is the agenda of the international UNAIDS delegation arriving here next week? Yes, we are worried. The major issue that Michel would discuss is sustaining and possibly raising the funding for AIDS. With the global economic crisis shrinking funds for the developmental agenda and many health and developmental issues competing for scarce resources, we are concerned that HIV shouldn't become a victim. Also, the AIDS programme is very successful—it is clearly working here and the numbers are coming down, which in fact takes the donors' focus off the cause. This is because they are questioning that since the impact is evident, why should they continue the funding. However, the underlying structural risks and vulnerabilities haven't changed in India. We ought to move on with the project with the same intensity. A lot of MSMs (men who have sex with men), sex workers and migrant labourers pose new complexities before us. We do not want AIDS to meet the same fate which malaria did. Michel is coming at a time when we are trying to maintain the momentum globally. With the financial crisis, there has been a flat line in funding, particularly if you see PEPFAR in the US, and the global fund is also having difficulties replenishing its resources. Michel will also discuss the positioning of HIV in the general health structure strengthening agenda, with respect to the National Rural Health Mission and the National Urban Health movement. (Financial Express 8/10/09)

### **Soon, mandatory for pregnant women in India to undergo HIV test (3)**

NEW DELHI: Passing AIDS from mother to child is a human rights violation and soon all pregnant women in India will have to undergo a mandatory HIV test, the parliamentary forum on HIV and AIDS said on Friday. "We want a HIV free generation. We are for testing all pregnant women for HIV so that no children can be born with the disease," Oscar Fernandes, head of the Parliamentary Forum on HIV and AIDS, told IANS. "Passing the disease to a new born is a human rights violation. This should stop and all of us must try to make this a success," he said on the sideline of an event here. Fernandes, appreciated across the country for advocating a better life for AIDS patients, said: "The new born should not suffer lifelong without committing any sin. Why should they suffer? Isn't it a human rights violation?" The former labour minister said the forum met UNAIDS executive director Michel Sidibe Thursday and discussed the issue with him. "Sidibe said, 'India must produce a generation without HIV'. This is possible if we go for detecting the virus in every single pregnant women before delivery." India is home to at least 2.5 million HIV positive people and thousands of babies are born with HIV positive status as they acquire the virus while in their mother's womb. Sidibe, on his first visit to India, has held a series of meetings with government authorities. He has emphasised the role of the political leadership in ensuring that the country's universal access goals to HIV prevention, care and treatment are achieved. Fernandes said this would be done by involving the panchayats. "You know, institutional delivery in India happens in around 50 percent of the cases. Here we have to involve the panchayats." He added that the health ministry's Janani Suraksha Yojana (JSY) will take this issue for implementation. JSY is a safe motherhood intervention under the National Rural Health Mission (NRHM) and is being implemented with the objective of reducing maternal and neo-natal mortality by promoting institutional delivery among the poor. JSY is a 100 percent centrally sponsored scheme and it integrates cash assistance with delivery and post-delivery care. The success of the scheme would be determined by the increase in institutional delivery among the poor families. "If we detect HIV before the institutional delivery, it will curb HIV spread. You will see it soon," Fernandes said. The Parliamentary Forum on HIV and AIDS started in 2000 under the leadership of Oscar Fernandes to to strengthen India's response to this dreaded disease. Dozens of parliamentarians are its members, who all work to create awareness and help the government in formulating policies on this subject.(Times of India 9/10/09)

### **AIDS patients yet to get 75% concession on train tickets (3)**

BANGALORE: In a bid to be politically correct, the Indian Railways will now call HIV/AIDS patients as "people with immune deficiency". They can also now hold on to their certificates proving their condition for a little while longer. Following a Supreme Court order recently, the railway ministry mulled over giving

75% concession in some classes of tickets for HIV positive and AIDS patients. Currently, patients suffering from cancer, thalassemia, haemophilia, heart and kidney conditions and mental illnesses are eligible for up to 75% concession in all classes of tickets. A check with South Western Railway officials revealed that AIDS patients are yet to be given this relief. Currently, only 50% of the fare in unreserved II Class is allowed. The only respite, say officials, is that the certificate from doctors to validate their claim is now valid for six months instead of the earlier three months. SWR officials told TOI the proposal was mooted in the 2008 budget. But the new order from Delhi to allow 75% concession is yet to reach them. It seems that news of this concession is yet to reach the beneficiaries as well. A representative of Freedom Foundation, an NGO that works with HIV positive people, said that none of their people had availed the concession. "We were under the impression that the concession was still being negotiated and not entirely in place. As far as we know, HIV/AIDS patients have only availed concessions on bus tickets and not train tickets," she added. (Times of India 12/10/09)

### **Documentary brings out plight of children affected by AIDS (3)**

Bangalore: Five-year-old Savithri Kumar has vivid memories of her loving parents, both of whom passed away due to HIV-AIDS two years ago. "Both my parents loved me very much. I was the apple of their eyes. But unfortunately both died, just months apart, two years ago. Doctors say both had HIV-AIDS," Savithri (name changed), who too is HIV positive and currently staying with her grandmother in Bangalore, told IANS. According to experts working in the field of HIV-AIDS, children like Savithri, who have lost both their parents due to HIV-AIDS and are themselves infected by it, are the worst victims of the disease prevalent in the country for the last two decades. Their plight is well brought out in the heart-rendering Kannada documentary "A Generation Challenged". The film was released by Karnataka Chief Minister B.S. Yeddyurappa at the inauguration ceremony of Ashodaya Academy, a HIV-AIDS awareness centre said to be the first of its kind in the Asia-Pacific region. The centre will be located in Mysore, 139 km from here. The 18-minute film has been produced by Ashodaya Samiti, a Mysore-based organisation working for the welfare and health issues of sex workers in Karnataka and Infact Films, a film production house based in Bangalore. "Cinema has always been a strong medium to pass on social messages. As a large number of children are becoming orphans with both their parents suffering from AIDS, a huge social problem is building up and it is our responsibility to deal with the issue," said Sushena Reza Paul, adviser to Ashodaya Samiti. The film looks deeper into the crisis, as to how children of infected couples not only lose their parents but are forced to become homeless. "Moreover, the film shows how the orphan children have to deal with social stigma attached to the disease at a tender age. These kids are ostracised for being HIV positive and many a time denied the right to education and right to live a normal life," Paul said. "The documentary is the first effort in visualising the impact of paediatric AIDS in the country. The documentary deals with paediatric AIDS and its consequences on the children and the dependent population. It also looks at two decades of HIV prevalence in India," said Bhagyalakshmi, secretary of Ashodaya Samiti. The film has been conceived and researched by Bangalore-based journalists Maya Jaideep and Kestur Vasuki, who are working on the impact of HIV on children. The film will soon be screened across Karnataka, as part of an awareness campaign on HIV-AIDS by Ashodaya Samiti. The National AIDS Control Organisation (NACO) has termed Karnataka as a "highly prevalent state". The state has 2,50,000 HIV-infected people and 33,000 suffering from AIDS, according to the Karnataka State Aid Prevention Society (KSAPS). But only 22,000 of them are registered under the society. According to experts at the KSAPS, around 30 percent of children born to HIV-infected mothers are at risk of getting the disease if they are not part of the Prevention of Parent to Child Transmission programmes (PPCT). (Deccan Herald 14/10/09)

### **Diwali gift: 25 HIV kids look for 'adoptions' (3)**

This year's Diwali could be special to 25 HIV orphans of Mamata Foundation if its initiative to get them 'adopted' by city-based families, albeit for a few days, succeeds. Instead of distributing firecrackers and sweets, the foundation looks to give these HIV-positive kids the experience of what Diwali is all about. According to Amar Budukh, founder of the Mamata Foundation that provides a residential facility along with nutritional diet, counselling and education for 25 HIV orphans, it is efforts like these that will eventually get them in the mainstream. "Most of these children come from various parts of Maharashtra and have lost both their parents to AIDS. Some are as young as three years while the oldest is 11 years old." Says Dr Milind Bhoi, founder of the Bhoi Pratishthan, "We have appealed to families to 'adopt' these children just for a few days so that they can celebrate Diwali with them at home. Right from wearing new

clothes, sharing sweets, playing with firecrackers and exchanging greetings, at least for a few days, these children who have been orphaned at a tender age can partake of Diwali celebrations by spending time with the regular families. The organisation is looking to start 'placing' these children from Thursday as they already have a few families lined up for the short-term adoptions. However, they want to send out all the children out to their foster homes together even if it means holding back some of them who have their destinations ready, by a few days. (Indian Express 15/10/09)

### **HIV+ man dumps wife after she tests positive (3)**

LUCKNOW: Twenty-year-old Poonam Rajput (name changed) is forced to live on a roadside along with her one-year-old daughter. She was thrown out by her husband after she tested HIV+ a few days back. Ironically, Poonam's husband Suresh Kumar Rajput is also HIV+ but refuses to keep his wife on the grounds that he cannot bear the cost of her treatment. Her father, too, has refused to give her shelter fearing social stigma. Though Lucknow Network for Positive People (LNP+) that found the women a few days ago is trying for her rehabilitation, the episode has exposed absence of government mechanism in the state to provide relief to abandoned HIV positive women and children and work for their rehabilitation. Poonam filed a complaint with the State Women Commission (SWC), and on its intervention, the husband agreed to take back the baby but has refused to give shelter to wife. "Earlier, Suresh had agreed to take us back, but now he has gone back on his word and is asking for divorce," said Poonam, who is planning to knock at the doors of SWC again. Suresh, a small-time worker, said he has a limited income and cannot bear the burden of his wife. Poonam, a resident of Shahjahanpur, has been in Lucknow for the past two months to pursue her case with the SWC. The money she brought exhausted in a month and she was forced to live on the roadside when found by LNP+ activists. For the time being, the LNP+ has allowed Poonam to stay in its office but it wants government to come up with a suitable plan for shelter and rehabilitation of such victims. (Times of India 16/10/09)

### **Patients protest HIV/AIDS draft bill (3)**

New Delhi, October 21, 2009: Highly dissatisfied with the third draft of the HIV/AIDS bill which the law ministry has proposed, nearly 200 people, including those living with HIV, staged a protest outside the ministry office in the capital on Wednesday. According to the protesters, many of whom have come from as far as Bangalore, Chennai and Kolkata to take part in the protest, 38 key provisions necessary to safeguard the rights of HIV positive people have been deleted in the draft. Daisy David, a member of the Chennai Network of Positive People, said: "We are very disheartened by the way the law ministry has been handling the HIV bill. Even after repeated requests, the key provisions in the bill have been deleted." "In 2006, the HIV/AIDS bill was prepared after intensive discussions with different stakeholders, including people living with HIV, sex workers and injecting drug users. That is the version of the bill that we want to be reinstated and passed by parliament," David told IANS. According to Raman Chawla of the Lawyers Collective which has been fighting for the passage of the HIV/AIDS bill, the 2006 version of the bill was prepared by the health ministry and sent to ministry of law and justice for vetting. "However, a much diluted version of the bill was sent back by the law ministry in 2007. Protests followed later and then the law ministry again sent a draft of the bill - almost like the last one," Chawla said. Pradip Dutta, a member of the Delhi Network of Positive People, said that while there are 38 provisions which they are demanding to be reinstated in the bill, one of the major demands is emergency services for an HIV patient. "A lot of times HIV patients are denied treatment in hospitals despite being an emergency. Therefore, we want a health official be appointed, as mentioned by the health ministry, who will give orders within 24 hours if such a situation arises," Dutta told IANS. "Also a lot of times we see that children whose HIV positive parents have died are denied their right over the family property. Therefore, there should be a provision by which the property rights of a child of HIV parents are protected," he added. (Hindustan Times 21/10/09)

### **Uproar against changes to HIV bill (3)**

New Delhi, Oct. 25: The law ministry has truncated a proposed bill intended to protect the various rights of HIV-infected people in a manner that will leave them vulnerable to harassment or exploitation, lawyers and activists have said today. The HIV/AIDS bill after revisions by the law ministry fails to address several issues including relief to HIV-infected persons during health care, emergency situations and the vulnerabilities of children, they said. "The law ministry has gone beyond its mandate and deleted substantive provisions — the work of the law ministry was only to check whether the provisions of the bill

are legally workable,” said Anand Grover, a lawyer with the HIV/AIDS unit of Lawyers Collective, a non-government organisation that had helped draft the bill after consultations across the country. Activists protesting against the revisions have cited the law ministry’s deletion of provisions relating to a proposed health ombudsman who would help ensure that health care services are not denied to HIV-infected persons. Under the draft bill finalised by the health ministry, the health ombudsman would have to issue orders to make available health care services in 24 hours in case of an emergency. The law ministry has deleted the emergency clause. “Denial of health care services is a continuous problem — it happens routinely with HIV-infected persons. This 24-hour provision would be crucial in emergencies,” said Anushree Kini, an advocacy officer with Lawyers Collective. The law ministry has deleted sections that provided civil penalties in case of breach of health ombudsman orders. While the health ministry version left it to the discretion of a health care provider whether to disclose the HIV status of a client to a partner, the law ministry has replaced the “may” with a “shall” — making HIV status of partners mandatory. The law ministry has also deleted provisions to allow an older sibling to act as guardian to other siblings even if the older was a minor and to protect the property of children of parents infected with HIV. The original bill as drafted by the health ministry had articulated the need for pricing medications and diagnostic tools in an open and transparent manner. The law ministry has deleted the words — “in a manner that is transparent, accountable, and open to public scrutiny”.(Telegraph 26/10/09)

### **HIV-positive no excuse for escaping liability: HC (3)**

New Delhi, October 28, 2009: A city court has said that a man cannot escape from the liability to maintain his estranged wife and minor children on the ground that he was HIV-positive. The court said the question of paying maintenance to (estranged) wife and children would be decided from the legal framework, which does not recognise the ailment (being HIV-positive) as the ground to exclude his liability. “He (husband) cannot be exculpated in law of his legal, social and moral liability to pay maintenance to his wife and children if he is otherwise liable to pay maintenance to them only because he is HIV positive,” Metropolitan Magistrate Twinkle Wadhwa said. The court, however, expressed its sympathy for the man who had contended that since he was HIV-positive, he was not capable of earning anything and hence was not liable to pay maintenance. The amount of maintenance, in such circumstances, would be decided keeping in view the facts regarding expenses incurred during the treatment, it added. The court, in its order, directed him to pay a total of Rs 1,200 to his two schoolgoing children. It also noted the man had not filed any document in the court to show that he was completely bed-ridden and unable to earn. The court, however, denied the wife any maintenance from the man after he claimed that she earned Rs 15,000 per month by working at a parlour here, saying she was able-bodied and capable of earning for herself. (Hindustan Times 28/10/09)

### **AIDS death, HIV cases decrease (3)**

CHANDIGARH: The two-pronged strategy adopted by the UT health department, in collaboration with the State AIDS Control Society, to meet the challenge posed by spread of AIDS, has started to pay dividends. UT officials revealed not only the number of deaths due to AIDS but also the percentage of HIV positive cases has come down. Project director of the society Vanita Gupta said while 114 persons had fallen victim to the deadly disease in 2007, the toll came down to 97 in 2008; and 61 in the first eight months of 2009. Meanwhile, out of the 8,924 persons screened, 1,066 (12%) were found HIV positive in 2006; whereas out of 13,630 screened, 1,144 (8%) were found positive in 2007; out of 17,405 screened, 1,239 (7%) were found positive in 2008; and out of 15,162 screened, only 780 (5%) were found positive till August 2009. Two years ago, the society started 13 target intervention programmes four each among the sex and migrants workers; two among mms and intra-virus druggists; and one each for industry, BPO sector and composite segment - in collaboration with NGOs to educate people of the danger posed by the disease and encourage them to adopt preventive measures. More and more people are coming forward for AIDS test, Gupta added. (Times of India 28/10/09)

### **HIV/AIDS: Outreach workers in a dilemma (3)**

LUDHIANA: Numerous HIV-positive people working as outreach workers under Punjab State AIDS Control Society have been handed termination letters. Thus, many putting up with the stigma of being HIV-positive are in a predicament with regard to their source of livelihood. How they would meet their daily expenses is a matter of concern. Outreach workers motivate people to go for HIV tests, dispel myths and misconceptions and ensure that people infected by the disease get the right kind of treatment. Kalyan

Singh (name changed) said it had been four years since he was found to be infected by HIV and had been working as an outreach worker. Last month, he received a letter from Punjab AIDS Control Society with regard to termination of services. He added that the termination has come as a bolt from the blue for contractual workers as the letter specified that all outreach workers be put under the rolling continuation channel grant (RCC) and the services be terminated from November 30. Rajesh (name changed) added that all outreach workers are getting verbal assurance, but how to manage their daily expenses is worrisome. Echoing the view, Sukhvir (name changed), another outreach worker, said in layman's language, outreach workers would come under the purview of RCC, for which an NGO would be responsible and all salaries that are presently coming through Punjab AIDS Control Society would come from an NGO. He added that AIDS Control Society has not come up with any time-frame within which the outreach workers would get the job. Talking on the same lines, another worker said without jobs, life would come to a standstill as workers would be hard-pressed to meet daily expenses. He added that government should do something about this as till outreach workers are under RCC, they would be jobless. Jagjit Mann, who is running an NGO, "The Positive People", said government initiated the scheme and despite outreach workers having proved their mettle in showing that they are no less than other people, they have got termination letters. He added that the workers are already besieged with problems and without jobs, life would be all the more tough. On being asked about the NGO's course of action, Mann added that the organization would approach higher authorities. (Times of India 1/11/09)

### **Housewives falling prey to HIV/AIDS in Mizoram (3)**

AIZAWL, Nov 1 – More and more housewives in Mizoram are falling prey to Aids due to no fault of their own, but their husbands who comprise a large percentage of the clientele of female sex workers. A study conducted by an NGO has revealed that at least 80 per cent of the clients of female commercial sex workers in Aizawl city are married men who are raising the rate of HIV/AIDS infections amongst the previously thought no-risk group of society – mostly those who are religious in nature and otherwise 'clean'. The New Life Home Society, which is an Aizawl-based NGO reaching out to 294 female sex workers, conducted a study of them recently and found that they could be classified into three categories – street-based, mobile phone-based and home-based. N Samuel, Project Manager of the New Life Home Society (NLHS) says that 156 out of the 294 sex workers are looking for customers in the streets of the capital city while 110 are getting their clients through mobile phones and cabbies and 28 of them received their customers at home. There are three sex workers who are in the age group of 10 to 15 and 58 between the ages of 16 and 20 while the highest age-group, 21-25 has 94 people, followed by 79 of the 26-30 age group, Samuel says. He said there were 40 of them in the age group of 31-35, six in the age group of 36-40 and four above 40 years old. There are 142 unmarried girls amongst the 294 sex workers in the city while 127 are divorcees and 25 are selling their bodies without the knowledge of their spouses, the study reveals. "My earlier assumption that majority of the female sex workers in Aizawl are from villages seeking jobs and city life is wrong as only 46 are from the villages while 248 are brought up in the city," he said quoting the study. He says that 221 operate from their respective homes living with their families while 73 are not living with their family members or relatives, but stalking the streets to receive money and also a room for a night or so through their customers. Marital status of the customers of these sex workers is what worries the NGO as at least 80 per cent are married men. "Out of the married men, 60 per cent are local tribals and 20 per cent are married people from outside the State, meaning non-tribals," the study says adding that there are 15 per cent of middle-aged customers, out of which 10 per cent are Mizos and five per cent are non-Mizos. Wellknown social worker P L Liandinga says that the problem can be traced to 20 years of insurgency between 1966 and 1986 during which period Mizo people suffered not only politically, but also economically and socially. Samuel says that female sex workers in Aizawl city prefer married men as they are in a better position to pay and never boast of sleeping with girls for being afraid that their wives will come to know of the affairs. "Among the 294 female sex workers among whom we have conducted the study, only three of them are HIV positives, he says. This, he feels, is mainly due to the fact that they know that they belonged to the high-risk group and take precautionary measures. "As more and more married men are inclined to have multiple sexual partners, the danger of the spread of the dreaded HIV/AIDS is looming large in our society, he says. – PTI (Assam Tribune 1/11/09)

### **Ludhiana figures among worst HIV-hit cities (3)**

Ludhiana has now got a dubious distinction of being among the cities most severely affected by AIDS, with the city having been placed under "A" category of HIV positive. This was revealed by National AIDS Control Organization (NACO) recently during a seminar organised by Delhi State AIDS Control Society. Disclosing this, Jagjit Singh Maan, founder president of Punjab Networking of Positive People Society (a non-government organization) said, "NACO has also stated this in its guidelines issued to Integrated Counselling Testing Centres. Earlier, it was only Amritsar from Punjab which was under A category, but now Ludhiana also figures in the list due to increased number of HIV positive people." Talking to The Indian Express, Maan said, "Lack of awareness among people and the government's indifference to the affected people has brought the city under 'A' category. Our NGO has been serving in Punjab for the last four years, but still many HIV positive people are not aware of this and are still running after quacks. A few weeks ago, I met a family at Issaru village of Ludhiana district where two people had died due to AIDS. Their third member is also HIV positive. I requested them to go for anti retro viral therapy but they did not agree and opted for a wrong therapy." The government's apathy to the problem nlt needs to be mentioned here that two years ago, the Union Ministry of Health and Family Welfare, in cooperation with Department of Health and National AIDS Control Organization, had appointed 16 out-reach workers in Ludhiana and Amritsar districts. All these 16 were HIV positive people and were appointed in local hospitals and their work was to keep track of the HIV positive people — by visiting them at hospitals or at their homes. But now these 16 out-reach workers have been issued the notices telling them that their services were being terminated from November 30, 2009. (Indian Express 2/11/09)

### **No HIV screening of job seekers, employees: Govt (3)**

New Delhi, Nov 2, (PTI): Protecting the rights of HIV positive job seekers and those already employed, a policy document has asserted that their HIV screening should not be required at the time of giving jobs or extending other benefits. It said if such screening is undertaken then employers may do "anonymous" study in accordance with professional ethics and workers should be consulted before it is done. The policy document on "HIV/AIDS and the world of work" has been jointly prepared by Labour and Employment Ministry and National AIDS Control Organisation (NACO) recently in the backdrop of swelling migrant labour population in the country. It stated there is no justification for asking job applicants or workers to disclose HIV related personal information. Nor should co-workers be obliged to reveal personal information about fellow workers. Personal information covered by medical confidentiality should be stored only by personnel who are "bound by rules on medical secrecy." (Deccan Herald 2/11/09)

### **'Three lakh HIV victims in India to be treated (3)**

BANGALORE: Only about 75,000 out of the one lakh people living with HIV (PLHIV) in the state are registered and are receiving the Anti Retroviral Treatment (ART). Highlighting the importance of care for PLHIV, a two-day convention on "Convergence for HIV Care"—A National Best Practice Workshop, organised by Snehadaan, a city-based NGO working for PLHIV, was inaugurated here on Thursday. Dr Bachani, deputy director, National Aids Control Organisation (NACO) gave a clarion call for a sustainable common minimum programme for care and support for PLHIV which can be implemented across the country. "At present, 2.70 lakh PLHIV are on ART in the country. This number is expected to touch 3 lakh and we would achieve the target set for March 2012 by March 2010. Global Fund is ready to continue the support with grants for the next six years," she said. RR Jannu, project director, Karnataka State AIDS Prevention Society said, "In Karnataka, the goal is to achieve comprehensive, competent and compassionate care for all people living with HIV and their affected families. This is being done through 34 ART centres, 565 Integrated Counselling and Testing Centres (ICTC) and 36 Community Care Centres (CCC) spread across the state." Poster exhibitions depicting success stories of care centres and ART centres, satellite skill-building workshops addressing themes such as encouraging positive speakers, prevention of infection, reduction of stigma and discrimination in health care settings are being held across the country. (Express Buzz 6/11/09)

### **One in 200 in state carry dreaded HIV/AIDS virus (3)**

IMPHAL, Nov 6: At least three out of 200 people in Manipur have been infected with HIV/AIDS. This was highlighted by Dr Pramodkumar Singh, project director MACS while speaking at the inaugural session of the three days training on the life skill education organised by Nehru Yuva Kendra Sangathan, Imphal at the State Youth Centre, Khuman Lampak today. The training programme is being organised by the MACS and about 150 volunteers are participating in the training in five batches under the supervision of

NYK. Speaking at the inaugural session J Ruivah, zonal director NYKS expressed the view that infection of HIV/AIDS is due to ignorance. It is not curable but preventable, she said adding that NYK volunteers have a big role to play in educating the common people in their respective district. (Kangla Online 6/11/09)

### **'Most HIV positive cases in 15-29 age group' (3)**

KADAPA: Regional Joint Director of Medical and Health Mohan Rao on Friday called for measures to create awareness among the youth in order to check HIV/AIDS. Addressing master trainers on AIDS prevention at a programme organised by the District AIDS Control Council and forming of Red Ribbon Clubs at the Collectorate Sabha Bhavan, he said 31 per cent of AIDS victims were between 15 and 29 years of age and constituted 25 per cent of population. He wanted Red Ribbon Clubs formed in colleges by involving students. Tuberculosis patients should be wary and undergo treatment at RIMS Hospital as they were more prone to get AIDS, Dr. Mohan Rao said. District Medical and Health officer T. Venkataramana Reddy said youth addicted to vices were afflicted by HIV/AIDS and master trainers should explain the precautionary aspects. Health Education Officer Gunasekhar wanted college students enlightened on the precautions. The State had about five lakh AIDS patients while Kadapa district has nearly 20,000 HIV/AIDS patients. Forty one AIDS testing centres were functioning in Kadapa district, Dr. Gunasekhar said. AIDS would spread by unbridled sex and reuse of used syringes and transfusion of infected blood, he said. Deputy medical and health officer Easwaraiah, district programme manager Naresh, and other officials and lecturers participated. (The Hindu 7/11/09)

### **NGO for HIV positives to contest job termination (3)**

CHANDIGARH: Reacting to the move of terminating the services of HIV positive people employed as outreach workers with 72 counselling centres of State AIDS Control Society (SACS) across the country, the Network of Positive People (NPP) is in the process of filing a PIL to contest the same. Voicing resentment against National AIDS Control Organisation (NACO), Pooja Thakur, president, NPP-Chandigarh, said, 'The organization cannot all of a sudden outsource placement to any agency without waiting for completion of the contract period of a year.' The city has seven such employees who were taken up as counsellors by NACO six months ago. According to legal experts, any breach of contract can be contested for compensation. As Amar Vivek, advocate, Punjab and Haryana High Court noted, 'These people can legally fight the case... and none can expel them before the contract is over.' While NPP and affected employees will also be writing to NACO, Thakur said, 'We are not interested in who takes over the agency for recruiting outreach workers. Anyone can hire but they should comply with the terms and conditions of the contract.' Though Vanita Gupta, director, SACS, Chandigarh, said they would make all efforts to retain efficient workers, HIV positive Anshu (name changed) said, 'I am apprehensive about any government control remaining after a private agency gets the project.' (Times of India 9/11/09)

### **Court rejects HIV+ man's bail plea for second time (3)**

PANAJI: The children's court has for the second time rejected the bail application filed by an HIV positive accused arrested for having intercourse with a minor boy and allegedly transmitting the disease to him. In his application before the court, the accused claimed that the investigation in the case has been completed and a chargesheet has been filed against him. He pointed out that he requires a special diet and timely medical treatment as he is suffering from AIDS. He further said that he is unable to get the required treatment as he is in custody for the last 11 months. The prosecution opposed the application on grounds that the 13-year-old victim and his family were in trauma since the victim tested positive for HIV. The accused had committed a heinous offence and was not entitled for bail, the prosecution contended. Rejecting the bail application, the president of the children's court, B P Deshpande, observed: "No material has been brought on record that the condition or health of the accused is deteriorating in custody and that he is not getting timely treatment and medicines." As the trial has begun, the court noted that the victim's cross examination is presently on. If at this stage the accused is released, there is every possibility that he will threaten the victim boy, the court said. "The nature of offence is very serious and heinous and punishment could go up to life imprisonment. The conditions are such that the accused is not at all entitled for bail," the judge observed. (Times of India 12/11/09)

### **Migrant labourers emerge as potent HIV/AIDS carriers (3)**

GUWAHATI, Nov 18 – If migrant labours have added to the population burden of the capital city, they have also been identified as the bridge segment who have sexual partners in the highest risk groups as well as other partners of lower risk forming a transmission bridge of HIV/AIDS. What is more, a high number of migrant labours concentrated in East Guwahati have been diagnosed with suffering from sexually transmitted infection. Under the targeted intervention project on migrant labour of Indian Council for Child Welfare (ICCW) covering the slum areas of Moila Tanki, Shiv Nagar, BG Godown, Kenduguri, Mothghoria, Narengi, Bhaskar Nagar and Carbon Gate, many concerning facts have emerged which has necessitated more study on the living conditions of the migrant labours to prevent transmission of diseases. “Since we intervened in the areas, we have noticed some marked improvement in the awareness level of these migrant labours who previously had no idea about HIV/AIDS and sexually transmitted infection,” said Apurba Bezboruah, the project co-ordinator. It needs to be mentioned here that most of the migrant labours hail from the char areas of Dhubri, Goalpara, Barpeta and Nalbari. Some migrant labours belonging to the Bihari and Nepali community are also scattered in certain slum areas covered by the project. Majority of these migrant labours work in factories, some are engaged in the work of loading and unloading and some earn their livelihood as rickshaw puller and as vendors. “Most of the male migrant labours suffer from different sexually transmitted infection,” said Bezboruah. In the year 2007 to 2008, 326 migrant labours were identified with suffering from sexually transmitted disease and in the period between April 2008 to March 31 2009, a total of 1675 migrant labours were diagnosed with this infection. The project has also found that many migrant labours indulge in MSM (man having sex with man) activities which is another reason for the high prevalence of sexually transmitted infection amongst the migrant labours. “The living conditions of the migrant labours encourage MSM activities,” said Bezboruah adding that 8 to 10 male migrant labour stay in a small room and that encourages this activity. Peer pressure and their long stay away from their spouses are some of the other reasons for sexually transmitted infection. Bezboruah said that the presence of female sex workers is more prominent in the slum areas during the festive occasions. (Assam Tribune 18/11/09)

### **HIV: non-brothel sex workers a greater challenge (3)**

A survey by the National AIDS Research Institute (NARI) in collaboration with Indian Council of Medical Research institutes in various states has shown a trend of HIV prevalence among sex workers who are not connected to brothels, thereby making it a challenge to provide interventions to them. NARI director Dr R S Paranjape said while the prevalence of HIV among brothel-based sex workers was 28 per cent in Mumbai and 37 per cent in Pune, the HIV prevalence among sex-workers not living in brothels was around 19 per cent in Mumbai and 37-38 per cent in Pune. The sample size that was surveyed in the high prevalence districts of Maharashtra, including Pune, Mumbai, Yavatmal, Kolhapur and Thane, was around 400 commercial sex workers. While indications of a downward trend of HIV prevalence are there in the sentinel surveillance programmes undertaken every year, Paranjape said this is because there has been a change in the pattern of commercial sex work. So far it was brothel-based and limited to a certain area but now with presence of street-based sex workers and other groups, it is a challenge to provide interventional programmes. The survey has been funded by Bill and Melinda Gates Foundation via Avahan and Family Health International (FHI) and is being conducted in six high prevalence states of Maharashtra, Tamil Nadu, Andhra Pradesh, Karnataka, Mizoram and Manipur. The Gates foundation has given \$2.5 million for the Integrated Behavioural and Biological Assessment Survey. (Indian Express 24/11/09)

### **HIV+ begin to be accepted by society (3)**

VARANASI: Anil Singh (name changed) is a native of Varanasi district and has been HIV positive for the past three years. He has married HIV positive woman from Maharajganj. She had also faced family and social boycott after she was identified with the deadly virus, almost at the same time as Singh. Now, they are not only happily married but are also leading a normal life. In addition, they have devoted themselves to the cause of others with HIV/AIDS in the region. They have also arranged successful court marriages of over six HIV positive couples, enough to suggest positive development for people who usually prefer to wait in isolation for a slow death. Is the region witnessing change in the mindset of people towards those infected with HIV virus? While the positive developments suggest a shift in the mindset that is often associated with social stigma and discrimination at various stages of HIV positive cases, it is also proving to be a refreshing change for social and voluntary organisations (NGOs) working for HIV positive cases in the region. "There is still miles to go before the change is noticed clearly in the society. But, a beginning

has been already made," said Gopal Gaur, vice-president of Banaras Network for Positive People with HIV/AIDS Society, an NGO working for HIV positive people in the region. "Not only has the rate of social boycott and ill treatment meted to such patients gone down, a number of family members have also started accepting the victims," he added while talking to TOI on the eve of World AIDS Day on Monday. It may be mentioned here that World AIDS Day is celebrated every year on December 1 to raise awareness on precautionary and safety measures to control the spread of HIV positive cases. As per recent reports of World Health Organisation (WHO), there are over 50 million people that are living with HIV/AIDS in the world. However, as per reports of the NGO, there are around 800 people with HIV/AIDS in the district who are getting health care and support services through Anti-Retroviral Treatment (ART) centres. According to Sunil Seth, secretary of the centre, out of these victims, nearly 50 per cent are widows and around 30 children, including girls, have also tested positive for HIV. But, marking a significant change in the mindset, not only have the young children started studying in primary schools, a number of widows have also found their rightful place in the family, though it required intensified and integrated efforts from the activists. "Nearly 50 per cent of the affected children have started to go to schools and remaining children will soon join them and start leading a normal life," said Savita Singh, a social worker. "People are also coming forward to perform the last rites of such persons which again showcases a significant change in their mentality," she concluded. (Times of India 1/12/09)

### **Rise in Golaghat district HIV-AIDS cases alarming (3)**

GOLAGHAT, Nov 30 – The alarming rise in number of dreaded HIV-AIDS infection cases has caused serious concern among citizens and social activists in and around Golaghat district forcing them to look for ways to combat this incurable infection, which has emerged as a challenge and stigma for entire humanity. It has been reported by the Integrated Counselling and Testing Centre (ICTC) of Swahid Kushal Konwar Civil Hospital that altogether 61 AIDS cases and 138 HIV positive cases have been detected till November 20, 2009. The hospital ICTC disclosed that the blood samples of 8160 suspected persons were tested at the Integrated counselling and Testing Centre installed at the KK Civil Hospital recently during six months, out of which they found 6,568 were Male and 1,592 Female. The total HIV positive cases were 138 and out of that 92 were Male and 46 Female, including 11 children. AIDS cases were 61 and among them number of Male cases were 46 and 15 Female including two children among them. The death cases found till November 20, 2009 were 22. Out of which males accounted for 14 and Females 8 and them two were children. HIV-AIDS patients are treated here free of cost, the blood department in-charge Dr MC Gogoi informed correspondent of The Assam Tribune. The ICTC counsellors usually motivate and encourage the suspected - patients after recording their past history and studying the nature and ailments. Suspected patients can undergo HIV-AIDS infection tests such as AIDS, signal, parikshak and HIV tests without any cost. As per statistics, the transmission and spreading rate of HIV infection case is 1:100 in normal position and it may even rise up to a thousand depending upon the nature of infection like development of 'window period' negative capability and early detection. The report says that HIV-infected patients suffer from cryptococcal meningitis anemia and sexual organ ulcer for a prolonged period. The primary nature of the disease - is difficult and negligible in terms of its detection. The blood samples tests like CDU and CD-8/T-Lymphocytes are conducted to confirm HIV-AIDS in a clean environment. The past history of HIV-AIDS infected patients say that the infected patients develop 100-grade intermittent fever associated with cough. Sometimes patients may complain of intermittent holocranial headache and weight loss consolidation with plural effusion having pneumothorax with severe pain. Dr. MC Gogoi, in-charge of the blood department KK Civil Hospital, Golaghat told newsmen that the HIV positive patients have acquired the dreaded disease through prostitution. The major ways of spread of HIV-AIDS are through blood transmission, casual sex and pregnant women. Modern medical Science has not yet been successful inventing any positive medicine to cure this disease. Control and prevention is considered to be part of remedial measures against HIV-AIDS. Medical experts believe that adequate awareness campaign and blood testing for HIV-AIDS, STD sex education, communicable diseases and health hazards need to be conducted to get control over this dreaded disease and promote life-long responsibility. A comprehensive approach towards sex education includes imparting this education among the upcoming generations.(Assam Tribune 1/12/09)

### **In city, 300 test HIV+ in 2009 (3)**

Ahmedabad: Between January and October 2009, 24,000 people from various talukas of Ahmedabad district, including Barwala, Bawla, Dhandhuka, Dholka, Jetalpur, Sanand, Sarkhej, Singarva, Sola, Vagad

and Viramgam, underwent testing for HIV, of which a total of around 300 tested positive. Of the total number of people tested, 12,591 were pregnant women, among who 30 tested positive. Research has shown that early diagnosis and treatment of HIV extends one's lifespan and also decreases the spread of the infection to other people. Also, research indicates that programmes that screen only high-risk patients fail to identify a substantial number of people in the early stages of HIV infection. Studies on the screening of pregnant women suggest that its acceptance is high and that those suspected to be carrying the virus are the ones to be tested on an urgent basis. An earlier start to antiretroviral treatment boosts the immune system and reduces the risks of HIV-related death and disease. "The challenge lies in encouraging more people to receive voluntary HIV testing and counselling before they have symptoms. Currently, many HIV-positive people wait too long to seek treatment. However, the benefits of earlier treatment may encourage a greater number of people to undergo HIV testing and counselling and learn their HIV status," said Dr Vijay Pandya, an official of the District Aids Prevention and Control Unit of Ahmedabad. The signs and symptoms of HIV infection depend on the stage of the infection. According to Dr Vishwam Parikh, there may be no signs or symptoms at all at the early stages, though it is more common to develop flu-like illnesses two to four weeks after being infected. However, in the later stages of HIV infection, the patient may remain symptom-free for eight to nine years or more. But, as the virus continues to multiply and destroy immune cells, the patient may develop mild infections or chronic symptoms such as swollen lymph nodes -- often one of the first signs of HIV infection, diarrhoea, weight loss, fever, cough and shortness of breath. (DNA 1/12/09)

### **595 people were recorded HIV positive every month in 2009 (3)**

As the world observed 'AIDS Day' on Tuesday, these figures may not sound music to the ears of health planners in Bihar: An average 595 people were recorded HIV positive every month in 2009 as against zero cases reported in the State before 2001. With 6,550 fresh cases detected in the current year in Bihar, the total number of people with HIV stands at 24,835. However, these figures, mainly drawn from the Integrated Counselling and Testing Centres (ICTC), are far below than that of the estimated cases, which are around 82,000. These figures may be rising every day despite pumping of crores of rupees in the name of HIV prevention and treatment programme. On an average, the National AIDS Control Organisation (NACO) spends about Rs 22 crore each month in Bihar to contain its spread. The most frightening aspect of the story is, that many of those who have tested positive lately, had no outside contacts. They were neither migrant labourers, nor had they ever stayed outside Bihar. None of them is a trucker, nor had they any blood transfusion in the recent past. The conclusion is that, these are largely cases developed during family links and in association with HIV positive male migrants, who come in periodically and seek cohabitation with spouses." The development is certainly alarming and needs to be examined closely," feel experts on HIV. The health planners, however, do not seem to be worried with the figures. "We are far better than many of the HIV case affected states in the country," said additional project director of the Bihar State AIDS Control Society (BSACS) Sibi P. Alex. "The figures of HIV/AIDS are not unusual," said project director of the society Ravi Parmar adding, "Because of the tightened surveillance, more and more cases are coming to light." Experts wonder, how with such a truncated infrastructure, the BSACS could take on HIV, which is fast spreading in the districts with heavier migrant flow. Of its 207 integrated counselling and testing centres (ICTC), hardly 40 per cent are working. Some are already non-functional, while some continue to manage somehow to function with depleted staff and inadequate instruments. "We are gearing up to face the situation," Parmar told a crowded Press conference on the eve of the "World AIDS Day". Only time will be a testimony to his assertion. (Hindustan Times 2/12/09)

### **UN rejects punishment for homosexuality in 80 countries (3)**

Some 80 countries still penalise homosexuals, including passing criminal laws that fuel discrimination against them, the joint UN programme on HIV and AIDS (UNAIDS) said. On World AIDS Day, UNAIDS said that such laws have prevented effective national responses to help those living with HIV and are a violation of their human rights. World AIDS Day is held annually Dec 1. It cited Tuesday the decision by the Delhi High Court in India for striking down an anti-sodomy law penalising men who have sex with men, as an example of government intervention to build support for human rights and allow healthcare treatment to HIV patients. 'UNAIDS calls for all governments to protect their citizens from discrimination, denial of healthcare, harassment, or violence based on health status or sexual orientation and gender identity,' the group said. Michel Sidibe, UNAIDS executive director, said the gay community has been in

the forefront of the global fight against AIDS and attacks against the gay community would affect access to healthcare by those infected. 'as a social movement, the gay community changed AIDS from simply another disease to an issue of justice, dignity, security and human rights,' Sidibe said. UN Secretary General Ban Ki-moon said progress has been made to reverse the AIDS epidemic in some countries, but respect for human rights could lead to greater advances. He called on governments to remove punitive laws, policies and practices that get in the way of the AIDS response. 'On this World AIDS Day, let us uphold the human rights of all people living with HIV, people at risk of infection, and children and families affected by the epidemic,' he said. The UN has called for halting and reversing the AIDS epidemic by 2015. According to the latest estimate from UNAIDS, there are currently 33 million people living with HIV, with 2.7 million new infections in 2008 and two million deaths. (Sify News 2/12/09)

### **Why toss and delay AIDS Bill, wonder NGOs (3)**

NEW DELHI: Several organisations working on issues surrounding HIV/AIDS have demanded immediate tabling of the HIV/AIDS Bill, 2009. The Bill was drafted and finalised in 2006 by the Union Health and Family Welfare Ministry after country-wide consultations with stakeholders and sent to the Law Ministry. From 2007 to October 2009, the Law Ministry released four drafts, each omitting several critical provisions aimed at promoting and protecting the rights of people living with and affected by HIV/AIDS.

The journey of the HIV/AIDS Bill has been extremely long, characterised by disappointing drafts, and public protests against various versions of the Bill that diluted its objectives and spirit, Daisy David of the Indian Network for People Living with HIV/AIDS (INP+), said at a press conference here. It was disheartening to see the Bill shuttling between the two ministries for the past three years. "We need this Bill to fight discrimination against people living with and affected by HIV/AIDS," she said. It contains special provisions to address the vulnerabilities of women and children to HIV, according to Manjula K. of Action Aid. "The Bill entitles a survivor of sexual assault, even if it occurs within marriage, to access HIV-related counselling and preventive treatment." Pradeep Dutta of the Nai Umang Network of Positive People said passing the law would make it easier for HIV positive people to access treatment. The Bill also provides legal immunity to the provider and the receiver of services under targeted intervention programmes like condom promotion among sex workers and distribution of clean needles to drug users. Sudha Jha from Solidarity and Action Against The HIV Infection in India (SAATHII), Kolkata, said the targeted intervention programmes proved successful in controlling the spread of the epidemic. (The Hindu 2/12/09)

### **Steep rise in HIV cases in Garo Hills (3)**

TURA, Dec 1 – For the first time ever, the three districts of Garo Hills have come under the scanner of the AIDS Control Society following rising number of young adults falling prey to the disease. From a single HIV case detected way back in 2004, the number now stands at 22 with 2009 recording the highest number of cases of 11 infected persons. To make matters worse, all the 22 cases were detected only after they landed up in hospitals with extremely low immunity unable to overcome basic illnesses such as fever, diarrhoea, cough and skin diseases. "This is only the tip of the ice-berg. The number is very high but due to lack of awareness and fear of being branded an outcast the infected persons are not coming forward," informed a doctor from the Tura Civil Hospital which houses a counselling centre and provides the much-needed Anti-Retroviral Treatment to contain the HIV virus from turning into full-blown AIDS. The observance of the World AIDS Day on Tuesday culminated with discussions on providing more awareness on the disease in the rural areas of the region. Doctors have a reason to be alarmed given that one of the infected patients has already died from the disease and another is a woman clinging on to life. Ironically, Garo Hills does not have a history of drug addiction by the youth particularly since Meghalaya is a wet State that has seen the mushrooming of hundreds of wine shops. The finger of suspicion has been directed at two places – the international border and the rich coal belt of South Garo Hills which has a floating population of several thousand migrant workers. Prostitution is rampant in the Nangalbibra coal belt region and the mode of infection is primarily through unprotected sex. The vast number of truckers who come and return with coal to mainland India are suspected to have aided in the spread of the disease. The lure of easy money has brought many young girls into the prostitution racket in the coal region. Lack of basic information has helped in the spread of the disease. The international border which is manned by the BSF is also another place where doctors fear the HIV infection could spread. "We have come across HIV infections from BSF and CRPF personnel posted in the Garo Hills," said a doctor dealing with AIDS in the Civil Hospital in Tura. There is apprehension that the infection

could spread through sexual contact with an unsuspecting local girl in the border region. Since there is no mechanism in place for regular HIV checks and awareness programmes on the dangers of the disease for paramilitary force personnel deployed in the region the situation is not likely to be contained in the near future. To make matters worse, one of the HIV infected persons has been diagnosed with the deadly combination of HIV and Tuberculosis (TB). The HIV-TB combination has taken the nature of an epidemic in vast regions of Africa and Europe and has been revealed to be the most difficult to contain. "Unless urgent steps are taken at all vulnerable places we could soon be dealing with an epidemic of the HIV-TB strain in Garo Hills," warned doctors. (Assam Tribune 2/12/09)

### **In six months, 755 tests positive for HIV in Pimpri-Chinchwad (3)**

PUNE: Nearly ten per cent of the people who underwent HIV test in Pimpri-Chinchwad in the first six months of this year have tested positive as per the records provided by the municipal corporation. R.R. Iyer, medical director, PCMC, told TOI on Tuesday that, 7,826 patients underwent the HIV test and 775 of them tested positive. Of these, 326 were women. In Pimpri-Chinchwad, the Maharashtra State AIDS Control Society (MSACS) and the NACO jointly operate Integrated Counselling and Testing Centres (ICTC) at the PCMC-run Yashwantrao Chavan Memorial Hospital (YCMH), Talera hospital, Bhosari hospital, Jijamata hospital and the DY Patil Medical College hospital. Last year (2008-09), while 78,304 people underwent the HIV test, 1,193 tested positive. These included 489 females. Incidentally, of the total 78,304 patients who underwent the test, as many as 12,997 were pregnant women. Of these, 105 tested positive. During the first six months of the present year (2009-10), a total of 6,632 pregnant women underwent HIV test in Pimpri-Chinchwad. Of these 39 have tested positive. As many as 44 patients died due to AIDS in Pimpri-Chinchwad township in the first six months of 2009-10 as per the records of PCMC-run municipal hospitals. The number deaths has fallen by three as compared to the same period previous year. Records provided by the municipal corporation show that between April and September this year, 332 people were detected HIV positive. The figure for the same period last year was 511. (Times of India 2/12/09)

### **HIV positive youth forced out of village (3)**

: A 27-year-old HIV positive youth in Uttar Pradesh was forced to leave his village by his neighbours, who feared they could get infected through mosquito bites. The youth, who is a resident of Sewain village in Gorakhpur district, some 300 km from Lucknow, has been living in seclusion on the outskirts of the village for the last four days. "Locals convened a panchayat and passed a resolution that my son would not be allowed to live in the village as the disease could spread through mosquito bites," the youth's 65-year-old mother told reporters Saturday in Gorakhpur. Though she refused to talk about how his son contracted the virus, she said: "He (son) had gone to Pune and Hyderabad in search of livelihood. After remaining there for six-seven months, he returned with a complaint that he frequently falls ill." "Thereafter, he used to take some medicines on his own by consulting the employees at medical shops. As there was no significant improvement in his health, I asked him to consult a registered medical practitioner. On my advice, he visited a prominent hospital in Gorakhnath town, where the doctor took his blood samples and later it was revealed my son was HIV positive." Though the mother tried her best to conceal the diagnosis, she believes some of her relatives spread the news in the village. "I was forced to furnish the medical reports of my son, following which the villagers knew that my son is HIV positive," said the mother, who now lives in an isolated hut with her son. Dharmendra Singh, a member of the village panchayat, was proud of having thrown the HIV positive youth out of the village. "In this way, we will be able to check the spread of virus through mosquito bites," Singh told reporters. When contacted, Gorakhpur Chief Medical Superintendent O. P. Patil told IANS: "The news is surprising and shocking. We will make every effort so that the youth is allowed to live in the village. Our team will visit the village at the earliest to dispel the myths about HIV/AIDS prevailing among the locals there." (India Info.com 5/12/09)

### **97,000 kids tested with AIDS from 2007-2009 (3)**

As many as 96,942 children tested positive for AIDS during the last three years in India, Minister of State for Health Dinesh Trivedi said Tuesday. The highest was in Andhra Pradesh with 22,559 children testing positive for the disease followed by 21,835 in Maharashtra and 15,082 in Tamil Nadu. Replying to a question in the Lok Sabha, Trivedi said: "The government has taken several steps to protect children from HIV infection. "Identification, counseling and prophylactic treatment to HIV positive pregnant women and

new born babies, diagnosis of HIV positive children and spreading public awareness." (Times of India 9/12/09)

### **HIV patent pool hobbles as drug firms want India, China excluded (3)**

Mumbai: Efforts to bring together nine global drugmakers to pool their HIV patents in order to make available treatment to millions living with HIV/AIDS in the developing world seem to have faltered over a crucial issue -- the inclusion of middle income countries such as India and China in the list of beneficiaries. As reported by DNA Money on October 3, international humanitarian aid organisation Medecins Sans Frontieres (MSF) had launched a campaign calling on drugmakers such as GlaxoSmithKline, Johnson & Johnson, Gilead Sciences, Pfizer, Merck, Abbott, Bristol-Myers Squibb, Sequoia Pharma, and Boehringer-Ingelheim to join the patent pool of UNITAID, an international drug purchasing agency. The idea was to create a mechanism whereby patents held by these companies could be pooled and made available to others for production, thus speeding up delivery of generic drugs for treatment of HIV/AIDS, as they could get produced well before the patent term expiry. About 18 medicines were to be pooled, including atazanavir, abacavir, darunavir, lopinavir and nevirapine. In turn, the patent holders were to receive royalty from those using their patents. The basic principle behind the pool was to include all developing countries, without discrimination. But now, according to people in the know, several drugmakers are opposing the inclusion of middle income countries such as India, China, Thailand, Philippines, Brazil, Chile, Argentina, Peru and South Africa, and want access to the pool limited only to the least developed countries. According to a patent and healthcare expert tracking the pool, the UNITAID executive board, which is to meet next week, is planning to introduce an opt-out clause, which would give drugmakers the option of excluding middle income countries from the pool. If these clauses and demands are accepted, then patients in middle income countries will not be able to access cheap generic versions of patented HIV drugs," says the patent and healthcare expert. Says Leena Menghaney, project manager-India, MSF's campaign for access to essential medicines, "If middle income countries are excluded, then the basic principle of the pool would stand defeated." "Middle income countries are where access to and scaling up of AIDS treatment has suffered as domestic generic production or importation of generics is seriously affected by the product patent regime," says Menghaney. Middle income countries introduced the product patent regime by 2005, while the deadline for the LDCs to introduce the regime is 2016. Thailand is one of the first middle income countries to have protested the exclusion, with Thai civil society groups sending a letter to the UNITAID executive board saying that bowing to the demands of the MNCs to decide which countries will benefit from the pool would amount to UNITAID turning its back on millions of people who are in desperate need of the medicines. According to a report by the World Health Organisation, UNAIDS, and Unicef, over 4 million people in low and middle income countries were receiving antiretroviral therapy at the close of 2008. However, at least 5 million more still do not have access to treatment. (DNA 9/12/09)

### **'Ukhrul, HIV/AIDS capital of Manipur' (3)**

Ukhrul, December 10 2009: President of the Tangkhul Mayar Ngala Long (Tangkhul Youth Council), Janyo Varam has expressed concern over the increasing HIV/AIDS pandemic in Ukhrul district terming the district as HIV/AIDS capital of Manipur state. Speaking at the silver jubilee inauguration function of four-day long celebration of 25 year existence of the TMNL, a common platform for the youths of Tangkhul community in Ukhrul district at the district headquarter, "Ukhrul district of Manipur has been declared as HIV/AIDS capital of Manipur with 10 out of 100 people suffering from HIV/AIDS making it the most dangerous place in this part of the world". Before the inception of Tangkhul Mayar Ngala Long, Ukhrul District was unfortunately a wet district with liquor openly available in the market accessible even to the underage and underserved section of the society. TMNL realizing its evil impact and consequences in society, the body started its drive against it and done away with it in no time, he observed. The role and responsibilities, the activities the youths of today are facing is not a simple challenge which we need to double-check continuously and constantly. The question of HIV/AIDS pandemic, drug abuse, drug peddling, flesh trade, child trafficking, unemployment, terrorism, corruption, nepotism ...the list is endless. TMNL with support and sponsorship from Bill and Melinda Gate Foundation is fortunate in implement Targeted Intervention in the District under the Project Orchid/AVAHAN. Yet, without the concerted attitude and endeavour from the Governmental side and the general populace the issue will remain a pandemic for us until unmanageable damage is done to our society. Yet, it is with a system and one at a time that we have to tackle the situation before it spurns out of total control, he said. The wisdom of the founders of

the TMNL was further elevated to the higher perspective when they registered a part of the TMNL as Project Cell with autonomy given to them for smooth implementation of various projects that deals with various challenges facing the youth of that time and continuing till today in the field of HIV/AIDS, drug addicts, drug peddlers, immorality, flesh trade, etc. TMNL has adopted various actions and systems to deal with such neglected sections of our society from thrashing, lock-up, exposing in the sun-cold and heat, giving community service like cleaning toilets, canal etc. with negative and positive results, tempered with hot and cold criticism from sections of the society, he observed The celebration kicked off from yesterday and will continue till tomorrow (December 11) at Tangkhul Naga Long ground, Ukhrul. Agatha Sangma, Union Minister of State, Rural Development was about to attend the inauguration function but due to un-avoidable schedule she could not attend the Jubilee for which the chief guest. Ningwon Vashum, Founder of TMNL graced the function as chief guest which was participated by various social organisation leaders and district officers. Sudhan R, IAS SDO Ukhrul and DC in-charge released a book "History of TMNL" on the occasion. (E-PAO 10/12/09)

### **HIV patient jumps to death from hospital (3)**

KOLKATA: Social ostracization and abandonment by her husband drove Lakshmi Samanta (25) to jump to death from the terrace of School of Tropical Medicine (STM) around noon on Saturday. Lakshmi's brother Sukhdeb and sister-in-law Rinku got her admitted to STM on Friday afternoon. Doctors examined her on Saturday morning and found her very depressed. Hours later, she managed to sneak out of the ward she was admitted and climbed to the building's terrace from where she jumped three floors. Doctors and nurses initially didn't notice that the patient wasn't on her bed in the ward. Later, when the thud from Lakshmi's fall alerted people in the hospital, they were surprised to learn that she managed to walk out unnoticed. A resident of Tarakeswar, Hooghly, Lakshmi married Rajendra a couple of years ago. Months after her marriage, she went to Rajendra's ancestral home in Bihar where she fell ill. She was examined on her return from Bihar and found to be HIV-positive. On hearing that his wife had contracted the HIV virus, Rajendra abandoned her, who was forced to return to Tarakeswar, where she took shelter in Sukhdeb's shanty in the Manikpalli locality. The meagre pay Lakshmi earned as a domestic help could hardly suffice for her treatment. Sukhdeb and Rinku had been taking her to STM for treatment for the past 18 months. "She was admitted here earlier as well. We discharged her then as her condition improved. This time, she came to us with meningitis, backache and fungal infection," said STM superintendent Tamal Kanti Ghosh. "Like several other HIV-positive married women, she was abandoned by her husband and society at large. Though her brother and sister-in-law were very supportive, they were too poor to finance her treatment. She was depressed to find herself socially and financially helpless to fight on," said an STM doctor. Police, too, confirmed that depression drove Lakshmi to suicide. A shocked Rinku set out for the hospital immediately after hearing that Lakshmi had taken her life. (Times of India 20/12/09)

### **Bill to bar HIV bias at workplace (3)**

New Delhi, Dec. 23: HIV/AIDS screenings on job applicants and existing employees may be banned under a proposed policy that says the infection should in no way affect employment. The National Policy on HIV/AIDS and Work Place, crafted by the Union labour ministry with the International Labour Organisation's assistance, will form part of the HIV bill being drawn up by the health ministry. The bill seeks to make employers liable for discrimination against staff with such diseases. The labour ministry wants its proposals to cover all employers and workers, including applicants, across public and private sectors and the self-employed. All types of workplaces, contracts and all aspects of work, formal or informal, could be covered. "There is no justification for asking job applicants or workers to disclose HIV-related personal information. Nor should workers be obliged to reveal personal information about fellow workers. Personal data covered by medical confidentiality should be stored only by personnel (who are) bound by rules on medical secrecy and should be maintained apart from other personal data," the policy says. A labour ministry official said the guidelines were intended to manage the impact of the epidemic in the sphere of work. "The threat of HIV to the Indian working population is evident from the fact that nearly 90 per cent of the reported infections are from the most productive age group of 15 to 49," the official added. According to the National AIDS Control Organisation (Naco), an estimated 2.31 million people in India were living with HIV/AIDS in 2007. Of this, 88.7 per cent were between 15 and 49 years, 7.5 per cent were aged 50 and above and 3.5 per cent were below 15. Around 0.34 per cent of the population has HIV/AIDS, Naco says, adding women account for 39 per cent of the cases. "Stigma and

discrimination at workplace gets reflected in loss of employment and livelihood opportunities in addition to ostracism and seclusion faced by workers from known or presumed HIV status. It should never happen," says the policy, now being circulated among ministries. HIV infection can't be a cause for termination of employment and those with HIV-related illnesses should be able to work for as long as they are medically fit in appropriate conditions, it says, adding that the treatment cost should form part of medical/welfare packages. The policy seeks to address another problem area: exclusion of people with HIV from insurance schemes offered by public and private companies. The Insurance Regulatory and Development Authority (IRDA) should develop all-inclusive health insurance plans for such people, it says. All workplaces — organisation, institution, businesses, company and others — should have an HIV/AIDS committee to coordinate and implement internal programmes for the infected. Multinationals can set up such HIV/AIDS panels too. The labour ministry official said corporate houses were consulted and claimed several companies, including PepsiCo, Hindustan Unilever, Apollo Tyres and Crompton Greaves, had agreed with the guidelines in principle. To monitor the policy's implementation, the government plans to set up a steering committee on HIV/AIDS. It will comprise employers and worker organisations. The HIV bill, of which the policy will form a large part, will aim to make employers liable for any discrimination against staff with HIV/AIDS and make them responsible for guaranteeing such employees a safe working environment. (The Telegraph 23/12/09)

### **3 HIV cases in Goa every day (3)**

Panaji: Goa records an average of three cases of HIV every day, a senior official said on Tuesday. "Goa records one thousand new cases (of HIV) every year, which means an average of three cases a day, which is alarming," Pradeep Padwal, Director of Goa State Aids Control Society (GSACS), said at a function organised by an NGO. Officially, the State has 16,000 HIV+ citizens. "The environment in Goa is such that youths are falling to the lust of sex," he said adding that about 98 per cent of HIV infections in Goa are attributed to unsafe and unprotected sexual behaviour. (Mumbai Mirror 31/12/09)