NATIONAL AIDS CONTROL PROGRAMME

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NACP

The National AIDS Control Organization (NACO), Ministry of Health and Family Welfare has launched the National AIDS Control Programme (NACP) in 1992, is being implemented as a comprehensive programme for prevention and control of HIV/AIDS in India.

The National AIDS Control Programme (NACP), launched in 1992, is being implemented as a comprehensive programme for prevention and control of HIV/ AIDS in India. Over time, the focus has shifted from raising awareness to behaviour change, from a national response to a more decentralized response and to increasing involvement of NGOs and networks of People living with HIV (PLHIV). National AIDS Control Organization (NACO) is the nodal organization

State/ UT AIDS Control Societies (SACS) in States/Union Territories (UTs) and

District AIDS prevention and control unit (DAPCU) in 188 high priority districts.

Currently, National AIDS Control programme (NACP)-IV (extension) is under implementation for the period 2017-20.

(19 NACP I (1994–1999) Lin Initial interventions

NACP II (1999–2006) Decentralisation to states Limited coverage of services

NACP III (2007–2012) Massive scale -up with quality assurance mechanisms >50% reduction in new infections achieved NACP IV (2012–2017) Consolidate gains Focus on emerging vulnerabilities Balance with growing treatment needs, quality

assurance

- The NACP I started in 1992 was implemented with an objective of slowing down the spread of HIV infections so as to reduce morbidity, mortality and impact of AIDS in the country.
- NACP I was launched with an IDA Credit of USD84 million and demonstrated its commitment to combat the disease. National AIDS Control Board (NACB) was constituted and an autonomous National AIDS Control Organization (NACO) was set up to implement the project. The first phase focused on awareness generation, setting up surveillance system for monitoring HIV epidemic, measures to ensure access to safe blood and preventive services for high risk group populations.

- NACP II was launched in November 1999 with World Bank credit support of USD 191 million to reduce the spread of HIV infection in India, and to increase India's capacity to respond to HIV/AIDS on a long-term basis.
- Key policy initiatives taken during NACP II included: adoption of National AIDS Prevention and Control Policy (2002); Scale up of Targeted Interventions for High risk groups in high prevalence states; Adoption of National Blood Policy; a strategy for Greater Involvement of People with HIV/AIDS (GIPA); launch of National Adolescent Education Programme (NAEP); introduction of counseling, testing and PPTCT programmes; Launch of National Anti-Retroviral Treatment (ART) programme; formation of anointer-ministerial group for mainstreaming; and setting up of the National Council on AIDS, chaired by the Prime Minister; and setting up of State AIDS Control Societies in all states.

• NACP III was launched in July 2007 with the goal of Halting and Reversing the Epidemic over its five-year period by scaling up prevention efforts among High Risk Groups (HRG) and General Population and integrating them with Care, Support & Treatment services. Thus, Prevention and Care, Support & Treatment (CST) form the two key pillars of all the AIDS control efforts in India. Strategic Information Management and Institutional Strengthening activities provide the required technical, managerial and administrative support for implementing the core activities under NACP-III at national, state and district levels.

- NACP IV, launched in 2012, aims to accelerate the process of reversal and further strengthen the epidemic response in India through a cautious and well defined integration process over the next five years.
- The capacities of State AIDS Control Societies (SACS) and District AIDS Prevention and Control Units (DAPCUs) have been strengthened. Technical Support Units (TSUs) were established at National and State level to assist in the Programme monitoring and technical areas. A dedicated North-East regional Office has been established for focused attention to the North Eastern states. State Training Resource Centres (STRC) was set up to help the state level implementation units and functionaries. Strategic Information Management System (SIMS) has been established and nation-wide rollout is under way with about 15,000 reporting units across the country. The next phase of NACP will build on these achievements and it will be ensured that these gains are consolidated and sustained.

- Objectives of NACP IV:
 - 1. To reduce spread of HIV infection in India
 - 2. Strengthen India's capacity to respond to HIV/AIDS on a long term basis.

Components of NACP IV

- Prevention
- Testing
- Treatment
- Laboratory Services
- Mainstreaming & Partnership and Social Protection Strategic Information (SI)

• The HIV and AIDS (Prevention & Control) Act, 2017

- The act is a central legislation protecting and promoting the rights of persons infected with and affected by HIV and AIDS. The Act came into force on September 10, 2018 with the objective to prevent and control the spread of HIV and AIDS and for reinforcing the legal and human rights of persons infected with and affected by HIV and AIDS. It also seeks to protect the rights of healthcare providers.
- The Act addresses stigma & discrimination and strives to create an enabling environment for enhancing access to services. It provides for diagnostic facilities related to ART and opportunistic infection management to people living with HIV and AIDS. The Act also provides for a robust grievance redressal mechanism in the form of Ombudsman at the State level and Complaints Officer at the establishment level aiming to provide speedy redressal.

OUTCOME OF NACP

- Created national AIDS response structures at both the national and state levels and provided critical financing.
- Established a strong partnership with the World Health Organization (WHO) and later helped mobilize additional donor resources.
- Established NACO and the State AIDS Control Cells, which considerably strengthened India's management capacity to respond to the epidemic.
- Improved blood safety.
- Improved public awareness of HIV, especially in urban areas.
- Expanded sentinel surveillance and improved coverage and reliability of data.
- Expanded STI control and services.
- Improved condom promotion activities.
- Created and disseminated a national HIV testing policy.
- At the operational level, NGOs implemented 1,033 targeted interventions and set up 875 voluntary counseling and testing (VCT) centers and 679 STI clinics at the district level.
- Nation-wide and state level Behavior Sentinel Surveillance (BSS) surveys were conducted.
- Prevention of parent-to-child transmission (PPTCT) programme was expanded.
- A computerized management information system (CMIS) and a computerised project financial management system (CPFMS) were created.
- HIV prevention and care and support organisations and networks were strengthened.
- Support from bilateral, multilateral, and other partner agencies also increased substantially.



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