

# COMBATING HIV IN INDIA AND MEASURES TO REDUCE THE BURDEN

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**Category:** [Opinion](#)

It all began in the early 1980s when Human Immunodeficiency Virus (HIV) first emerged and India detected its first case of HIV Acquired Immunodeficiency Syndrome (AIDS) in 1986. Soon after that in 1990s, it became a pandemic and a matter of global concern. In response to AIDS, India constituted National AIDS Control Organization (NACO) to launch National AIDS Control Programme (NACP) in 1992. After seeing a peak in late 1990s, HIV AIDS has consistently seen a decline in cases since then. The HIV/AIDS Act introduced by India in 2017 further reinforced AIDS control. From an untreatable disease then to a controllable disease now, there has been a great progress in management with AIDS.

AIDS is a chronic life-threatening disease caused by HIV attacking the human immune system and lowering the body's capability to fight against infections. It is transmitted through sexual contact, blood transfusion, by sharing infected needles or from infected mother to the new born. Though it has no cure, but it can be treated with anti-retroviral therapy (ART) to reduce the viral load and increase the life expectancy of a HIV patient to almost double of that without treatment. The population that are vulnerable and at a higher risk of AIDS are women sex workers, men having sex with men, injecting drug users, transgenders, migrants, truckers, prisoners and pregnant women. The migrant workers and truckers play a crucial role by acting as bridge population between the

high-risk and the general population.

India has seen a tremendous decline with 86% decline in HIV incidence since its peak in 1997 and 78% decline in HIV deaths since the peak mortality in 2005 which are better numbers when compared to global data. In spite of this achievement, India is far from its 2020 target that it has envisaged. UNAIDS reported that in 2018, 81% know their HIV status, out of which 67% are under ART and out of which 59% are virally suppressed while the target was to reach 90-90-90 by 2020. According to the India HIV Estimate 2019, there were 23.49 lakh people living with HIV with an adult prevalence of 0.22%. Out of the total people living with HIV, 3.4% comprises of children and 44% comprises of women. This achievement in reducing the burden can be attributed to the successful targeted interventions that included safe sex practice, use of clean, disposable needles, early screening for care, support and treatment programme along with effective programmes for behaviour change and addressing the stigmas and discriminations and improved surveillance.

The adult prevalence of HIV has been declining in some states, while it is on the rising trend in others, probably because of the increase in survival rate due to successful AIDS control programmes. The success of prevention programmes is indicated by the reduction in annual new infections in many states. The matter of concern is the status of HIV in the north-eastern states, where most states are witnessing a stable or rise in the burden. There is an urgent need to focus on these states and strengthen the AIDS control programme to see improvement in the national average. The issue of stigmas and discriminations, especially in the marginalized and vulnerable population still persists which should be addressed. The emerging challenge in battling HIV is the co-morbidity of HIV and TB.

Looking forward to overcome the hurdles, India has to customize effective and sustainable plan keeping the community at centre and involving political support and prioritizing interventions according to the need of the population. The interventions need to be implemented in a more robust way to reduce the burden and combat AIDS by 2030. The effort given has to be double that of the previous years to achieve the target. The progress attained should not make us complacent as India still has a long way to go to reach its 'END AIDS by 2030' goal. Public health professionals and the Ministry of Health and Family Welfare, Government of India still have miles to go, before the vision may be realized.

## **About the Author:**



## **Dr. Pritinanda Jethi**

Dr. Pritinanda Jethi is a masters of public health candidate and a research intern at CHD Group.

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