

Annual Report 2016-17

ASSAM STATE AIDS CONTROL SOCIETY Khanapara, Guwahati

ACRONYMS

AIDS	Acquired Immuno Deficiency Syndrome
ANC	Ante Natal Clinic
ART	Antiretroviral Therapy
BB	Blood Bank
BP	Bridge Population
BCSU	Blood Component Separation Unit
CHC	Community Health Centres
CMIS	Computerized Management Information System
CST	Care, Support and Treatment
DAPCU	District AIDS Prevention and Control Unit
DSRC	Designated STI/RTI Clinic
FICTC	Facility Integrated Counselling & Testing Center
FSW	Female Sex Worker
HIV	Human Immuno-deficiency Virus
HRG	High Risk Group
ICTC	Integrated Counselling & Testing Center
IDU	Intravenous Drug User
IEC	Information, Education and Communication

LAC Link ART Centre

MMU	Mobile Medical Unit
MSM	Men having Sex with Men
NACO	National AIDS Control Organization
NACP	National AIDS Control Programme
NGO	Non-Governmental Organization
NHM	National Health Mission
OI	Opportunistic Infection
PEP	Post Exposer Prophylaxis
PHC	Primary Health Centre
PLHA	People Living with HIV / AIDS
PPP	Public Private Partnership/Preferred Private Provider
PPTCT	Prevention of Parent to Child Transmission
RNTCP	Revised National TB Control Programme
RRC	Red Ribbon Club
RTI	Reproductive Tract Infection
SACS	State AIDS Control Society
SHG	Self Help Group
SIMS	Strategic Information Management System
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infection
TI	Targeted Intervention

A WORD FROM THE CHAIRPERSON



It gives me unbridled joy and happiness to present before you the Annual Report -2016-17 of Assam State AIDS Control Society (ASACS) which is a reflection of the activities undertaken during the year 2016-17. The Annual Report is indeed a mirror which gives an insight into the

organization's progress and achievements. In the year 2016-17, a plethora of activities were conducted by every component under the umbrella of ASACS. Some of the notable achievements include successful accomplishment of events like World AIDS Day, National Voluntary Blood Donation Day and International Youth Day. Another notable achievement was 360 degree IEC Campaign in the highly vulnerable Cachar district of Assam, where all kinds of communication tools were used to bring HIV awareness amongst the masses. Another achievement of sorts is the use of Mobile ICTC vans in Guwahati Central Jail where the jail inmates were counseled on HIV along with testing. Apart from this, Voluntary Blood Donation Camps were also organized across the state and in this regard the Blood Mobile Bus played an important part by moving to various locations in the state to collect blood.

Last but not the least, I am glad to state that the Social Protection Schemes under Govt of Assam like Financial Assistance to HIV-infected widows, free blood to HIV-infected and Kasturi Care Home for orphans infected and affected by HIV are successfully functioning.

One milestone of success leads to another and this is what achievement and progress is all about. Let us all march together till we achieve our of zero HIV menace in the state.

Mukul Ch Gogoi, ACS Secretary to the Govt of Assam Health & FW Department & Chairman, ASACS

MESSAGE FROM PROJECT DIRECTOR



Like every year, this year too Assam State AIDS Control Society (ASACS) has come up with the Annual Report 2016-17 and as the head of this organization, it gives me unmitigated pleasure to present before you this document which chronicles all activities of the year in words, charts and graphs.

As you all know that Annual Report is the reflection of an organization's progress and achievements, ASACS' Annual Report 2016-17 makes an attempt to bring before you a vivid picture of the activities that we taken up in the aforesaid year.

Assam's epidemiological data says that 13368 nos of HIV Positive cases has been diagnosed till 31st March, 2017 out of which 9851 cases are enrolled under ART and 4698 cases are presently living on ART. The time has now come for focused and effective HIV interventions particularly in the high prevalence districts of the state.

In the case of HIV the bulk of the stress has to be given on prevention and various awareness activities require to be taken. In this respect no stone has been left unturned. A myriad of IEC activities like Folk Campaign, IPC Health Camps, Events have been taken up. A mention worthy IEC activity of 2016-17 was the 360 degree IEC Campaign in Cachar district which is considered as highly vulnerable district.

Another remarkable achievement is the entry of Mobile ICTC vans Guwahati Central Jail where the jail inmates were counseled on HIV along with which testing was also done. The Mobile ICTC vans were also utilized in the tea garden areas of the upper Assam districts. The counseling and testing of general clients and pregnant women were clearly depicted through graphs.

Strengthening the partnership between law enforcement, health and NGO/CBO in the context of Drug Use and HIV is another achievement of the year 2016-17. In this respect, a State Level Consultation on Harm Reduction and HIV/AIDS with Law Enforcement Agencies in Assam was which was attended by representatives from Assam Police, Sashastra Seema Bal (SSB), Central Reserve Police Force (CRPF), Indo Tibetan Border Police (ITBP) and Prisons etc. Another noteworthy achievement was Prison Intervention Project in the Central Jail, Kamrup which was initiated with the support of Emmanuel Hospital Association (EHA) NACO, ASACS and FHI360.

Voluntary Blood Donation Camps were also conducted across the state increasing the percentage of voluntary blood collection. The Blood Mobile Bus played an important part by moving to various locations in the state to collect blood.

Social Protection Schemes under Govt of Assam like Financial Assistance to HIV-infected widow, free blood to HIV-infected are also running in full swing.

Though much has been achieved, there is more to be achieved. In the words of Robert Forst 'There are miles to go before I sleep'. Let us all take this battle forward till we eliminate this threat to mankind.

Varnali Deka

(Varnali Deka, IAS) Project Director Assam State AIDS Control Society

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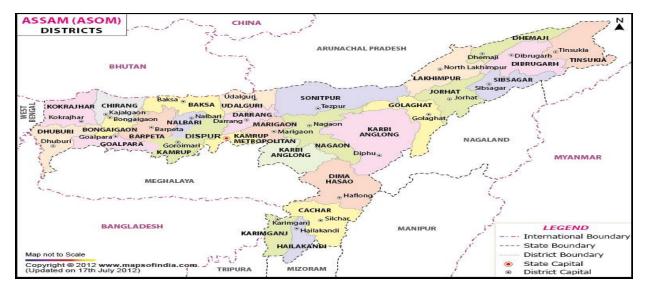
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INTRODUCTION

Assam is situated in the North East of India surrounded by Bhutan and Arunachal Pradesh in North, Bangladesh, Mizoram and Manipur on South, Nagaland on east and West Bengal and Meghalaya on west. Its geographical area is 78438 sq km. with a population density of 397(2011) per sq. km. The total population of Assam stood at 31169272 as per the provisional results of the Census of India 2011. The capital of Assam is Dispur, a suburb of Guwahati in 1972. Its major towns are Guwahati, Dhubri, Barpeta, Dibrugarh, Tinsukia, Jorhat, Nagaon, Sivasagar, Silchar, Tezpur.

The mighty Brahamaputra River passes through 800 kms from Sadia in the North East to Dhubri in the western extremity. During its course, it has created some riverine areas (popularly called char areas.), which inhabited by a large number of populations comprising of mainly ethnic people in upper reaches and immigrants from east while East Pakistan (now Bangladesh) in lower reaches.

The Barak river passes through the southern districts. After the name of these two rivers the Assam has been divided in to two valleys i.e. "Brahamaputra valley" and "Barak valley" with Borail Range in between the two. It has got two hill districts, Dima Hasao and Karbi-Anglong districts. There are some difficult areas viz char areas, tribal areas, tea garden areas, hill areas and forest village bordering neighboring states and countries.



DEMOGRAPHIC PROFILE OF ASSAM

The state of Assam has 27 districts (including 4 new districts of BTAD) with Kamrup (Rural and Metropolitan) district. Nagaon being the most populous district accounting 9.07% to total population of the state. The population density is highest in the Kamrup (Metropolitan) district having 2010 persons per sq.km. Whereas in the Dima Hasao population density is only 44 persons per sq.km. The literacy rate is highest in Kamrup (Metropolitan) district (88.64 %) and is lowest in Dhubri district (59.36%). (Census 2011) There are Tribal (Bodoland, etc.) and Hill (Karbi Anglong and Dima Hasao) Autonomous Council in which Panchayati Raj system is not in force and most of the department including Health & Family Welfare have been transferred by Govt. of Assam to be run by the Autonomous council. In the Hill districts Principal Secretary Autonomous Council is the Chairman of all health and family welfare committees (Society). In the plain district Deputy Commissioner is the Chairman of District Health & Family Welfare Society / other Committees.

Table1: The vital st	tatistics and	Socio-demographic	scenario	of	the	state	is
depicted as follows:	Source: Cens	sus, 2011					

Background Characteristics	Data	
Geographic Area (in Sq. Kms)	78438	
Total population (Census 2011)	31169272	
Population (0-6 yrs) – Total	4511307	
Population (0-6 yrs) – Male	2305088	
Population (0-6 yrs) – Female	2206219	
Population (7 yrs and above) – Total	26657965	
Population (7 yrs and above) – Male	13648839	
Population (7 yrs and above) – Female	13008126	
Decadal Growth Rate	16.93	
Population density	397	
Literacy rate Total	73.18	
Literacy rate – Male	78.81	
Literacy rate – Female	67.27	
Sex Ratio - Total	954/ 1000	

Name of the District	Population
Barpeta	1693190
Baksa	953773
Bongaigaon	732639
Cachar	1736319
Chirang	481818
Darrang	908090
Dhemaji	688077
Dhubri	1948632
Dibrugarh	1327748
Goalpara	1008959
Golaghat	1058674
Hailakandi	659260
Jorhat	1091295
Kamrup(M)	1260419
Kamrup(R)	1517202
Karbianglong	965280
Karimganj	1217002
Kokrajhar	886999
Lakhimpur	1040644
Morigaon	957853
Nagaon	2826006
Nalbari	769919
Dima - Hasao	213529
Sibsagar	1150253
Sonitpur	1925975
Tinsukia	1316948
Udalguri	832769
Total	31169272
	BarpetaBarpetaBaksaBongaigaonCacharChirangDarrangDhemajiDhemajiDhubriDibrugarhGoalparaGolaghatHailakandiJorhatKamrup(M)KarimganjKarimganjKokrajharLakhimpurMorigaonNalbariDima - HasaoSibsagarSonitpurTinsukiaUdalguri

Table 2: District wise Population of Assam:

(Source: Census 2011)

ASSAM STATE AIDS CONTROL SOCIETY: THE ORGANIZATION

The Assam State AIDS Control Society (ASACS) was established in the month of October, 1998 under Registration of Societies Act XXI of 1860 No RS/KAM/240/I/322 of 1998-99. Minister, Health & FW Department, Govt of Assam is the Chairman of the Governing Body and the Commissioner & Secretary, Health & FW Department is the Chairman of the Executive Council.

Earlier, the State AIDS Cell was established in the year 1992 under the National AIDS Control Organization, Ministry of Health and Family Welfare, Government of India for implementation of the National AIDS Control Programme (NACP) Phase I. The first phase of the National AIDS Control Programme came to its end in the year 1997 and was extended up to 1998.

Started in January, 1999, the NACP Phase II continued up to March, 2007. The ASACS started the NACP Phase-III from April, 2007. The District AIDS cells have been established in each district for smooth functioning and proper implementation of the programme. Phase III of the NACP started from 2007 to 2012. Since 2012, Phase IV of the National AIDS Control Programme has been rolled out and the programme will continue till 2017.

The objectives of the NACP IV are:

- 1) Reduce new infection by 50 per cent (2007 Baseline of NACP III)
- 2) Comprehensive care, support and treatment to all persons living with HIV/AIDS

Various activities for the prevention and control of HIV/AIDS in Assam were undertaken by the Assam State AIDS Control Society (ASACS) under the overall guidance of National AIDS Control Organisation (NACO).

OBJECTIVES OF STATE AIDS POLICY

The Assam State HIV/AIDS Prevention and Control Policy aims to halt the AIDS epidemic in the State to zero transmission rate and to reduce the impact of the epidemic at all levels of general population. The specific objectives of the policy are:

- I) To reiterate strongly the Government's firm commitment to prevent the spread of HIV infection and to reduce personal and social impact;
- II) To ensure right to privacy and confidentiality of people living with HIV/AIDS (PLHIVs);
- III) To ensure an environment free of discrimination for people living with HIV/AIDS and protection of human rights, including right to access healthcare system both at the government and private sectors;
- IV) To ensure prevention of hospital acquired infections for a safe environment;
- V) To ensure information, treatment and support to the people under care and custody of the State;
- VI) To strengthen safe blood transfusion system both at the Government and private institutions;
- VII) To mainstream AIDS Prevention and Control Programme with partnership development;
- VIII) To ensure HIV/AIDS related information, education and communication (IEC) at all levels;
- IX) To promote strategies for risk reduction from drug addiction and unsafe sex;
- To prevent women, children and other socially weaker groups from becoming vulnerable to HIV infection by improving health education, legal status and economic empowerment;
- XI) To promote mapping and surveillance for adequate intervention and estimation of the burden of infection in the State;
- XII) To promote proper Monitoring and Evaluation system and to ensure accountability;
- XIII) To develop appropriate legal framework.

HIV SCENARIO AT GLOBAL & NATIONAL LEVEL

At the end of 2015, globally there are an estimated **36.7** million (34.0 million-39.8 million) people living with HIV. **2.1** million People (1.8 million-2.4 million) became newly infected with HIV and **1.1** million (9, 40,000-1.3 million) people died of AIDS related illness during 2015 [**UNAIDS Fact sheets November 2016**]. The reports also states that globally new HIV infections among children have declined by **50%** since 2010 but no decline among adults since 2010 and AIDS-related deaths has fallen by **45%** since the peak in 2005. By June 2016, UNAIDS estimates that **18.2** million people were accessing antiretroviral therapy, up from **15.8** million in June 2015 and **7.5** million people in 2010. Based on the significant progress in the control of the HIV Epidemic globally, the World committed to end the AIDS Epidemic on Fast Track mode by 2030 as part of the Sustainable Developmental Goals (SDGs) that were adopted at UN General Assembly last year.¹

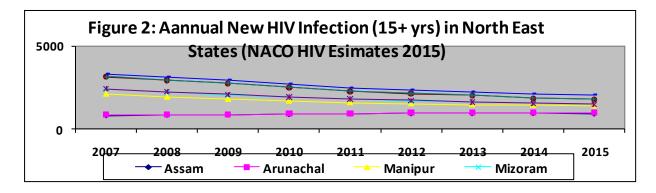
The Indian HIV Epidemic has been defined as a concentrated non-IDU epidemic in all the states except Manipur and Nagaland, where the epidemic is defined as a Concentrated IDU epidemic. As per the Technical Report on India HIV estimates 2015, the adult HIV prevalence in India was estimated as 0.26% in 2015 and it has shown a steady decline from 038% in 2001-03. However, while the decline in adult HIV prevalence and annual new HIV infections is sustained in the high prevalence states, rising trend in new HIV infections is noted among adults during 2007-15 few low prevalence states.^{2,3}

HIV SCENARIO AT THE REGIONAL LEVEL

The northeastern part of India comprises of some high HIV prevalence states and some low HIV prevalence states. Manipur has shown the highest estimated adult HIV Prevalence in the country at 1.15% in 2015. The other high prevalence states in the region included Mizoram (0.80%) and Nagaland (0.78%). Similar to the rest of the country, these high prevalence states has shown a declining trend in HIV prevalence whereas some of the low prevalence states are showing a rising trend in the recent years [**Figure 1**].

5	Figure 1: Adult HIV Prevalence trend in North East States (NACO HIV						
,			Esimates 2015)				
¢							
	2007	²⁰⁰⁸ Assam ²⁰⁰⁹	2010 Arunachal ²⁰¹¹	2012 Manipur	2013	2014 Mizoram	2015

Similar to the Adult HIV Prevalence, the Annual new HIV infections are showing a declining trend in the states of Manipur, Mizoram, Nagaland, Meghalaya and Arunachal Pradesh whereas new infections are increasing in Assam, Tripura and Sikkim. The rate of increase in annual new HIV infections is highest in Assam and Tripura **[Figure 2].**



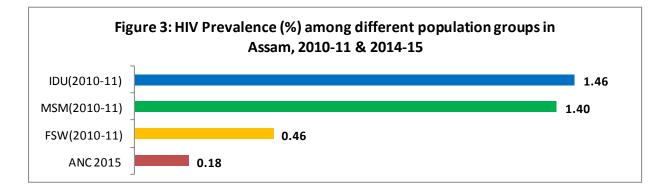
The above evidence suggests that there are some emerging pockets of HIV infections in the northeast region particularly in Assam and Tripura, where the rate of increase in Annual new HIV infections is higher than the three HIV prevalence states in the region.

HIV SCENARIO IN ASSAM

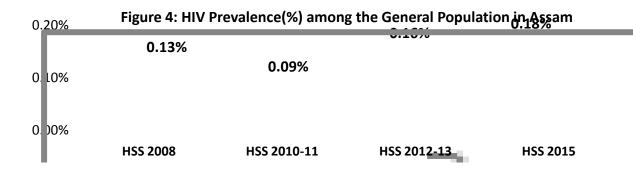
Assam is categorized as a low HIV Prevalence state with an estimated adult HIV Prevalence of **0.06%** which is lower than the National Prevalence of **0.26%**. However, the adult HIV Prevalence in the state has increased from **0.04%** in 2007 to **0.06%** in 2015. It is estimated that Assam had **928** new HIV infections in 2015 (**NACO Technical Report 2015**). The report also states that Assam had an estimated **12,090** people living with HIV (PLHA) in 2015. However as per programme data, 13368 no. of HIV Positive cases has been diagnosed till 31st March, 2017 out of which 9851 cases are enrolled under ART and 4698 cases are presently alive and on ART. Assam is also a highly vulnerable state for HIV transmission because of the following reasons:

- 1. It is the gate-way of the northeastern states.
- 2. It is surrounded by three high prevalence states of Manipur, Mizoram and Nagaland.
- 3. Large number of young population from the state is also going to large cities for employment and get involves in high-risk behaviour.
- 4. Assam has a large private health sector which caters to all the northeastern states.
- 5. Large number of female migrants from other northeastern states, West Bengal, Nepal who has come to Assam for Employment and education and gets involved in risk behavior favorable for HIV transmission.

Evidence shows that the HIV epidemic in the state is concentrated among the high risk group populations of female sex workers (FSW), Men having sex with men (MSM) and Injecting drug users (IDU). The HIV sentinel surveillance data of the 2010-11 and 2015 rounds shows that HIV epidemic in the state is concentrated among high risk groups-IDU (1.46%), MSM (1.40%) and FSW (0.46%) while HIV prevalence among ANC clinic attendees, considered proxy for general population, is low at 0.18%. However, as there are no migrant or trucker HIV Sentinel site in Assam, there is no available data from HIV sentinel surveillance on the bridge population and its possible role in the spread of infection from the high risk groups (HRGs) to the general population. [Figure 3]



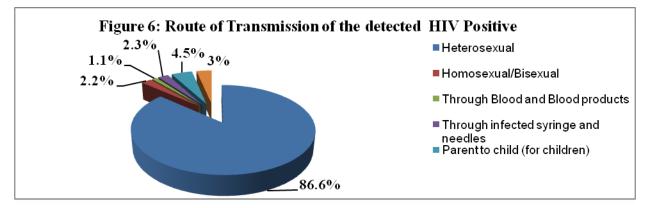
Data from three recent rounds of HIV Sentinel Surveillance (HSS) among the Ante-natal clinic attendees who are considered as proxy for the general population shows a rising trend in HIV Prevalence (%) in Assam [**Figure. 4**]. Districts showing consistently higher HIV Prevalence (%) among ANC attendees in the recent rounds of HSS are Karimganj, Tinsukia and Karbi-Anglong.⁴ Also, two districts namely, Cachar (1.25%) and Sonitpur (1.25%) have recorded more than 1% HIV Prevalence among the ANC attendees during HSS 2015.



Analysis of the National AIDS Control Programme (NACP) data among ICTC attendees and PPTCT attendees shows a stable trend of HIV Positivity (%) among the General Clients while a rising trend is noted among the Pregnant Women [**Figure. 5**]

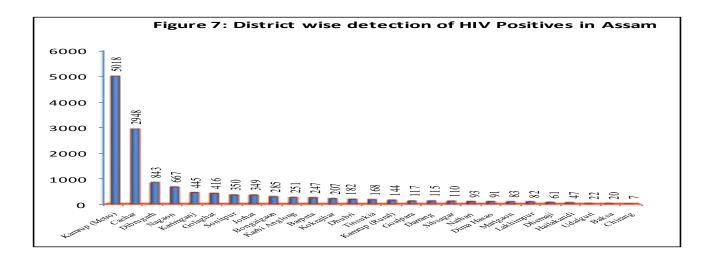
Figure 5: Year wise HIV Positivity rate among General Clients and Pregnant Women								
1.49	1.28	1.09	0.94	0.97	0.90	1.02	0.77	0.69
0.08	0.07	0.06	0.06	0.05	0.05	0.05	0.05	0.04
2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
			- General Cli	ents -	Pregnant V	Vomen		

When the data of HIV detection in Assam is analyzed by Route of Transmission, it is observed that the main route of transmission is heterosexual (86.6%) [Figure.6]



Analysis of the district level data shows that about 38% of the HIV positive cases were detected in Kamrup (Metro) district followed by Cachar (22%) [Figure. 7]

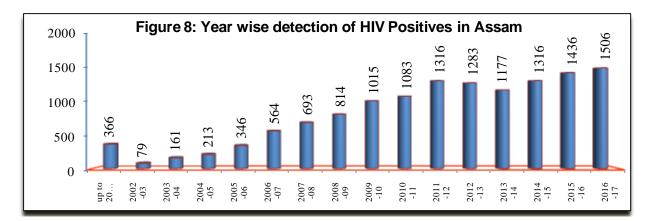
Figure 7: District wise detection of HIV Positive as on 31st March, 2017:



• No. of Clients tested for HIV and detected positive (as on 31st March, 2017):

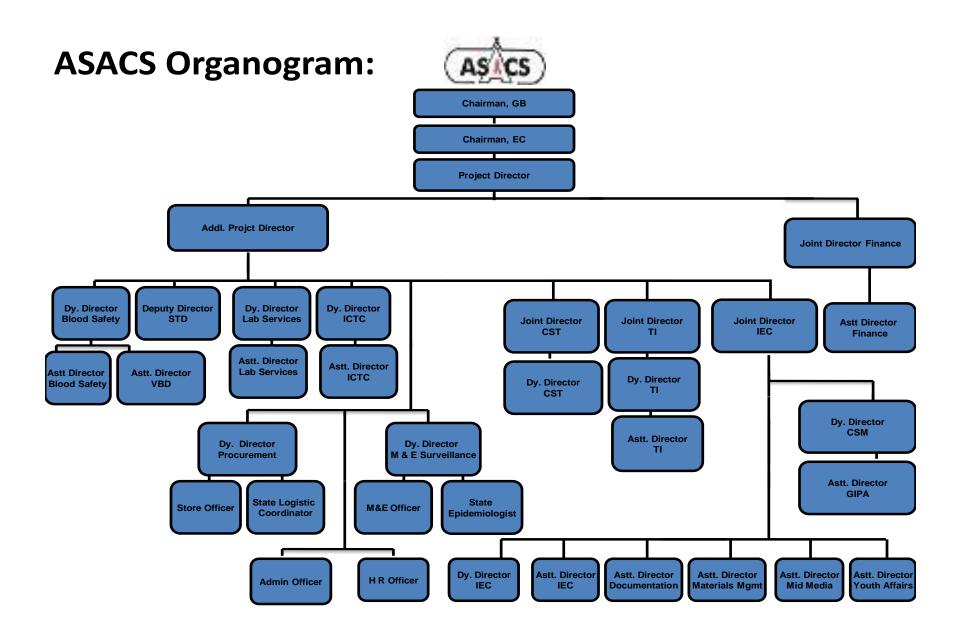
Indicator	General Clients	Pregnant Women	Total
No. of Persons tested at ICTC	1183140	1938076	3121216
Number of Persons detected HIV Positive	12271	1097	13368
Rate of positivity (per thousand)	10.37	0.57	4.28

• Year wise No. of clients detected HIV Positive year:



• No. of clients under ART (Antiretroviral Therapy) services (as on 31st March, 2017):

Indicators	Number
No. of clients registered on ART	9851
No. of clients ever started ART	6553
No. of clients alive and on ART	4698
No. of clients reported died	1630



COMPONENTS UNDER ASSAM STATE AIDS CONTROL SOCIETY (ASACS)

TARGETED INTERVENTION

Targeted Intervention is one of the activities under Prevent New Infection for saturation of coverage of high risk groups like Female Sex Worker (FSW), Men having Sex with Men (MSM) & Injecting Drug User (IDU) and bridge population like Truckers and Migrants through NGOs. At present, total 51 Targeted Intervention projects are running through NGOs among high risk groups (47 nos.) and bridge populations (4 nos.) in different districts of Assam. Out of these 30 are among FSWs, 1 among MSMs, 6 among IDUs, 2 among Migrants, 2 Truckers and 11 Core Composite TIs.

There are 2 Opioid Substitute Therapy (OST) Centres for the IDUs in GMCH and Diphu Civil Hospital. At OST centers, the IDUs are provided with oral drug, Buprenorphine as a substitute of Injecting Drugs.

Туроlоду	No. of projects
FSW (Female Sex Worker)	30
MSM (Men having Sex with Men)	1
IDU (Injecting Drug User)	6
Migrant	2
Truckers	2
Core Composite	11

A brief insight on the activities undertaken by Targetted Intervention:

- 1. Strengthening the partnership between law enforcement, health and NGO/CBO in the context of Drug Use and HIV:
 - i) Formation of State Level Working Committee on prison HIV and law enforcement has been initiated during the launching of Prison Intervention Plan in the month of January 17.
 - ii) Project Sunrise conducted a State Level Consultation on Harm Reduction and HIV/AIDS with Law Enforcement Agencies in Assam which was attended by around 70 participants with representation from Assam Police, Sashastra Seema Bal (SSB), Central Reserve Police Force (CRPF), Indo Tibetan Border Police (ITBP) and Prisons etc. The Consultation was held at the Assam Police Headquarters on December 19, 2016.

2. Capacity building under Project Sunrise:

- i) The training on monitoring and evaluation, data analysis and data use for program for the Monitoring and Evaluation (M&E) staff of TI NGOs of Assam was conducted in the month of October 16 and November 16, 2016. Total number of participants was 51 and out of that 4 are females and 47 are males.
- ii) The regional ToT on New ICTC Guideline and CBHT for ICTC Counselors and District ICTC Supervisors (DIS) was conducted in 3 batches in Guwahati from November 8 to 10, 2016 where total number of participants was 136 out of which 68 are females and 68 are males which include 25 nos of counsellors from facilities of ASACS who have attended with the support of NACO (BSD), SACS & FHI360.

3. Formation of District level HIV/AIDS Monitoring Team in priority districts:

District-level HIV/AIDS Monitoring Team was formed in priority districts of Assam

4. Prison Intervention in Assam:

Prison Intervention Project in the Central Jail, Kamrup have been initiated with the support of implementing agency EHA with the support of NACO, SACS and FHI360.

5. District Level Coordination (DCM) Meeting

District Level Coordination (DCM) Meetings are being held in the priority districts viz. Dima Hasao, Karbi Anglong and Cachar as per the follow-up of the NE review meeting held in the month of Jul 16 to strengthen the coordination among different stakeholders such as Targeted Interventions (TIs), NETSU, ASACS and district health administration.

6. State Oversight Committee:

State Oversight Committee formed on 23rd Jun 16 to see the overall progress of the innovations supported by Project Sunrise to scale up the HIV intervention programme in the state.

INFORMATION EDUCATION COMMUNICATION (IEC) & MAINSTREAMING

Communication is a cross-cutting and integral part of all the components of NACP. It is intended to motivate behaviour change in a cross-section of identified populations at risk, including High Risk Groups (CSW, IDU and MSM) and Bridge Population (Clients of Sex Workers, Migrants and Truck Drivers) besides general population. The broad objectives of IEC intervention are to:

- Raise awareness about risk, the need for behaviour change among the Vulnerable and General Population, especially Youth and Women.
- Generate demand and facilitate increase in utilization of HIV/AIDS related health services.
- Create an enabling environment that encourages HIV related prevention, care and support activities and reduces stigma and discrimination at individual, family, community and institutional levels.

At the primary level, specific communication strategies will address the high risk, vulnerable and general population segments. Advocacy, social mobilization and mainstreaming strategies will support and facilitate the primary level communication efforts.

An overview of IEC activities in the year 2016-17:

In the year 2016-17, the Assam State AIDS Control Society has played an integrated role for HIV/AIDS prevention and control programs under NACP-IV in the State. The IEC Division of Assam State AIDS Control Society implemented in collaboration with different stakeholders like various Government departments, NGOs, PRIs, educational institutions and implemented various activities to create awareness on HIV/AIDS for diverse audiences. In fact, ASACS-IEC has played a pivotal in raising awareness about HIV/AIDS, demand generation for the services and reducing stigma and discrimination through various mass media, outdoor and mid-media activities and distribution of IEC materials through ICTCs, PPTCTS, ART Centres, CCCs, RRCs, TIs, and non-HIV NGOs. Also, we have used these IEC/BCC materials during various events organized internally and externally by various agencies throughout the year. A special effort is also made to reach out the student community to encourage for awareness generation and blood donation in district-level.

Mass Media Campaign:

Mass media has been utilized to disseminate HIV/AIDS prevention messages to every nook and corners of the State with an aim to reach out to the general as well as the HRG and bridge populations.

AIR:

Phone-in-Live programmes have been broadcast in AIR, Guwahati station on special events and experts in different fields have been engaged in this programme. The programmes have been getting very good response from the listeners. Different aspects of HIV/AIDS like voluntary blood donation, blood safety, drug abuse, epidemiological trend of HIV/AIDS in the State, etc. have been covered in the phone-in-live programme. A total of 2 nos. of programme have been broadcast.

Private Radio (FM) & AIR:

Four private FM stations and AIR, Guwahati broadcasted jingles. A total of jingles which is 480 nos spots , have been broadcast.

TV (DDK):

Phone-in-programmes have been telecast on special events and the experts of different fields have attended the programme. A large number of phone calls were addressed by the experts in these programmes. Different aspects of HIV/AIDS like Voluntary Blood Donation, different aspects of HIV/AIDS in the State, HIV/AIDS and Role of Youth, etc. have been covered in the programmes. A total of 3 nos. of phone-live-programmes have been telecast.

Satellite channels (spots):

Seven nos. of private TV satellite channels telecast spots. A total of 207 spots have been telecast.

Press Advertisement:

Newspapers have wider reach among youth and general population in both urban and semi-urban areas. Thus newspapers play a very vital role in educating and information dissemination to people on sensitive issues like HIV/AIDS. Based on this assessment, IEC Division has taken the initiative to print advertisement through which appropriate information is disseminated among people to create awareness. To mark the important days like the National Voluntary Blood Donation Day, the World AIDS Day, the National Youth Day, press advertisements were published in leading newspapers of the State. A

total of 33 nos. of press advertisements were released on these above-mentioned occasions.

Take away materials:

ASACS has developed materials for banners, posters, folder, leaflets, booklets in local languages. These are being distributed/displayed among masses and different service centres.

Outdoor and Mid-media:

- A total of 506 nos. of folk performances were done in different phases. There are three folk forms in the State. These are Ojapali, Puppetry, and Natika. The Assam SACS has been paying Rs. 4,000/- per troupe per show.
- AV spots in Guwahati Railway Station and Inter-State Bus Terminus have been displayed in the year 2016-17. A total of 96 AV spots were displayed.

IPC Health Camp for Truckers & Migrants

IPC Health Camps for truckers & migrants were organized in the vulnerable districts of Assam with the support from TI NGOs. A total of 15 nos of IPC Health Camps.

Exhibitions:

Exhibitions have been organized during Ambubashi Mela in four locations of Guwahati – Pandu, Kamakhya Railway Station, Sonaram School Field, and Kamakhya Mandir campus and during Raas Festival in Howley in Barpeta and Majuli districts.

Events or observance of Special Days:

The ASACS organized the International Day of Yoga, World Blood Donor Day, International Youth Day, National Voluntary Blood Donation Day, World AIDS Day, National Youth in the year 2016-17. ASACS even actively participated in the International Day against Drug Abuse and Illicit Trafficking, organized by the Social Welfare Department in June, 2016.

Youth Intervention:

Red Ribbon Clubs:

With an aim to collaborate with the youths of today, ASACS implemented the formation of Red Ribbon Clubs (RRC) in the colleges. The total no. of RRCs is now 209 nos. The RRCs aim at harnessing the potential of the youths by equipping them with correct information on HIV/AIDS prevention, Care, Support and Treatment. It also aims in building their capacities as peer educators in spreading messages on positive health behaviour in enabling environment and increasing voluntary blood donation from among youths. This year, funds of Rs. 4,000/- each has been released to a total of 79 nos. of existing RRCs till date.

School AIDS Education Programme:

In Assam, State Council for Education, Research and Training (SCERT), Assam has been conducting the School AIDS Education Programme. This year, funds have already been released to a total of 24 nos. of districts for implementing the AEP programme for covering 1000 nos. of schools.

Mainstreaming & GIPA

Advocacy:

1. Meeting with Law Enforcement Agency

A State Level Consultation Meeting on HIV/AIDS & Harm Reduction with Law Enforcement Agencies (LEAs) in Assam was held on 19th Dec.2016 at Conference Hall of DGP Office, Guwahati, Assam. A total of 75 participants from Assam Police, Prison , CRPF, ITBP, SSB, BSF have attended the meeting. Mr. Mukesh Sahay, Deputy General of Assam Police was present in the workshop as Chief Guest.

2. State Consultation on Social Protection for Children and adolescents infected and affected with HIV & State Consultation on Social Protection uptake for PLHIV, CABA and MARPS

A State Level Consultation named the State Consultation on Social Protection for Children and adolescents infected and affected with HIV & Social Protection uptake for PLHIV, CABA and MARPS was held on 9th Jan. 2017 at the Seminar hall of State Institute of Health & Family Welfare. A total of 31nos of participants have attended the workshop. Participants were from UNICEF, District Child Protection Unit, Human Rights Law Network, SALSA, FXB Vihan Project, Positive Networks of Guwahati, Dibrugarh, Barpeta, Cachar, and NETSU.

3. State Level Consultation with Department of Tribal affairs

A State Level Consultation on Tribal Affairs was held on 6th January 2017, at the Seminar hall of State Institute of Health & Family Welfare. A total of 30 nos of participants from Department of WPT & BC, SDWO of Hojai, Biswanath Chariali, Nagaon, Udalguri, Dhemaji, Kokrajhar, North Salmara, ITDP representatives from Jorhat, Goalpara, Nalbari, Representatives from Karbi Anglong Autonomous Council, Sonowal Kochari Autonomous Council, Rabha Hasong Autonomous Council and NETSU have attended the meeting.

4. Inter-Departmental Meeting /Joint Working Group)

- a) Joint Working Group of Youth: A Joint Working Group for youth has been formed with the following Departments- Department of Youth & Sports, Social Welfare, Deptt. of Higher Education, NHM, SCERT, Woman's Commission and other stakeholders.
- b) Joint Working Group of Mainstreaming: A Joint Working Group for mainstreaming has been formed with the following Departments- Department of Social Welfare, Deptt. of Transport, Deptt. of Food & Civil Supply and Consumer Affairs, Deptt. of Panchayat and Rural Development, ASRLM, SIRD.

Mainstreaming Training

Under Communication Campaign Plan which has covered the whole district of Cachar, a number of Mainstreaming advocacy-cum-trainings were conducted in Cachar in the month of March, 2017. For this a District Level Advisory and co-ordination committee meeting was held on 7th of January at the conference hall of the office of the Deputy Commissioner, Cachar.

1. State Resource Pool :

A Resource Pool was formed for conducting various trainings to be organised in various Departments. A ToT for the identified trainers was conducted on 23rd of February at Silchar, Cachar. A total of 93 numbers of identified trainers were trained.

2. Training of Frontline Workers (ASHA, ANM, AWW):

A total of 30 nos. of sensitization workshop, covering all the ANM, ASHA, AWW of the entire district of Cachar were conducted in the month of March under the Communication Campaign Plan.

3. Panchayati Raj Institutions :

A total of 12 nos. of sensitization workshop, covering all the block level Panchayat of the entire district of Cachar were conducted in the month of March under the Communication Campaign Plan.

4. Department of Home Affairs:

A total of 3 nos. of Training Workshops for Assam Police Personnel and CRPF personnel in CRPF training institute of Cachar were conducted in the month of March under the Communication Campaign Plan.

5. Railways:

A total of 2 nos. of sensitization workshop, for the officials and RPFs, Vendors and Staff of NF Railway, Cachar were conducted in the month of March under the Communication Campaign Plan.

Department of Transport:

A total of 4 nos. of sensitization workshop for the officials, workers and associations of Transport Department, Cachar were conducted in the month of March, 2017 under the Communication Campaign Plan.

6. Department of Rural Development:

Officials of State Rural Livelihood Mission of Cachar were trained as ToT to impact training to SHG on HIV/AIDS, in the month of March under the Communication Campaign Plan.

7. Training of Major Govt. Officials Line Departments:

Different Departments' officials were sensitized on the current scenario as well as the Communication Campaign Plan in the Dist. Health Society meeting and Dist. Development Committee meeting.

8. Training of NYK:

One sensitization workshop, for Nehru Yuvak Kendra, Cachar was conducted in the month of March under the Communication Campaign Plan.

9. Faith Based Organization:

A total of 2 nos. of awareness-cum-sensitization workshops, for the various Faith Based organizations of Cachar were conducted in the month of March under the Communication Campaign Plan.

10.GIPA Activity:

Four numbers of District Level GIPA Consultations with district level networks were organized in the 1st week of March, 2017 at Barpeta, Golaghat, Nagaon and Silchar for strengthening the DLN. Around 150 nos. of PLHIVs are trained in each consultation

INTEGRATED COUNSELLING AND TESTING CENTRE (ICTC)

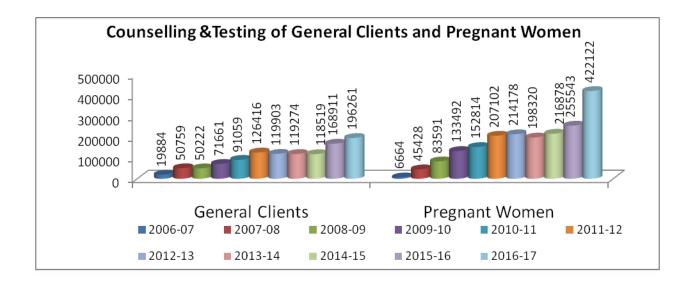
Integrated Counseling and Testing Centre is a place where a person is counselled and tested for HIV on his/her own freewill or as advised by a medical provider. These centres can be entry points for linking the diagnosed people to HIV Care services.

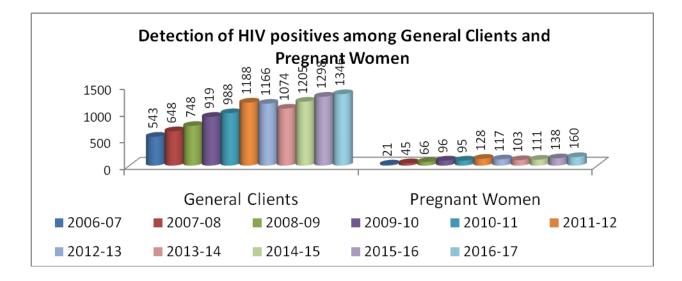
In Assam, 343 Integrated Counselling and Testing Centres (ICTCs) which includes 97 stand alone ICTCs, 2 mobile ICTCs, 202 Facility ICTCs (including 15 Boat Clinics and 8 MMUs) and 42 PPP ICTCs. Out of the 93 stand alone ICTCs, 12 are located in Medical Colleges, 39 in District Civil Hospitals and 46 in CHCs/FRUs/SDCH. The two mobile ICTCs are allocated to the Kamrup (Metro) and Golaghat district.

The Stand alone ICTCs have qualified Counsellors and Lab. Techs appointed by the Assam State AIDS Control Society. All the ICTCs are functioning with well trained Doctor In Charge, Counsellors, Lab Techs and Nurses. The Infrastructural improvements like arrangement of space for counselors, furniture, TV/DVD, Computers and other equipments are made available. Laboratory test kits and consumables, IEC materials, Condoms and different types of forms/registers etc are regularly supplied to all the ICTCs as per requirement.

Category	No. of facilities	Location
Stand Alone	u/	12 in Medical Colleges, 39 in District Hospitals, 46 in CHCs/PHCs,
Facility ICTC	////	171 in CHCs/PHCs/SDCH, 8 DTCs, 15 in Boat Clinics, 8 in MMUs
Mobile ICTC	2	1 in Kamrup (metro), 1 in Golaghat district
PPP ICTC	42	Private Nursing Home, Public sector Industries in Assam
Total	343	

• Category wise ICTCs functioning in Assam:





In the Financial Year 2016-17, ICTC Division conducted the following activities:

1. Deputation of Mobile ICTCs in IPC Health Camps:

Mobile ICTCs were deputed in the IPC Health Camp for providing HIV Counselling and Testing facilities to the needy clients.

2. Meeting with Partner Organizations:

ICTC Division is conducting meeting with all partner organizations working in Assam in the field of HIV/AIDS on a regular basis to monitor the ongoing programmes and its effective implementation.

3. Mobile ICTC in Guwahati Central Jail:

On the occasion of observation of country's 69th Independence Day, ICTC Division has sent the Mobile ICTC Van of Kamrup to the Central Jail located at Lokhora, Guwahati to provide HIV Counselling and Testing Services to the Jail Inmates. Accordingly, an awareness meeting was organized on August 12, 2016 where all necessary information regarding transmission and prevention of HIV/AIDS, its treatment facilities available in the state were provided to the inmates. Altogether 83 persons including female inmates had undergone HIV testing and more than 110 inmates had taken part in the awareness meeting. It was the first step taken for Jail Intervention Programme which was proposed by NACO.

4. Mobile ICTC Van for Camps in Tea Gardens

Mobile ICTC Van of Golaghat conducted camps in Negheriting areas near Negheriting Dol with the help of local NGO. The team of MICTC took all initiatives with the help of Dr. Jayanta Borgohain, In-charge, Mobile ICTC, Golaghat to conduct other many camps in different areas of Golaghat, Jorhat and Sivasagar Districts. The vans mostly cover tea garden areas and areas recommended by District TB Officer of different districts for HIV testing of TB patients

5. Appreciation & Recognition to Counsellors & Lab Techs

ICTC Division has given recognition along with appreciation to the counsellors and Laboratory Technicians for their dedication and tremendous efforts towards services in the field of HIV counselling and testing, linkages of HIV positive clients to the CST services, coordination with other components/departments, case management etc despite running through hurdles. During the World AIDS Day-2016, two counsellors and two Laboratory Technicians from ICTC and PPTCT respectively were identified as Best Counsellor and Laboratory Technician of the state for recognition.

6. Quarterly Meetings on HIV/TB Collaboration

All related matters of effective implementation and strengthening of HIV-TB collaborative activities in different districts and increased HIV-TB Cross Referral of Dist were discussed in all the three quarterly meetings.

7. NACP-NHM Convergence

As a result of NACP-NHM Convergence, ICTC Division takes part as Facilitator in the RKSK Training of Counsellors and TOT for Nurses (basically ANMs) conducted by National Health Mission (NHM). In few districts, NHM has extended support for necessary consumables for HIV testing laboratory. ICTC Division of Assam SACS has submitted proposal for State PIP 2017-18 as per request from NHM, Assam.

8. Monitoring Activities

ICTC Division is also closely monitoring the activities carried out by Emmanual Hospital Association (EHA), the implementing agency of AHANA Project (PPTCT outreach activities) in Assam under Plan India, PR.

9. Regional Review Meeting

The Regional Review Meeting of Basic Service Division, NACO was held in Guwahati, Assam for 7 states and the BSD Team of NACO headed by DDG, BSD, NACO come to Guwahati and visited to Stand Alone ICTC and FICTCs of Morigaon, Nagaon and Kamrup (M) district.

10. Supportive Supervision

ICTC Division is providing supportive supervision, hands-on training and necessary support to the peripheral centres whenever required.

11.PPP Mode

ICTC Division could able to draw attention from Public Sector Undertaking (PSU) like Coal India, Amalgamated Tea Industry Hospitals towards HIV/AIDS programme under the fold of PPP mode.

SEXUALLY TRANSMITTED INFECTION/REPRODUCTIVE TRACT INFECTION (STI) SERVICES

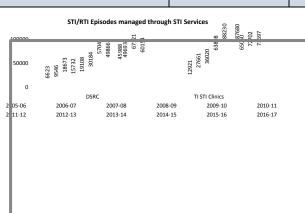
Early diagnosis and effective treatment of STI/RTI can significantly reduce the transmission of HIV. Treatment seeking behavior in case of STI/RTIs forms an important component in the overall STI/RTI management and also towards the significant curb of HIV/AIDS. Also STD patients are more vulnerable to acquire or transmit HIV infection. Treatment of STD reduces the risk of transmission of HIV.

There are 28 Designated STI/RTI clinics named as Suraksha Clinic in the Medical Colleges and District Civil Hospitals in Assam, where STI patients are examined, diagnosed and treated free of cost. Besides these 28 clinics, 51 TI projects are also treating the STI patients through preferred private providers engaging 133 Private Doctors.

One Regional STI Research & Reference Centre (RSC) and one State STI Reference Centre (SRC) are also functioning in the state.

Category	No. of facilities	Location
Designated STI/RTI Clinic	28	6 in Medical Colleges, 22 in District Hospitals
TI STI Clinic	51	Targeted Intervention NGOs in the district
PPP/PSU STI Clinic		Private Hospital and Nursing Home/ Public Sector Industries in Assam
SRC	1	SMCH, Silchar
RSC	1	GMCH, Guwahati

Different facilities under STI/RTI division:



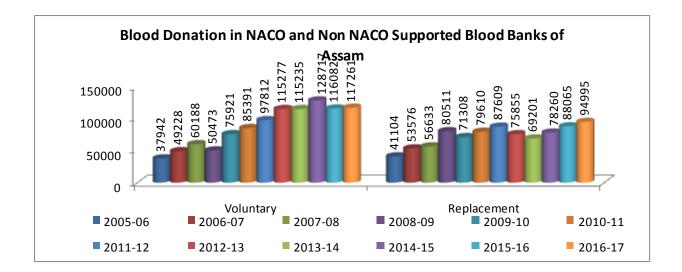
BLOOD TRANSFUSION SERVICES

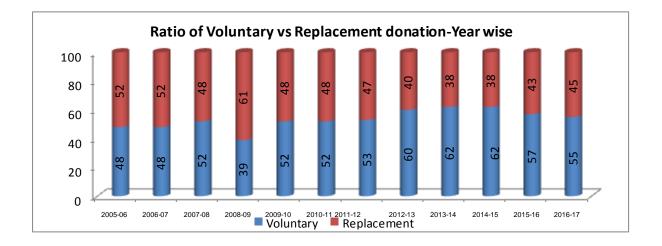
Blood Transfusion Services aimed at ensuring access to safe blood and blood products to all at a reasonable cost, adequate to meet the needs of all patients and transfused only when necessary. There are 66 licensed blood banks in Assam, 26 of which are NACO Supported blood banks and 42 Non NACO Supported/Private Blood Banks. Blood Banks of Gauhati Medical College Hospital, Guwahati and Assam Medical College Hospital, Dibrugarh are the State of the Art Model Blood Banks with Blood Component Separation Units (BCSUs) and Blood Bank of Silchar Medical College Hospital, Silchar is the Major Blood Bank with BCSU. Among the remaining blood banks, 9 are Major Blood Banks and 14 district level blood banks.

One Blood Mobile Van for GMCH Blood Bank and 6 Blood Transportation Vans for 6 Govt. Blood Banks are also functioning in Assam since 2010-11.

Category	No. of facilities	Location
NACO Supported Blood Bank	26	In 5 Medical Colleges, 19 District Hospitals, 1 Cancer Institute and 1 Charitable hospitals of 23 districts
Non NACO Supported /Private Blood Bank	42	1 in TMCH, Tezpur and other in Private/ PSU hospitals
RBTC	3	GMCH, AMCH, SMCH
Blood Mobile Bus	1	GMCH Blood Bank
Blood Transportation Van		GMCH, AMCH, SMCH, KKCH Golaghat, BPCH Nagaon, Kanaklata CH, Tezpur.

Facilities under Blood Transfusion Services:





LABORATORY SERVICES

In Assam, 3 (three) State Reference Laboratories (SRL) are functioning in three Medical Colleges namely at GMCH, Guwahati, AMCH, Dibrugarh and SMCH, Silchar where the quality of the testing protocol undertakes in different facilities mainly in the ICTCs are checked.

This service ensures about the quality of the various testing facilities especially in ICTCs through the State Reference Laboratories (SRL) in the state.

SRL at AMCH Dibrugarh and SMCH Silchar have been rewarded NABL accreditation.

CARE SUPPORT & TREATMENT

Antiretroviral Therapy (ART) Centre

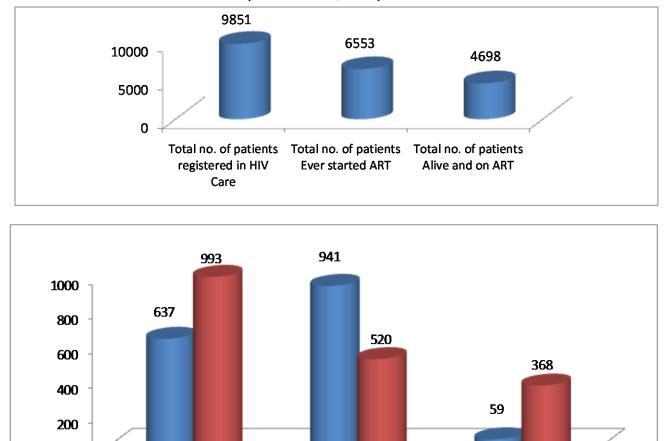
ART Centre is a place where eligible persons with HIV/AIDS requiring ART are identified through laboratory services (HIV testing, CD4 Count and other required investigations) and provide free ARV drugs to eligible persons with HIV/AIDS continuously by counselling before and during treatment for ensuring drug adherence.

ART was started in the state in the year 2005 at Gauhati Medical College Hospital, Guwahati. At present 5 (five) ART Centres are functioning in 5 (five) Medical Colleges of the state i.e. Gauhati Medical College Hospital (GMCH), Guwahati, Assam Medical College Hospital (AMCH), Dibrugarh, Silchar Medical College Hospital (SMCH), Silchar, Fakhruddin Ali Ahmed Medical College Hospital (FAAMCH), Barpeta and Jorhat Medical College Hospital (JMCH), Jorhat. out of which ART Centre at GMCH and SMCH have been upgraded to ART Plus Centre in 2011-12 and 2014-15 respectively, where 1st line Alternative ART and 2nd line ART treatment are available. One FI ART Centre at B. P. Civil Hospital Nagaon, was also established and functioning since June, 2015.

Besides these ART Centres, 10 Link ART Centres are also established and functioning in the state out of which 2 LACs at Bongaigaon and Sonitpur districts hospitals are LAC plus Centre. CD4 testing facilities are available in 4 (four) ART Centres of the state and it is done free of cost.

Category	No. of facilities	s Location	
ART Plus Centre	2	GMCH, Guwahati and SMCH, Silchar	
ART Centre	3	AMCH, JMCH and FAAMCH	
FI ART Centre	1	BP CH, Nagaon	
Link ART Plus centre	2	Kanaklata CH Tezpur and Bongaigaon CH	
Link ART Centre	8		

Different Types of ART Centres:



Details of Patients on ART Centre (as on March, 2017)

CD4 testing services:

Total no. of patients died

0

 Based on the CD4 counts, ART treatment can be initiated to the ART registered patients on accurate time. To determine the CD4 count of the ART registered patients, 4 (four) CD4 testing machines are installed and functioning in the 4 Medical Colleges of the state.

Total no. of patients IFUTotal no. of patients linked to LAC/LAC plus
Pre ART ON ART

Care Support Centre (CSC):

 To provide extensive counselling and to linking up the HIV/AIDS infected/affected persons with the various social security schemes, 4 (four) Care Support Centres are functioning under the project VIHAN. They also traced out the lost to follow up cases enrolled under the ART programme.

INSTITUTIONAL STRENGTHENING

The main function of this component is to build the capacity of the staffs and administrative/financial management of the AIDS Control activities in the state. Financial Management is done through CPFMS (Computerized Project Financial Management System).

DISTRICT AIDS PREVENTION & CONTROL UNIT (DAPCU)

Assam State AIDS Control Society has one DAPCU functioning in the District of Kamrup and was set up in the year 2010. The DAPCU team performed regular supportive supervisory visit to the ICTCs, Blood Banks, STI clinics, TI NGOs, ART Centres under the district and provide feedback to them.

Activities of DAPCU

- 1. Organizing Voluntary Blood Donation Camps
- 2. Awareness Camps
- 3. DAPCC Meeting
- 4. HIV/TB Meeting
- 5. Organizing special Days like World AIDS Day, International Women's Day

STRATEGIC INFORMATION MANAGEMENT UNIT (SIMU)

Monitoring and Evaluation is an integral part of the National AIDS Control Programme. Under this component, the physical performance at the district and state level are monitored through the on line reporting system SIMS (Strategic Information Management System), by which the periphery reporting units reported on various key indicators on monthly/quarterly basis. There are about 400 reporting units including Blood Banks, STI clinics, ICTCs, FICTCs and TI projects which are reporting to ASACS through SIMS. HIV Sentinel Surveillance (HSS) are conducted time to time for HIV epidemic monitoring and from the findings of HSS, HIV estimates, prevalence are calculated. Various Research Proposal submitted by the Researcher are also reviewed and provided feedback as per NACO guideline under this component.

SIMS Training: SIMS refresher training was conducted for the ICTC and STI Counsellors on 14th Dec, 2016 at IIBM, Khanapara.

Training for the ANC and HRG Site personnel on HSS 2017: Training of HSS Site personnel for the Rd 15 for ANC and HRG Sites were conducted by SIMU division, ASACS in two batches on 17th -18th Feb, 2017 and 24th -25th March, 2017.

SOCIAL PROTECTION SCHEME UNDER GOVT OF ASSAM

Special Care Home for the orphans affected/infected by HIV:

- One Special Care Home named as Kasturi Care Home has been established for the orphans affected/infected by HIV in the state. Presently 17 orphans are residing in the orphans.
- One time financial assistance grant for the widows of AIDS Victim:
- One time financial assistants grant of Rs.1.00 lakh each are being provided for the widows of AIDS Victim. Total 344 widows have received the grant till date out of which 52 have received grant during 2016-17.

Free Transportations and Lab Investigations to the patents under ART:

• The cost of transportation and lab investigation to the patents under ART are reimbursed by the state Govt.

Strengthening of Blood Banks:

• For the Compensation to the AIDS Victim in Mangaldoi Civil Hospital & for Strengthening of the Blood Banks in the state, Assam Govt. have also provided fund.

Improvement of ART Centres:

• Assam Govt have provided fund for the improvement of ART Centres in the state.

Free blood to the People Leaving with HIV (PLHIV):

• The PLHIVs are provided free blood from all the Govt. blood banks as on when required.

ANNEXURE-1

SI. No.	Type of Services	Category	Number
	Preventive	e Services	
1.	Targeted Intervention (TI) Projects	FSW	29
	run by NGOs	MSM	1
		IDU	6
		Trucker	2
		Migrant	2
		Core Composite	11
	Total		51
	Opioid Substitute Therapy (OST) Ce	entres	2
2.	Information, Education & Communication and Mainstreaming	Red Ribon Club	246
	Integrated Counselling and Testing	Stand Alone ICTC	97
	Centre (ICTC)	Mobile ICTC	2
		Facility ICTC	202
3.		PPP ICTCs	42
	Total		343
	Sexually Transmitted Infection	Designated STI/RTI Clinic	28
	(STI) Clinic	TI STI Clinic	51
	Total		79
4.	Regional STI Centre		1
	State STI Reference Centre		1
	Blood Bank	NACO Supported	26
		Non NACO Supported/Private	42
	Total		68
5.	Regional Blood Transfusion Centre		3
	Blood Mobile Bus		1
	Blood Transportation Van		6
6.	Laboratory Services	State Reference Centre	3
	Care, Support and	Treatment Services	
7.	Antiretroviral Therapy (ART)	ART Plus Centre	2
	Programme	ART Centre	3
		Facility ART Centre	1
		Link ART Plus Centre	2
		Link ART Centre	8
	CD4 Testing Centre		4
	Care Support Centre (run by NGOs)		4
	Child Care Home (run by NGO)(fund		1

ANNEXURE-2

District wise services under Assam State AIDS Control Society:

SI.	Name of	TI NGO			ICT	ſC		В	В	STI		RSC	SRC	ART	LAC
No	the District		ost	Stand Alone	Mobile ICTC	FICTC	PPPs	NACO Support	Private	DSRC	τı				
1	Baksa	1	0	2	0	16	1	0	0	1	1	0	0	0	0
2	Barpeta	3	0	4	0	8	0	1	0	1	3	0	0	1	0
3	Bongaigaon	2	0	3	0	5	1	1	2	1	2	0	0	0	1***
4	Cachar	4	0	4	0	5	1	2	1	1	4	0	1	1*	0
5	Chirang	1	0	1	0	9	0	0	0	1	1	0	0	0	0
6	Darrang	2	0	3	0	8	0	1	0	1	2	0	0	0	0
7	Dhemaji	0	0	4	0	4	0	1	0	1	0	0	0	0	0
8	Dhubri	2	0	3	0	13	0	1	0	1	2	0	0	0	1
9	Dibrugarh	2	0	3	0	9	2	1	6	1	2	0	0	1	1
10	Dima Hasao	2	0	2	0	2	0	1	0	1	2	0	0	0	0
11	Goalpara	2	0	3	0	10	0	1	1	1	2	0	0	0	0
12	Golaghat	2	0	4	1	3	3	1	1	1	2	0	0	0	1
13	Hailakandi	1	0	2	0	5	0	1	0	1	1	0	0	0	0
14	Jorhat	2	0	5	0	4	2	1	2	1	2	0	0	1	0
15	Kamrup (M)	5	1	4	1	4	16	3	13	2	5	1	0	1*	0
16	Kamrup ®	0	0	9	0	16	2	0	3	1	0	0	0	0	0
17	Karbi Anglong	3	1	4	0	8	0	1	0	1	3	0	0	0	1
18	Karimganj	1	0	3	0	3	1	1	0	1	1	0	0	0	0
19	Kokrajhar	1	0	3	0	4	0	1	0	1	1	0	0	0	1
20	Lakhimpur	1	0	4	0	7	0	1	0	1	1	0	0	0	1
21	Morigaon	1	0	2	0	13	0	1	0	1	1	0	0	0	0
22	Nagaon	3	0	5	0	25	1	1	3	1	3	0	0	1**	0
23	Nalbari	3	0	3	0	2	1	1	1	1	3	0	0	0	0
24	Sibsagar	2	0	4	0	6	3	1	2	1	2	0	0	0	1
25	Sonitpur	2	0	7	0	4	1	1	3	1	2	0	0	0	1***
26	Tinsukia	2	0	5	0	8	7	1	4	1	2	0	0	0	1
27	Udalguri	1	0	1	0	1	0	0	0	1	1	0	0	0	0
	Total	51	2	97	2	202	42	26	42	28	51	1	1	6	10
*AR	T Plus Centr	e, **	FI AF	RT Cen	tre, ***	Link AR	T Plu	s Centre							

ANNEXURE-3

COMPONENT-WISE EXPENDITURE 2016-17

					Rs. In l	Lakhs
SI. No.	Programme Component/Sub- Component	Approved Allocation for F/Y 2016-17	Fund Received during the year(including previous year)	Actual Expenditure as on 31.03.2017	% of expenditure based on approved allocation	% of expenditure based on fund recieved
1	2	3	4	5		
	PREVENTION:					
1	TI POOL FUND Targetted Interventions (TI)	765.94	1048.34	687.17	89.7	65.5
2	Domestic Budgetary Support (DBS)					
1.2	Sexually transmitted infections (STI)	72.30	116.51	77.47	107.2	66.5
1.3	Blood Transfusion Services(BTS)	165.70	262.44	223.49	134.9	85.2
1.4	IEC & Mainstreaming	120.00	209.84	48.45	40.4	23.1
1.5	Institutional Strengthening(IS)	106.41	177.01	175.94	165.3	99.4
1.6	Strategic Information Management System(SIMS)	17.05	29.10	13.84	81.2	47.6
1.7	Lab Services(LS)	16.24	18.67	10.95	67.4	58.7
	Sub- Total	497.70	813.57	550.14	110.5	67.6
3	Care, Support & Treatment(CST)	114.07	170.63	112.38	98.5	65.9
4	Integrated Counselling and Testing Centre(ICTC)	382.82	443.25	403.71	105.5	91.1
	TOTAL (1+2+3+4)	1760.53	2475.79	1753.40	99.6	70.8

AUDIT REPORT



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AUDITOR'S REPORT

The Project Director Assam State AIDS Control Society Khanapara Guwahati-781022 <u>Assam</u>

We have audited the accompanying financial statements of **ASSAM STATE AIDS CONTROL SOCIETY** in respect of **CST FUND** as at March 31, 2017 and Income & Expenditure Account and Receipts & Payments Account for the year ended on that date annexed thereto.Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with standards on Auditing issued by the Institute of Chartered Accontants of India. Those Standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material mis-statement. An audit includes examining, on a test basis, evidence supporting the amounts, review of internal controls and disclosure in the financial statements. An audit also includes assessing the accouting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements, read with observation in Annexure-I, give a true and fair view of the Sources and Application of Funds and the financial position of CST FUND of ASSAM STATE AIDS CONTROL SOCIETY, GUWAHATI, ASSAM for the year ended March 31, 2017, in accordance with consistency applied accounting standards.

In addition, (a) with respect of IFRs, adequate supporting documentation have been maintained to support the IFRs, (b) which expenditure are eligible for financing under the Credit/Grant Agreement (c) procurement of goods and services has been carried out as per the procurement manual issued by NACO,GOI and NGO/CBO Guidelines.

Dated : Guwahati The 26th December, 2017



For and on behalf of N. C. DAS & CO. Chartered Accountants.

CA. SOURAV DAS <u>Partner.</u> Membership No. 305185

12,234,941.00 9,848,933.48 1,652,354.00 Page 1 of 5 Figures for the current Period (Rs.) 23,736,228.48 Schedule Reference 0301 0401 02 **Project Director** CURRENT ASSETS, LOANS AND ADVANCES 3,403,443.00 LOANS AND ADVANCES ASSETS CURRENT ASSETS For The Period From : 01-Apr-2016 To :31-Mar-2017 12,084,941.00 FIXED ASSETS National AIDS Control Project - Phase IV Khanapara Guwahati-22, Guwahati - 781022 2,133,943.01 17,622,327.01 Figures for the previous Period (Rs.) Assam SACS - CST **Balance Sheet** FC/FM/FO 80,324.00 0.00 Figures for the current Period (Rs.) 12,234,941.00 23,736,228.48 11,420,963.48 Schedule Reference 0501 05a 10 Printed : System Administrator on 17/02/2018 12:58:58 from 1203 CURRENT LIABILITIES AND PROVISIONS LIABILITIES CURRENT LIABILITIES FIXED ASSET FUND Auditor GENERAL FUND 16,143.00 Figures for the previous Period (Rs.) 5,507,553.01 13,690.00 12,084,941.00 (For the Location) 17,622,327.01 N°CO

NCO

Assam SACS - CST

Khanapara Guwahati-22, Guwahati - 781022

National AIDS Control Project - Phase IV

Income And Expenditure Account

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the previous Period (Rs.)	EXPENDITURE	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	INCOME	Schedule Reference	Figures for the current Period (Rs.)
40,900.00	40,900.00 Kits and Other Lab Supplies	90	0.00	101,184.00	101,184.00 Other Income	28	80,189.00
265,575.00 Medicines	Medicines	07	0.00	9,006,379.00	9,006,379,00 Grants utilised to the extent of revenue		10,999,589.53
303,469.00	Training and Workshops	80	261,925.00		experimence		
7,981,657.00	7,981,657.00 Salary (Pay and Allowances)	13	10,278,702.00				
515,962.00	515,962.00 Operational Expenses	15	539,151.53				
9,107,563.00			11,079,778.53	9,107,563.00			11,079,778.53

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Assam SACS - CST

Khanapara Guwahati-22 , Guwahati - 781022

NCO

National AIDS Control Project - Phase IV

Receipt And Payment Account

Figures for the previous Period (Rs.)	RECEIPTS	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	PAVMENTS	Schedule Reference	Figures for the current Period (Rs.)
	Opening Balance:			4,719,199.00	LOANS AND ADVANCES	17	353,877.00
00.0	Cash in hand		0.00	00.00		05a	13,690.00
4,428,864.01	Balance with Bank	30	2,133,943.01	32,214.00	CURRENT LIABILITIES	32	345.00
6,950.00	LOANS AND ADVANCES	17	0.00	40,900.00	Kits and Other Lab Supplies	18	0.00
8,172,000.00	GENERAL FUND	29	17,063,000.00	265,575.00	Medicines	19	0:00
13,690.00		05a	0.00	303,469.00	Training and Workshops	20	261,925.00
16,143.00	CURRENT LIABILITIES	32	64,526.00	5,109,198.00	Salary (Pay and Allowances)	25	8,796,847.00
101,184.00	Other Income	56	80,189.00	134,333.00	Operational Expenses	27	66,040.53
12,738,831.01			19,341,658.01		Closing Balance:		
				00.0	Cash in hand		0.00
				2,133,943.01	Balance with Bank	31	9,848,933.48
				12,738,831.01			19,341,658.01
	Pigures for the (Rs.) 0.000 4,428,864.01 6,950.000 13,690.000 16,143.000 101,184.000 101,134,000	RECEIPTS Popening Balance: Cash in hand Cash in hand Conns AND ADVANCES Conns And ADVANCE	RECEIPTS Copening Balance: Cash in hand Cash in hand Cash in hand Cash in hand Cash in hand Conns AND ADV ANCES CORRENT LIABILITIES CURRENT LIABILITIES Other Income	RECEIPTS Opening Balance: Cash in hand Balance with Bank LOANS AND ADVANCES Corrent FUND CURRENT LIABILITIES Other Income	RECEIPTS Opening Balance: Cash in hand Balance with Bank LOANS AND ADVANCES Corrent FUND CURRENT LIABILITIES Other Income Other Income	Image: control band band band band band band band band	LowSchedult RECEIPTSSchedult SchedultFigures for the curret FeriddFigures for the prosideFigures for the PAYNENTSOpoining Balance:X.B.X.A.X.719,199.00LOANS AND ADVANCES1Cash in hand304,719,199.00LOANS AND ADVANCES1Balance with Bank302,133,943.013,2,214.001Balance with Bank302,133,943.013,2,214.001Balance with Bank302,133,943.013,2,214.001Balance with Bank304,090.00Kis and Oher Lab Supplies1Balance0.0030,469.00265.75.00Medicins1CURRENT LABILITIES3264,550.003,09.100Silang for yand Allowances)0Oher Income5,00.138.0030,469.00Cash in hand0,000Oher Income13,433.010,09Cash in hand0Oher Income13,433.0113,433.01Oher Balance0Oher Income19,314.65.00Cash in hand2,133,43.010Oher Income19,314.65.00Cash in hand2,133,43.010Oher Income19,314.65.00Cash in hand2,133,43.010Oher Income13,33.04.01Balance with Bank1113,33.04.01Cash in hand1112,133,43.01Balance with Bank1112,133,43.01Balance with Bank11112,133,43.011<

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2nd Floor, Goswami Building, S.C. Goswami Road, Panbazar, Guwahati - 781001, Assam Phone : 0361-2545625 (O) 98648 83820 (M) E-mail : nc_das11@rediffmail.com sdasghy781018@gmail.com

AUDITOR'S REPORT

The Project Director Assam State AIDS Control Society Khanapara Guwahati-781022 Assam

We have audited the accompanying financial statements of **ASSAM STATE AIDS CONTROL SOCIETY** in respect of **ICTC FUND** as at March 31,2017 and Income & Expenditure Account and Receipts & Payments Account for the year ended on that date annexed thereto .Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material mis-statement. An audit includes examining, on a test basis, evidence supporting the amounts, review of internal controls and disclosure in the financial statements. An audit also includes assessing the accouting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements, read with observation in Annexure-I, give a true and fair view of the Sources and Application of Funds and the financial position of ICTC FUND of ASSAM STATE AIDS CONTROL SOCIETY, GUWAHATI, ASSAM for the year ended March 31, 2017, in accordance with consistency applied accounting standards.

In addition, (a) with respect of IFRs, adequate supporting documentation have been maintained to support the IFRs, (b) which expenditure are eligible for financing under the Credit/Grant Agreement (c) procurement of goods and services has been carried out as per the procurement manual issued by NACO,GOI and NGO/CBO Guidelines. RED ACCOUNTANTS

Dated : Guwahati The 26th December, 2017



Chartered Accountants. Source Das CA. SOURAV DAS

For and on behalf of N. C. DAS & CO.

CA. SOURAV DAS Partner. Membership No. 305185



Assam SACS - ICTC

Khanapara Guwahati-22, Guwahati - 781022

National AIDS Control Project - Phase IV

Balance Sheet

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the previous Period (Rs.)	LIABILITIES	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	ASSETS	Schedule Reference	Figures for the current Period (Rs.)
982,268.74	982,268.74 GENERAL FUND	01	5,149,044.36	2,686,321.00	2,686,321.00 FIXED ASSETS	02	2,686,321.00
	CURRENT LIABILITIES AND PROVISIONS				CURRENT ASSETS, LOANS AND ADVANCES		
220,262.00	CURRENT LIABILITIES	0201	415,376.00	393,568.74	CURRENT ASSETS	0301	4,775,550.36
70,403.00		05a	48,406.00	879,365.00	LOANS AND ADVANCES	0401	837,276.00
2,686,321.00	FIXED ASSET FUND		2,686,321.00				
3,959,254.74			8,299,147.36	3,959,254.74			8,299,147.36

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Auditor

FC/FM/FO

Project Director

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Assam SACS - ICTC

Khanapara Guwahati-22, Guwahati - 781022

National AIDS Control Project - Phase IV

Income And Expenditure Account

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the		Schedule	Figures for the	Figures for the		Schedule	Figures for the
previous reriou (Rs.)	EXPENDITURE	Reference	current reriou (Rs.)	previous reriou (Rs.)	INCOME	Reference	current reriou (Rs.)
39,879.00	39,879.00 Kits and Other Lab Supplies	90	00.0	174,661.06	174,661.06 Other Income	28	203,809.82
159,683.00	159,683.00 Training and Workshops	08	000	41,879,544.34	41,879,544.34 Grants utilised to the extent of revenue		40,158,224.38
37,099,502.00	37,099,502.00 Salary (Pay and Allowances)	13	38,909,371.00		expenditure		
4,653,595.00	4,653,595.00 Maintenance Costs	14	1,441,995.00				
101,546.40	101,546.40 Operational Expenses	15	10,668.20				
42,054,205.40			40,362,034.20	42,054,205.40			40,362,034.20

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Assam SACS - ICTC

Khanapara Guwahati-22 , Guwahati - 781022

National AIDS Control Project - Phase IV

Receipt And Payment Account

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the previous Period (Rs.)	RECEIPTS	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	PAVMENTS	Schedule Reference	Figures for the current Period (Rs.)
	Opening Balance:			572,302.00	LOANS AND ADVANCES	17	255,000.00
00.0	Cash in hand		0:00	00.00		05a	21,997.00
6,601,856.08	Balance with Bank	30	393,568.74	99,803.00	CURRENT LIABILITIES	32	0.00
35,758,000.00	35,758,000.00 GENERAL FUND	29	44,325,000.00	39,879.00	Kits and Other Lab Supplies	18	0.00
70,403.00		05a	0.00	150,604.00	Training and Workshops	20	0.00
64,145.00	64,145.00 CURRENT LIABILITIES	32	195,114.00	37,099,502.00	37,099,502.00 Salary (Pay and Allowances)	25	38,909,371.00
174,661.06	174,661.06 Other Income	56	203,809.82	4,211,860.00	Maintenance Costs	26	1,144,906.00
42,669,065.14			45,117,492.56	101,546.40	Operational Expenses	27	10,668.20
					Closing Balance:		
				00.00	Cash in hand		0.00
				393,568.74	Balance with Bank	31	4,775,550.36
				42,669,065.14			45,117,492.56

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AUDITOR'S REPORT

The Project Director Assam State AIDS Control Society Khanapara Guwahati-781022 Assam

We have audited the accompanying financial statements of **ASSAM STATE AIDS CONTROL SOCIETY** in respect of **NEW DBS FOR NACP-IV** as at March 31,2017 and Income & Expenditure Account and Receipts & Payments Account for the year ended on that date annexed thereto. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with standards on Auditing issued by the Institute of Chartered Accontants of India. Those Standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material mis-statement. An audit includes examining, on a test basis, evidence supporting the amounts, review of internal controls and disclosure in the financial statements. An audit also includes assessing the accouting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements, read with observation in Annexure-I, give a true and fair view of the Sources and Application of Funds and the financial position of **NEW DBS FOR NACP-IV** of **ASSAM STATE AIDS CONTROL SOCIETY, GUWAHATI, ASSAM** for the year ended March 31, 2017, in accordance with consistency applied accounting standards.

In addition, (a) with respect of IFRs, adequate supporting documentation have been maintained to support the IFRs, (b) which expenditure are eligible for financing under the Credit/Grant Agreement (c) procurement of goods and services has been carried out as per the procurement manual issued by NACO,GOI and NGO/CBO Guidelines.

Dated : Guwahati The 26th December, 2017



CA. SOURAV DAS Partner. Membership No. 305185

For and on behalf of N. C. DAS & CO. Chartered Accountants.



Assam SACS - New DBS for NACPIV

Khanapara Guwahati-22 , Guwahati - 781022

National AIDS Control Project - Phase IV

Balance Sheet

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the previous Period (Rs.)	LIABILITIES	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	ASSETS	Schedule Reference	Figures for the current Period (Rs.)
23,432,104.13	23,432,104.13 GENERAL FUND	01	51,088,482.31	42,740,947.00	42,740,947.00 FIXED ASSETS	02	43,792,689.00
	CURRENT LIABILITIES AND PROVISIONS				CURRENT ASSETS, LOANS AND ADVANCES		
393,169.00	CURRENT LIABILITIES	0201	470,988.00	19,353,302.13	CURRENT ASSETS	0301	45,832,968.31
76,429.00		05a	112,720.00	4,548,400.00	LOANS AND ADVANCES	0401	5,839,222.00
42,740,947.00	FIXED ASSET FUND		43,792,689.00				
66,642,649.13			95,464,879.31	66,642,649.13			95,464,879.31

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Auditor

FC/FM/FO

Project Director

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Assam SACS - New DBS for NACPIV

Khanapara Guwahati-22, Guwahati - 781022

National AIDS Control Project - Phase IV

Income And Expenditure Account

For The Period From : 01-Apr-2016 To :31-Mar-2017

E Figures for the current Period ce (Rs.)	1,348,815.00	52,648,879.82						53,997,694.82
Schedule Reference	28							
INCOME	637,804.00 Other Income	54,400,681.65 Grants utilised to the extent of revenue	experimence					
Figures for the previous Period (Rs.)	637,804.00	54,400,681.65						55,038,485.65
Figures for the current Period (Rs.)	4,785,095.00	895,597.00	10,634,739.00	31,660,369.00	1,469,259.00	4,552,635.82	8,085.00	53,997,694.82
Schedule Reference		90	08	13	14	15	NULL	
EXPENDITURE	5,153,253.00 IEC	2,305,083.00 Kits and Other Lab Supplies	2,010,426.00 Training and Workshops	36,543,329.00 Salary (Pay and Allowances)	948,622.00 Maintenance Costs	8,077,772.65 Operational Expenses		

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Assam SACS - New DBS for NACPIV

Khanapara Guwahati-22, Guwahati - 781022

National AIDS Control Project - Phase IV

Receipt And Payment Account

For The Period From : 01-Apr-2016 To :31-Mar-2017

Opening Balance: 0.00 Cash in hand 0.00 Imprest Account 20,195,600.78 Balance with Bank 53,214,000.00 GENERAL FUND 76,429.00 GENERAL FUND	RECEIPTS	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	PAYMENTS	Schedule Reference	Figures for the current Period (Rs.)
0.000 Cash in hand 0.00 Imprest Account 20,195,600.78 Balance with Bank 53,214,000.00 GENERAL FUND 76,429.00 O				1,269,832.00	LOANS AND ADVANCES	17	4,202,946.00
0.00 Imprest Account 20,195,600.78 Balance with Bank 53,214,000.00 GENERAL FUND 76,429.00 GENERAL FUND			0.00	1,192,167.00	FIXED ASSETS	16	1,051,742.00
20.195.600.78 Balance with Bank 53,214,000.00 GENERAL FUND 76,429.00			0.00	258,791.00	CURRENT LIABILITIES	32	55,343.00
53,214,000.00 GENERAL FUND 76,429.00		30	19,353,302.13	2,221,083.00	Kits and Other Lab Supplies	18	730,597.00
76,429.00		29	81,357,000.00	1,918,926.00	Training and Workshops	20	10,334,437.00
		05a	36,291.00	36,543,329.00	Salary (Pay and Allowances)	25	31,678,369.00
137,642.00 CURRENT LIABILITIES	IES	32	133,162.00	652,095.00	Maintenance Costs	26	326,746.00
0.00 Salary (Pay and Allowances)	ances)	41	18,000.00	6,751,357.65	Operational Expenses	27	4,015,466.82
613,804.00 Other Income		56	1,348,815.00	00.00		NULL	8,085.00
74,237,475.78			102,246,570.13	4,076,593.00	IEC		4,017,955.00
					Closing Balance:		
				00.0	Cash in hand		0.00
				00.0	Imprest Account		0.00
				19,353,302.13	Balance with Bank	31	45,832,968.31
			- 1	74,237,475.78			102,246,570.13

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AUDITOR'S REPORT

The Project Director Assam State AIDS Control Society Khanapara Guwahati-781022 <u>Assam</u>

We have audited the accompanying financial statements of **ASSAM STATE AIDS CONTROL SOCIETY** in respect of **TI POOL FUND** as at March 31, 2017 and Income & Expenditure Account and Receipts & Payments Account for the year ended on that date annexed thereto. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material mis-statement. An audit includes examining, on a test basis, evidence supporting the amounts, review of internal controls and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements, read with observation in Annexure-I, give a true and fair view of the Sources and Application of Funds and the financial position of **TI POOL FUND OF ASSAM STATE AIDS CONTROL SOCIETY, KHANAPARA, GUWAHATI-22 (ASSAM)** for the year ended March 31, 2017, in accordance with consistency applied accounting standards.

In addition, (a) with respect of IFRs, adequate supporting documentation have been maintained to support the IFRs; (b) which expenditures are eligible for financing under the Credit/Grant Agreement (c) procurement of goods and services has been carried out as per the procurement manual issued by NACO, GOI and NGO/CBO Guidelines.

DATED : GUWAHATI The 26th December, 2017.

N. C. DAS & CO. Chartered Accountants. DAS & GUWAHAT 1 Das do PH. 0361 CA. SOURAV DAS 2545625 Partner. Membership No. 305185

For and on behalf of



Assam SACS - TI POOL FUND

Khanapara Guwahati-22, Guwahati - 781022

National AIDS Control Project - Phase IV

Balance Sheet

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the previous Period (Rs.)	LIABILITIES	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	ASSETS	Schedule Reference	Figures for the current Period (Rs.)
7,247,322.92	7,247,322.92 GENERAL FUND	01	44,424,799.92	133,650.00	133,650.00 FIXED ASSETS	02	109,016.00
	CURRENT LIABILITIES AND PROVISIONS				CURRENT ASSETS, LOANS AND ADVANCES		
1,952.00	CURRENT LIABILITIES	0201	10,489.00	5,367,220.92	CURRENT ASSETS	0301	29,974,178.92
00.0		05a	490.00	1,882,054.00	LOANS AND ADVANCES	0401	14,461,600.00
133,650.00	FIXED ASSET FUND		109,016.00				
7,382,924.92			44,544,794.92	7,382,924.92			44,544,794.92

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Auditor

FC/FM/FO

Project Director

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Assam SACS - TI POOL FUND

Khanapara Guwahati-22, Guwahati - 781022

National AIDS Control Project - Phase IV

Income And Expenditure Account

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the previous Period (Rs.)	EXPENDITURE	Schedule Reference	Figures for the current Period (Rs.)	Figures for the previous Period (Rs.)	INCOME	Schedule Reference	Figures for the current Period (Rs.)
56,273,924.00	56,273,924.00 Training and Workshops	80	65,731,252.00	364,013.92	364,013.92 Other Income	28	1,028,274.00
0.00	0.00 NGO Services	11	1,748,491.00		58,524,430.08 Grants utilised to the extent of revenue		67,681,157.00
2,532,445.00	2,532,445.00 Salary (Pay and Allowances)	13	1,191,401.00		expenditure		
82.075.00	82.075.00 Operational Expenses	15	38,287.00				
58,888,444.00			68,709,431.00	58,888,444.00			68,709,431.00

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Assam SACS - TI POOL FUND

Khanapara Guwahati-22 , Guwahati - 781022

National AIDS Control Project - Phase IV

Receipt And Payment Account

For The Period From : 01-Apr-2016 To :31-Mar-2017

Figures for the previous Period		Schedule	Figures for the current Period	Figures for the previous Period		Schedule	Figures for the current Period
(Rs.)	RECEIPTS	Reference	(Rs.)	(Rs.)	PAYMENTS	Reference	(Rs.)
	Opening Balance:			34,122,412.00	34,122,412.00 LOANS AND ADVANCES	17	66,742,169.00
0.00	Cash in hand		0.00	133,650.00	133,650.00 FIXED ASSETS	16	0.00
4,884,591.00	Balance with Bank	30	5,367,220.92	21,347,433.00	21.347,433.00 Training and Workshops	20	11,688,149.00
0.00	FIXED ASSETS	16	24,634.00	0.00	NGO Services	23	1,628,971.00
57,534,000.00	GENERAL FUND	29	104,834,000,00	1,855,145.00	1,855,145.00 Salary (Pay and Allowances)	25	1,191,401.00
0.00		05a	490.00	00.0	0.00 Operational Expenses	27	38,287.00
1,952.00	1,952.00 CURRENT LIABILITIES	32	8,537.00		Closing Balance:		
405,317.92	405,317.92 Other Income	56	1,028,274.00	0.00	Cash in hand		0.00
62,825,860.92			111,263,155.92	5,367,220.92	Balance with Bank	31	29,974,178.92
				62,825,860.92			111,263,155.92

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