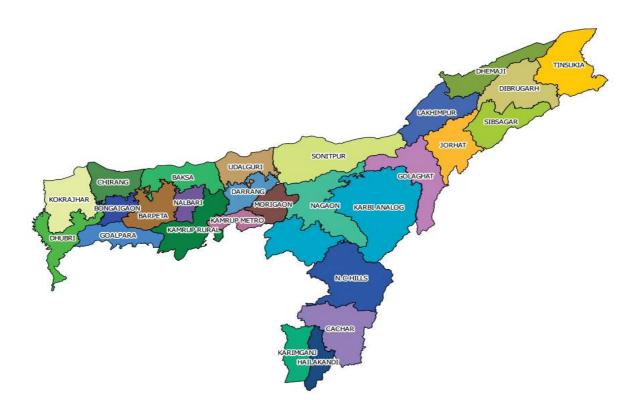
DISTRICT HID/AIDS EPIDEMIOLOGICAL PROFILES

Developed using data triangulation

Assam Factsheet 2014





Assam State AIDS Control Society

Khanapara, Guwahati-22

Foreword

The National AIDS Control Programme (NACP) is strongly evidence-based and evidence-driven. Based on evidence from 'Triangulation of Data' from multiple sources and giving due weightage to vulnerability, the organizational structure of NACP has been decentralized to identified districts for priority attention.

The programme has been successful in creating a robust database on HIV/AIDS through the HIV Sentinel Surveillance system, monthly programme reporting data and various research studies. However, the district level focus of the programme demands consolidated information that helps better understand HIV/AIDS scenario in each district, to enable effective targeting of prevention and treatment interventions to the vulnerable population groups and geographic areas.

This technical document prepared by the SIMU division of Assam SACS is a follow up exercise of the detailed District epidemiological profiles report 2013 prepared using the information collected and analyzed during the data triangulation exercise conducted during 2011-12. The 2013 report provided useful information support to the district level health functionaries but at the same time we were informed that a concise report will be even better. So, keeping this in mind, the 2014 report is being prepared in a factsheet format which is adapted from the District Epidemiological factsheets prepared by NACO and using updated information. The reports are prepared by some of the ICTC, PPTCT, Blood bank and STI counselors who are supported by a group of Public Health experts from medical colleges and state programme officials and we are grateful to each of them for their support in this activity. We also thank the Monitoring and Evaluation (M&E) division of NACO for their guidance in implementing this activity.

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Sonitpur District

Tinsukia District

Udalguri District

ACRONYMS

NACO	National AIDS Control Organization
NACP	National AIDS Control Programme
ASACS	Assam State AIDS Control Society
DAPCU	District AIDS Prevention and Control Unit
HSS	HIV Sentinel Surveillance
ICTC	Integrated Counseling and Testing Center
VCTC	Voluntary Counseling and Testing Center
РРТСТ	Preventing of Parent-to-child transmission
PLHIV	People Living With HIV/AIDS
ART	Anti-Retroviral Therapy
STI	Sexually transmitted infections
RTI	Reproductive Tract infections
GUD	Genital Ulcer Disease
FSW	Female Sex Worker
MSM	Men having sex with Men
IDU	Injecting Drug User
TI	Targeted Intervention

INTRODUCTION

The National AIDS Control Programme under National AIDS Control Organization has a strong focus on district level planning, implementation and monitoring of interventions for prevention and control of HIV/AIDS. This approach requires consolidated information for each district to understand the HIV epidemic scenario and to identify programme areas for priority attention.

During the past few years, greater information related to HIV has become available for a substantial number of districts in the country in the form of monthly programme reports, mapping and size estimations of risk groups, data from HIV Sentinel Surveillance, behavioral surveys research studies, etc.In view of this context, the Department of AIDS Control had undertaken a project titled "Epidemiological Profiling of HIV/ AIDS Situation at District and Sub-district Level using Data Triangulation"/"District Epidemiological Profiling (DEP)" in 25 states (539 districts) in two phases during 2009-10 and 2010-11.

The exercise of District Epidemiological Profiling involved two broad components – Descriptive Analysis and Data Triangulation. The former part is guided by thematic areas and describes the 'what, who, when & where' of the HIV epidemic, while the latter 'Triangulation' part explains the 'how and why' of it by synthesizing data from multiple sources into a meaningful framework. The available epidemiological data, behavioral/ vulnerability data and programme data for the district level were compiled and analyzed to get a comprehensive picture of the HIV/AIDS epidemic scenario, in order to guide programme decisions appropriately in each district.

The important outcomes of the District Epidemiological Profiling exercise included the generation of reports describing the HIV profile and programme response in each district, identification of information gaps for planning strategic information activities, capacity building of district level personnel in data management, institutional strengthening and fostering linkages between programme units and academic institutions for addressing strategic information needs in the programme.

METHODOLOGY

Framework of District Epidemiological Profiling (DEP): DEP has two broad components Descriptive Analysis and Data Triangulation.

Components of District Profiling	What it Does?	Guiding Elements	Action To Do	Output
Descriptive Analysis	Describes (What? Who? When? Where?)	Themes	Analyze Data & Describe the Themes	Descriptive Section of District Report
Triangulation	Explains (How? Why?)	Questions	Triangulate Data & Answer the Questions	Synthesis Section of District Report

Descriptive analysis of different datasets is organized into the following four thematic areas :

1. Current state of HIV epidemic (levels, trends, differentials and burden of HIV; profile of PLHIV)

2. Drivers of the epidemic (size and profile of risk groups; vulnerabilities STI, risk behavior, Migration, contextual factors/regional vulnerabilities)

3. Programme response and gaps

4. Information gaps

Data Triangulation involves collective interpretation of the following three data elements. Triangulation may be of information on same data element from different data sources or of information on different data elements. Triangulation may be done in time or geographical plane.

1. Information on HIV and STIs in Different Population Groups (Epidemiological data)

2. Information on Vulnerabilities (Mapping &Behavioral data on Risk Groups, District Vulnerabilities)

3. Information on Programme Response (Programme data).

Notes on the Fact sheet

1.Each district fact sheet has two parts: a narrative part consisting of background along with a map, HIV epidemic profile and key recommendations, and a tabular part consisting HIV levels and trends, PLHIV profile, block-level details, vulnerabilities and programme response. While the narrative part gives an overview of the district HIV/AIDS profile, the table provides detailed information about the HIV/AIDS scenario in the district.

2. **'Background'** gives a brief overview of the district with respect to its geographic location, key demographic information like total population with male-female distribution, literacy status – based on 2011 Census. The section also describes the district characteristics or contextual factors that make it vulnerable to spread of HIV.

3. **'Epidemic profile'** describes the thematic areas mentioned above (under the data sources) for each district based on available information.

4. From DLHS-III, percentages of ever married women aged 15-49 years who have heard of HIV/AIDS and RTI/STI have been taken as awareness indicators among women for HIV and RTI/STI respectively.

5. **'Key recommendations'** is the final section of the factsheet where 'Triangulation' of data is attempted to highlight the key programme priorities for the district based on the HIV epidemic profile and programme gaps. Any future potential for spread of infection, if indicated by any information or results, is highlighted and appropriate action to address the situation is suggested. On the basis of this analysis, recommendations for improving existing programme and the need for initiation of new programmes, etc. are highlighted. The recommendation section also highlights information gaps, if any.

6. HIV positivity rates among HSS-ANC, PPTCT and Blood Bank attendees are used to represent levels and trends of HIV Infection among general population. Level is interpreted as high (HIV positivity \geq 1%), moderate (HIV positivity between 0.5-1%) or low (HIV positivity \leq 0.5%). HIV trend is interpreted as rising, stable or declining.

7. HIV positivity rates among HSS-HRG, HSS-STD and ICTC general clients are used to represent levels and trends of HIV Infection among high risk groups and vulnerable population. Level is interpreted as high (HIV positivity $\geq 10\%$), moderate (HIV positivity between 5-10%) or low (HIV positivity $\leq 5\%$). HIV trend is interpreted as rising, stable or declining.

8. HIV positivity among PPTCT and ICTC attendees at sub-district level wherever data is available is presented under block level details.

9. Size, demographic and risk profile of PLHIV in a district is inferred from three data sources: ICTC data, ART Registration data and data from the PLHIV Network in the district.

10. Information on major vulnerabilities that are influencing the epidemic/high risk behavior i.e. drivers of the epidemic is included under the "vulnerabilities" section. It includes:

a. Size and Profile of HRG

b. STIs – levels and trends

c. Migration patterns

d. District Vulnerabilities/ Contextual Factors

11. Information on size and profile (demographic or sub-typology) of HRG is available from mapping data. Size of HRG as a proportion of the districts population has been stated wherever available, for comparison purposes. The Taluks/Blocks with high concentration of different HRGs have been given under block level details, wherever available. Targeted Intervention (TI) targets and coverage of HRG population are also mentioned, wherever available under "HRG size".

12. Based on CMIS-STI data, number of episodes of STI/RTI managed using Syndromic approach and VDRL/RPR test results for syphilis in the district are given under "STI/RTI".

13. Wherever possible, an attempt has been made to describe the male out-migration patterns in the district based on Census 2001 data. The table also includes the proportion of male migrants going to other states (inter-state) along with top five destination districts.

14. The section on programme response describes the number of facilities offering HIV services under NACP and services provided in the district till 2012. This covers both prevention interventions and care, support and treatment interventions.

15. The district wise factsheets include updated information till 2013.Twonew districts with insufficient data namely, Baksa and Chirang are not included in this report

BARPETA

District Background:

Barpeta, a lower Assam District was carved out of erstwhile Kamrup District of Assam in July 1983. On 1st, June 2004, it lost part of territory to the newly-formed Baksa District. The district covers a geographical area of 3245 square kilometers, this district is bounded by an international border i.e. Bhutan Hills in the North, Nalbari District in the East, Kamrup and Goalpara in the South and Bongaigaon District in the west. The District consists of two –civil-Sub-Division,(1)Barpeta and (2) Bajali. The district has population of 16,93,190 with Barpeta has a sex ratio of 951 females for per 1,000 males, and literacy rate of 65.03%in (2011 Census) .The economy of the district is mainly dependent on agriculture.

HIV Epidemic Profile:

- Based on 2013 HSS- ANC the level of HIV positivity was low among the ANC Clients.
- Based on 2013 PPTCT (0.04%) and Blood Bank (0.00%) data, the level of HIV positivity was low among the general population with a stable trend during 2009 to 2013.
- In 2013, the level of HIV positivity among ICTC attendees (0.24%) was low with a stable trend during 2009-13.
- As per mapping conducted, FSW (350; 50%. of total HRG) and MSM (350; 50%) was the largest HRG in the district.
- In 2013, 2011 episodes of STI/RTI were treated and the syphilis positivity rate among STI clinic attendees was 0.00% with a declining trend during 2009-2013
- In 2013, according to the HRG typology 76.68% FSW were street based and 65.78% MSM wereKothi.
- As per the 2001Census, 4.44% of the male population was migrant population, among them 10.11% migrated to other states and 39.26% migrated to other districts within the state.
- The top three destinations for out-of-state migration were Uttar Pradesh, Delhi & Meghalaya.
- Total 192 PLHIV registered at the Anti-Retroviral Therapy (ART) centre, 9.37% were 15-24 years of age, 57.18% were on ART, 17.18% were illiterate and the major route of transmission in PLHAs is Heterosexual (83.85%).
- HIV and RTI/STI awareness rate among women was 48.7% and 22.9%, respectively (DLHS-III).

- Analysis of risk profile of positive individuals should be done to determine associated factors in HIV prevalence among general population.
- Focused on awareness programmes among migrant labours and bridge population (as the migration data shows).
- At present there is no TI NGO for truckers so those bridge populations is not covered in the district.

HIV levels and trends

		2009	2010	2011	2012	2013
	РР					0.00%
HSS-ANC	NT	-	-	-1	-	400
РРТСТ	РР	0	0.02%	0.04%	0.04%	0.04%
PPICI	NT	4589	6618	8080	10870	11587
Blood Bank	РР	0	0	0	0.27%	0
	NT	1066	1367	2218	3672	3867
		2006	2007	2008		
HSS-HRG	РР	-	-	-	-	-
пээ-пку	NT	-	-	-	-	-
HSS-STD	РР	-	-	-	-	-
п 5 5-51D	NT	-	-	-	-	-
		2009	2010	2011	2012	2013
ІСТС	PP	0.73%	0.37%	0.30%	0.27%	0.24%
	NT	1930	3794	4406	5109	6622
STI						
No. of STI episodes		1664	887	1289	1776	2011
Proportion(%) of GUD cases		5.80%	1.60%	1.70%	0.78%	0.70%
% Syphilis positivity		1.30%	0.07%	0.29%	0.19%	0.00%

PLHIV Profile						
				%	%	
	Total	% on ART	% 15-24	Illiterate	Female	
PLHIV	192	57.18%	9.37%	17.18%%	40.62%%	
		Route of trans	mission, ART	data		
			Blood	Needle	Parent to	
	Heterosexual	Homosexual	transfusion	syringe	child	Unknown
% of total						
(N=192)	83.85%	3.64%	0.52%	1.56%	1.56%	3.64%

Male Migration							
	Inter-state	Intra-state	Intra-district				
No. of Out-							
migration	38544	15139	19507				
migration :	Top three states for inter-state migration : Uttar Pradesh/Delhi/Meghalaya		tricts for intra- igration: ıbri/Golaghat				

		HRG	Size				
		FSW			MSM		IDU
Size estimate (mapping d 2009)	lata	350			350		0
% total HRG		50%			50%		0
% Total population		0.04%			0.04%		0
Programme coverage(20	13)	1200			400		0
Typology		Street based 76.68%, 22.13% home based,1.11%hotel/lodge based, 0.08%dhaba based		Kothi65.78%, panthi23.37%, doubledekar10.84%		, 0,	0
		Programn	ne Respons	se			
	2007	2008	2009	2010	2011	2012	2013
ICTC	1	3	3	3	3	3	3
No. tested in ICTC	1122	4925	1930	3794	4406	5109	6622
PPTCT	1	1	1	1	1	1	1
No. tested in PPTCT	554	4925	4589	6618	8080	10870	11587
STI Clinics	NA	1	1	1	1	1	1
ART center	NA	NA	NA	NA	NA	NA	1
Link ART center	NA	NA	NA	NA	NA	NA	NA
FSW TIs	2	2	2	2	2	2	2
MSM TIs	NA	1	1	1	1	1	1
IDU TIs	NA	NA	NA	NA	NA	NA	NA
Composite TIs	NA	NA	NA	NA	NA	NA	NA
Red Ribbon clubs	NA	NA	NA	NA	NA	NA	NA
Blood Banks	1	1	1	1	1	1	1

BONGAIGAON

District Background:

Bongaigaon district is surrounded by Barpeta in the east, Goalpara in the south and Chirang in the north and west corner, Dhubri district in the west. The District has two sub Divisions: Bongaigaon and North Salmara. According to the 2011 census, Bongaigaon district has a population of 732,639 with a sex ratio of 961 females for every, 1000 males, and a literacy rate of 70.44%. The main religions are Hinduism (535,464), Islam (348,537) and Christianity (18,728). Both road (NH31 and NH31A) and N.F.Railway line passes through the district.

HIV Epidemic Profile:

- According to 2013 HSS-ANC data, the level of HIV positivity was low (0.00%) among the ANC attendee.
- In 2013, the level of HIV positivity was low among the PPTCT (0.10%) and Blood Bank (0.12%) clients, with a stable trend.
- Based on 2010 HSS data, the level of HIV positivity was low (0.39%) among FSWs, with a stable trend.
- In 2013, HIV positivity among ICTC attendees was low (0.40%) with a stable trend.
- In 2013, the syphilis positivity rate among STI clinic attendees was 0.18% and among the STI attendees, 0.76% reported with GUD cases.
- As per mapping conducted in 2009, FSW (577, 100% of total HRG) was the largest HRG in the district. Of the FSW 24.57% were home based and 75.42% were street based.
- As per 2001 census, 3.19% of the male population was out migration.
- The Top destination for interstate migration was West Bengal.
- In 2013, of the 174 PLHIV registered at the ART Centre, 76.43% were on ART, 14.36% were 15-24 years of age, 18.36% were illiterate and 39.65% were female.
- A total of two TIs were operational in the district in 2013.
- The HIV and RTI STI awareness rates were 38% and 47% respectively among women (DLHS-III).

- Generate awareness about HIV through campaigning among the truck halt points, Bus stand and Railway station in the district.
- Focused IEC for general population with HIV / STI awareness is recommended.
- TI projects should be started for MSM and IDU population in the district.
- Enhanced assessment of typology of FSWs and size and profile of the clients, including migrants and trucker will help in better understanding of district vulnerabilities.
- Focused IEC strategies for demand generation for ICTC and PPTCT services

HIV levels & Trends

		2009	2010	2011	2012	2013
	PP	-	-	0.50	-	0.00
HSS-ANC	NT	-	-	400	-	400
	РР	0.07	0.13	0.07	0.10	0.10
РРТСТ	NT	2687	5215	5458	5846	6796
	РР	0.27	0.00	0.00	0.10	0.12
Blood Bank	NT	737	827	1311	2921	4686
		2006	2007	2008		
	РР	0.00	0.39	0.00	-	-
HSS-HRG	NT	210	251	239	-	-
_		2009	2010	2011	2012	2013
	РР	0.82	0.56	0.61	0.51	0.4
ICTC	NT	2308	3686	4904	5421	7129
STI						
No. of STI						
episodes		282	826	902	1847	1701
Proportion(%)						
of GUD cases		0.35	0.96	1.77	2.43	0.76
% Syphilis		0.00	0.00	0.70	0.00	0.10
positivity		0.00	0.00	0.70	0.00	0.18

	Total	% on ART	% 15-24	% Illiterate	% Female		
PLHIV	174	76.43	14.36	18.39	39.65		
Route of transmission, ART data							
	Heterosexual	Homosexual	Blood transfusion	Needle syringe	Parent to child	Unknown	
% of							

HRG Size						
	FSW	MSM	IDU			
Size estimate (mapping data 2009)	577	NA	NA			
% total HRG	100	NA	NA			
% Total population	0.07	NA	NA			

HRG Size

Programme coverage(2013)	NA	NA	NA
	Home Based- 24.57%,Brothel Based-0%,Street		
Typology	Based-75.42%	NA	NA

Male Migration, 2001 census

	Inter-state	Intra-state	Intra-district
No. of Out- migration	19591	17505	12323
migration:	tates for inter-state Arunachal Pradesh, htra,Meghalaya.	1	stricts for intra-state migration: rup, Barpeta, Kokrajhar.

Programme Response

	2007	2008	2009	2010	2011	2012
ICTC	1	2	2	2	2	2
No. tested in ICTC	1619	3467	2308	3686	4904	5421
PPTCT	1	1	1	1	1	1
No. tested in PPTCT	440	1622	2687	5215	5458	5846
STI Clinics	0	0	1	1	1	1
ART center	0	0	0	0	0	0
Link ART center	0	0	1	1	1	1
FSW TIs	1	1	1	2	2	2
MSM TIs	0	0	0	0	0	0
IDU TIs	0	0	0	0	0	0
Composite TIs	0	0	0	0	0	0
Red Ribbon	0	0	2	2	2	2
clubs Blood	0	0	2	Z	Ζ	
Blood Banks	2	2	2	2	2	2

CACHAR

Background:

Cachar district lies in the southern side of Assam. It Shares its border with Hailakandi&Karimganj districts. As per 2011 census, the total population of the districts is 1,469,696 with the sex ratio of 945 females per 1000 males. The epidemic vulnerability include social andpolitical unrest leading to migration, high deployment of defense personal, heavy traffic of long distance truckers and several halting points in the district as key train station connects Mizoram & Manipur, two high HIV prevalence states.

HIV Epidemic Profile:

- HSS-ANC data 2013 shows that the level of HIV prevalence among the ANC attendees is moderate (0.50%). PPTCT data shows a increasing trend in HIV positivity among the pregnant women during 2009 to 2013.
- As per HSS HRG and HSS STD data, the level of HIV prevalence among the HRG and vulnerable populations is low in Cachar district. ICTC data shows a stable trend in HIV positivity during 2009-13.
- FSW (76.92%) is the predominant typology of HRG in the district.
- 2800 episodes of STI/RTI were treated during 2013. The syphilis positivity in the district is showing a declining trend.
- The ART data shows that 90.9% of HIV positivity is occurred due to sexual intercourse only where as it is 2.5% among the PPTCT client and 1.2% through blood transfusion.
- The migration data shows that maximum inter-state migration has occurred from neighbor state like Mizoram, Meghalaya & Nagaland by which the district has shared its state border.

- To create awareness on sex and sexual diseases as 90.9% HIV transmit through sexual intercourse only.
- Analysis of the profile of bridge population is essential as there is a increasing trend in HIV positivity among the ANC attendees.
- MSM TI project can be run as there is a good number of MSM population in the district.
- The number of Red Ribbon club must increase for voluntary blood donation as the district is sharing its medical facilities along with its neighbor states like Tripura, Mizoram and Manipur.

	111 V		LVELA	INE	UD S						
			2009	2	010	2	011	2	2012	/	2013
	PP						0%		-	().5%
HSS-ANC	NT						398				400
	PP	0	0.32%	0.	.2%	0.	19%	0.	19%	0	.17%
РРТСТ	NT		3785	7	554	1	1510	12	2166	1	2614
Blood Bank	РР	C).08%	0.	09%	0.	17%	0.	.14%	0	.07%
	NT	1	0759	13	960	10	5911	1′	7698	1	9554
			2006	2	007	2	008				
HSS-HRG	PP		-	()%	0	.8%		-		-
пээ-пко	NT		-		250		221		-		-
HSS-STD	PP		2%	3.	.6%		.4%		-		-
1155-51D	NT		250		250		224		-		-
			2009		010		011		2012		2013
ICTC	PP		.65%		3.75%		3.09%		46%		.29%
	NT		3590	5	870	9	461	8	3936		9845
STI											
No. of STI episodes			996	6	596	1	752	2	256		2800
Proportion(%) of GUD cases			89		07		138		84		-
% Syphilis positivity		1	.42%	0.	83% 1.60		60%	1.	.27%		-
			PLHIV I	Profil	e						
			Tota	.1	% on 1	ART	% 15-24	4	% Illit erat e	%	Female
PLHIV											
Route of transmission, ART data											
	Heterosexual		Homosex	cual	Blo transf		Needle syringe		Parent to chi		Unkn own
% of total (N=)	88.31%		2.59%)	1.2	%	0		2.5%	%	2.5%

	HRG Size		
	FSW	MSM	IDU
Size estimate (mapping data 2009)	450	487	-
% total HRG	76.92%	6.59%	16.48%
% Total population	0.09%	0.008%	0.02%
Programme coverage(2013)	1400	120	300

Typology	Home based: 226, Brothel based: 67& Street based:884-
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Male Nagaon(2001 census)									
	Inter-state	Intra-state	Intra-district						
No. of Out-									
migration	7356	5508	9663						
Mizora	m,		N.C. Hills.						
Nagalar	nd,		Kamrup						
Meghala	iya.		Hailakandi.						
	-								

	F	Programme	Respon	se			
	2007	2008	2009	2010	2011	2012	2013
ICTC	1	2	3	3	3	3	3
No. tested in ICTC	843	6592	9312	5870	9461	8936	9845
РРТСТ	1	1	1	1	1	1	1
No. tested in PPTCT		569	3785	7554	11510	12166	12614
STI Clinics	1	1	1	1	1	1	1
ART centre	1	1	1	1	1	1	1
Link ART centre	-	-	-	-	-	-	-
FSW TIs	1	2	2	2	2	2	2
MSM TIs	-	-	-	-	-	-	-
IDU TIs			1	1	1	1	1
Composite TIs	-	-	-	-	-	-	-
Red Ribbon clubs	-	-	-	-	-	-	-
Blood Banks	2	3	2	2	2	2	2

DARRANG

Background:

Darrang consists of a narrow strip of plain lying between Himalayas and Brahmaputra river in the north-west part of Assam. The name of Darrang was derived from the Bodo word Dourang, which means" Lilabhumi"ofGods.As per 2011 census, total population of the district is 908090. The district vulnerability includes the state highway, trucker halting points, etc.

HIV Epidemic Profile:

- Based on 2013 data, the level of HIV positivity was low among the PPTCT (0.05%) and the Blood Bank (0.35%), with a stable trend noted during 2009-2013.
- Based on 2013 data, HIV positivity among ICTC attendees was (0.59%). The trend of positivity was almost stable since 2009 to 2013.
- As per HRG HSS data, a rising trend in HIV prevalence is noted among FSWs in the district.
- As per mapping conducted in the year 2009 FSW 809 no. clients was covered ; 0.08% of total population) followed by home-based, 38.1%, Street base 82.96% and 30.16% were lodge base.
- In 2013, 1605 STI/RTI episodes were treated in the district and Syphilis and GUD cases are showing a declining tread in the district during 2009 to 2013.
- •Based on 2013, 77 nos. PLHIV registered at the Anti-Retroviral Therapy (ART) centre, 6.4% were15-24 years of age, 45% were on ART, 24.67% were in illiterate and 35% in female.
- As per 2011 census 2.57% of total population was male migration followed by 0.12% out state, 0.67% interstate and 1.78% intra district migration.

- There is a need to better understand the profile and dynamics of blood donor in Blood Bank.
- Analysis of risk profile of positive individuals should be done to determine associated factors in HIV prevalence among general population.
- Strengthen outreach programmers through awareness campaigns among migrates and among FSW in the district.

HIV LEVEL & IKENDS												
			2	009	20	10	201	1	20	12	20	013
		PP	1	NA	N	4	0		0)		0
HSS-ANC		NT	1	NA	N	4	400)	N	A	4	00
		РР	0.	06%	0.04	4%	0.049	%	0.0	1%	0.0)5%
РРТСТ		NT	4	815	56	73	6740)	68	65	71	794
		РР		0	0		0		0.0	3%	0.3	35%
Blood Bank		NT	2	883	35'	78	3829	9	38	49	3	123
			2	006	200)7	2008	8				
		PP	1.	03%	1.03	3%	1.529	%				
HSS-HRG		NT	2	250	25	0	227	,				
		РР	1	NA	N	4	NA					
HSS-STD		NT	1	NA	N	4	NA					
			2	009	20	10	201	1	20	12	20)13
		РР	0.	53%	0.22	2%	0.429	%	0.62	2%	0.5	59%
ICTC		NT	1	498	232	22	3570	5	2573		33	398
STI												
No. of STI episod	es		1	419	178	85	1412	2	12	91	10	505
Proportion(%) of cases	GUD		1.	69%	0.33	3%	0		0)		0
% Syphilis positiv	vity		1.4	45%	0.08	8%	0		0)		0
			I	PLHIV	Profil	e						
		Total	C	% on A	RT	% 1	5-24	%	Illiter	ate		% nale
PLHIV		77		45%		6.4	40%		24.67%	⁄0	3:	5%
		Route	of t	ransmi	ission,	ART	data					
		Heterosex	ual	Home	osexual		lood sfusion		edle	Par to cl		Unk now n
% of total (N=77)		88.31%)	2.5	59%	1.	20%		0	2.5	5%	2.50 %

HRG Size									
FSW MSM IDU									
Size estimate (mapping data 2009)	809	NA	NA						
% total HRG	100%	NA	NA						
% Total population	0.08%	NA	NA						

D (2012)	1000		
Programme coverage(2013)	1000	NA	NA
Туроlоду	home based	d 38.16%, Street b lodge based 30.1	

	Male Migration (2011 census)									
	Inter-state	Intra-state	Intra-district							
No. of Out- migration	1143	6087	16187							
Arunachal, Me	ghalaya,Delhi	Kamrup	, SonitpurDhemaji							

	Pro	gramm	e Respoi	nse			
	2007	2008	2009	2010	2011	2012	2013
ICTC	1	1	1	1	1	1	1
No. tested in ICTC	NA	NA	1498	2322	3576	2573	3398
PPTCT	1	1	1	1	1	1	1
No. tested in PPTCT	1	1	1	1	1	1	1
STI Clinics	NA	NA	1	1	1	1	1
ART centre	NA	NA	NA	NA	NA	NA	NA
Link ART centre	NA	NA	NA	NA	NA	NA	NA
FSW TIs	NA	NA	NA	NA	NA	NA	NA
MSM TIs	NA	NA	NA	NA	NA	NA	NA
IDU TIs	NA	NA	NA	NA	NA	NA	NA
Composite TIs	NA	NA	NA	NA	NA	NA	NA
Red Ribbon clubs	NA	NA	NA	NA	NA	NA	NA
Blood Banks	NA	NA	1	1	1	1	1

DHEMAJI

Background:

Dhemaji district is an administrative district in the state of Assam. The district headquarters are located at Dhemaji. The district occupies an area of 3237 km² and has a population of 6, 86,133 (as of 2011). It is one of the most remote districts of India, at the eastern-most part of Assam, situated in the foothills of the lower Himalayas. Being in a confluence of rivers with the mighty Brahmaputra River flanking the district and its numerous tributaries running through the district, the region is perennially affected by floods. Silapathar&SissiBorgaonis the main business places of Dhemaji. The Bogibeel river project is running nearest to these places.

HIV Epidemic Profile:

- Based on 2013,the level of HIV positivity was low among PPTCT (0.03%) with a stable trend in 2009 to 2013
- Based on 2013, the level of HIV positivity was low (0.18%) with a stable trend in 2009 to 2013.
- As per mapping conducted in the year 2009 FSW HRG (404) 0.06% of total population was covered in the district.
- In 2013, 1210 STI/RTI episodes were treated with 0% syphilis positivity, showing a declining trend in the last 5 years.
- In 2010, of the 14 PLHIV registered with the Anti-Retroviral Therapy (ART) Centre, 64.29% were on ART, 14.29% were 15-24 years of age, 21.43% were illiterate and 42.86% were female.
- As per 2001 Census, 3.92% male migration of the total population followed by 2.23% interstates, 0.61% inter districts and 1.09% intra district migration.
- The top three destinations for out-of-state migration were Arunachal Pradesh, Nagaland & West Bengal

- Since the highest HRG was FSW, assessment of the size and profile of FSW group will help to understand district vulnerabilities.
- Strengthen outreach programmes through awareness campaigns for general population in the district.

	1					
		2009	2010	2011	2012	2013
	РР	0.00	0.00	0.00	0.00	0.00
HSS-ANC	NT	0	0	400	0	400
	РР	0.00	0.00	0.02	0.06	0.03
РРТСТ	NT	3557	4353	5249	6288	7850
	РР	0.00	0.00	0.00	0.00	0.00
Blood Bank	NT	1224	1393	1497	1326	1377
		2006	2007	2008		
	РР	N/A	N/A	N/A		
HSS-HRG	NT	N/A	N/A	N/A		
	РР	N/A	N/A	N/A		
HSS-STD	NT	N/A	N/A	N/A		
		2009	2010	2011	2012	2013
	РР	0.04	0.00	0.16	0.27	0.18
ICTC	NT	2748	3864	4247	3688	4487
STI						
No. of STI						
episodes		901	936	1225	1225	1210
Proportion(%) of GUD cases		3.99	10.47	2.86	3.59	9.83
% Syphilis positivity		0	1.29	0.83	2.78	0

PLHIV Profile									
				%	%				
	Total	% on ART	% 15-24	Illiterate	Female				
PLHIV	14	64.29	14.29	21.43	42.86				
	R	oute of transm	ission, ART	data					
					Parent				
			Blood	Needle	to				
	Heterosexual	Homosexual	transfusion	syringe	child	Unknown			
% of total									
(N=14)	100	0	0	0	0	0			

HRG Size								
	FSW	MSM	IDU					
Size estimate (mapping data 2009)	404	0	0)				

% total HRG	100		
% Total population	0.06		
Programme coverage(2013)			
Typology	N/A	N/A	N/A

Male Migration (2001 census)								
	Inter-state	Intra-state	Intra-district					
No. of Out-migration	12729	3482	6217					
Arunachal Pradesh, Nag	-	ur, Sonitpur, 1sukia						

	Programme Response										
	2007	2008	2009	2010	2011	2012	2013				
ICTC	1	2	3	3							
No. tested in ICTC											
РРТСТ	0	1	1	1							
No. tested in PPTCT											
STI Clinics											
ART center											
Link ART center											
FSW TIs	1	1	1	1							
MSM TIs											
IDU TIs											
Composite TIs											
Red Ribbon clubs											
Blood Banks	1	1	1	1							

DHUBRI

District Background:

Dhubri district is situated at the west part of Assam. Dhubri district is bounded both by interstate and international borders, West Bengal and Bangladesh in the west, Goalpara and Bongaigaon district of Assam and Garo Hills district of Meghalaya in the east, Kokrajhar district in north and Bangladesh and state of Meghalaya in the south. According to the 2011 census, Dhubri district has a population of 1948632 with a sex ratio of 952 females for every, 1000 males, and a literacy rate of 59.36%. The largest religious groups in the district are the Muslims with 1,216,455(74.29%), While Hindus and Christians constitute 405,065 and 12,477 inhabitants respectively. The economy of Dhubri district mainly depends on agricultural products.

HIV Epidemic Profile:

- According to 2013 HSS-ANC data, the level of HIV positivity was low(0.00%) among the ANC attendee.
- In 2013, the level of HIV positivity was low among the PPTCT (0.03%) clients, with a stable trend.
- In 2013, HIV positivity among ICTC attendees was low (0.46%) with a stable trend.
- In 2013, the syphilis positivity rate among STI clinic attendees was 0.05% and among the STI attendees, 4.82% reported with GUD cases.
- As per mapping conducted in 2009, FSW (278,100% of total HRG) was the largest HRG in the district. Of the FSW 49.18% were home based and 33.60% were street based, 12.62% were Hotel based, and 4.59% were Dhaba based and IDU (57, 0.003% of total HRG).
- As per 2001 census, 2.76% of the male population was out migration.
- The Top destination for inter-state migration was Meghalaya, which was low prevalence state.
- In 2013, of the 133 PLHIV registered at the ART Centre,75.93% were on ART,12.03% were 15-24 years of age,9.77% were illiterate and 41.35% were female.
- A total of two TIs were operational in the district in 2013.
- The HIV and RTI STI awareness rates were 34.1% and 67.6% respectively among women (DLHS-III).

- Generate awareness about HIV through campaigning among the truck halt points, Bus stand and Railway station in the district.
- Focused IEC for general population with HIV / STI awareness is recommended.
- TI projects should be started for MSM and IDU population in the district.
- Enhanced assessment of typology of FSWs and size and profile of the clients, including migrants and trucker will help in better understanding of district vulnerabilities.
- Focused IEC strategies for demand generation for ICTC and PPTCT services.

		2009	2010	2011	2012	2013
	РР	NA	NA	NA	NA	0.00
HSS-ANC	NT	NA	NA	NA	NA	400
	РР	0.06	0.03	0.02	0.06	0.03
РРТСТ	NT	3307	6284	4590	4826	6489
	РР	0.00	0.00	0.00	0.00	0.00
Blood Bank	NT	2283	2739	3283	3467	2966
		2006	2007	2008		
	РР	NA	NA	NA	NA	NA
HSS-HRG	NT	NA	NA	NA	NA	NA
	РР	NA	NA	NA	NA	NA
HSS-STD	NT	NA	NA	NA	NA	NA
		2009	2010	2011	2012	2013
	РР	0.26	0.39	0.34	0.37	0.46
ICTC	NT	1514	3032	3463	3760	4947
STI						
No. of STI episodes		1651	968	1706	1894	2966
Proportion(%) of GUD cases		23.19	10.12	6.27	2.32	4.82
% Syphilis positivity		0.41	1.28	0.67	0.1	0.05

				%	%		
	Total	% on ART	% 15-24	Illiterate	Female		
PLHIV	133	75.93	12.03	9.77	41.35		
		Route of t	ransmission,	ART data	l		
			Blood	Needle	Parent		
	Heterosexual	Homosexual	transfusion	syringe	to child	Unknown	
% of							
total							
(N=133)	87.21	1.5	1.5	3.75	0.75		5.26

HRG Size							
	FSW	IDU					
Size estimate (mapping data 2009)	278	NA	57				

% total HRG	100	NA	100			
% Total population	0.01	NA	0.003			
Programme coverage(2013)	NA	NA	NA			
Typology	Home Based-49.18%, StreetBased 33.60%, Hotel Based 12.62%, DhabaBased- 4.59%					

Male Migration (2001 census)									
	Inter-state	Intra-state	Intra-district						
No. of Out-									
migration	43299	37956	27536						
Top three s	tates for inter-state	Top three districts for intra-state migration:							
migration :	Meghalaya, West	Kamrop, Goalpara, Bongaigaon.							
Ben	gal, Delhi.								

PROGRAMME RESPONSE

	2007	2008	2009	2010	2011	2012	2013
ICTC	1	1	1	2	2	2	2
No. tested							
in ICTC	1074	3205	1514	3032	3463	3760	4947
PPTCT	1	1	1	1	1	1	1
No. tested							
in PPTCT	762	1593	3307	6284	4590	4826	6489
STI							
Clinics	0	0	1	1	1	1	1
ART							
center	0	0	0	0	0	0	0
Link ART							
center	0	0	0	0	1	1	1
FSW TIs	1	1	1	1	2	2	2
MSM TIs	0	0	0	0	0	0	0
IDU TIs	0	0	0	0	0	0	0
Composite							
TIs	0	0	0	0	0	0	0
Red							
Ribbon							
clubs	0	0	2	2	2	2	2
Blood							
Banks	1	1	1	1	1	1	1

DIBRUGARH

Background:

Dibrugarh district is situated at the eastern part of Assam and southern bank of river Brahmaputra. The district is bounded by Dhemaji,Lakhimpur district on the north, Tinsukia district on the east and Sibsagar district on the west. Dibrugarh district is well linked by Road (N.H.-37), Railways (N.F. Railways), Airways (Mohanbari Airport) as well as waterways throughout the country. According to the 2011 census Dibrugarh District has a population of 13,27,748 with sex ratio of 925 females per every 1000 males. District covers a geographical area of 3381 Sq KM. The district is mainly covered by Tea gardens, Oil and Natural Gas Industries.

HIV Epidemic Profile:

- Based on 2013 HSS-ANC data, the level of HIV positivity rate was low (0.25%) among the ANC attendee, with a stable trend.
- In 2013, PPTCT positivity rate was (0.04%) and Blood Bank HIV positivity rate was (0.05%) with a stable trend among general clients.
- Based on 2013, The HIV positivity level was low among ICTC clients (1.05%) with a stable trend during 2009 2013.
- In 2013, 768 STI episodes were treated and 10.41% were GUD cases.
- Based on 2013, FSW (483; 59.93 of total HRG) was the largest HRG in the district..
- In 2013, there are 174 numbers of PLHIV registered in ART Centre. 40.22% were on ART, 25.28% were belonging to 15-24 year age group 17.81% were illiterate and 30.93% were female clients.
- As per ART data Route of Transmission showed 89% Heterosexual 0.57% Homosexual, 1.14% were needle syringe, 1.14%Blood transfusion and 7.47% Parent to child.
- As per 2011 census, male migration out migration was 1.70%. The top three destinations for out-of-state migrations were West Bengal, Delhi & Arunachal Pradesh. Intra state migration rate was 0.36%; district involved are Tinsukia, Sibsagar and Kamrup. Inter district migration was 0.86%.

- Detailed profiling of FSW and IDU populations in the districts need to be done.
- Strengthening of the STI/RTI services is required in the district.
- PPTCT services needs to be scaled up in the district as parent to child transmission is still high.

Dibrugarh		2009	2010	2010	2011	2013			
	PP				0.00	0.25			
HSS-ANC									
	NT	NA	NA	NA	402	400			
РРТСТ	РР	0.09	0.00	0.01	0.01	0.00			
PFICI	NT	5450	7598	10372	12068	2847			
Blood Bank	PP	0.028	0.06	0.05	0.04	0.07			
	NT	28269	29685	32913	36193	34175			
		2006	2007	2008					
HSS-HRG	PP	NA	NA	NA	NA	NA			
1155-11KO	NT	NA	NA	NA	NA	NA			
HSS-STD	PP	NA	NA	NA	NA	NA			
1155-51D	NT	NA	NA	NA	NA	NA			
		2009	2010	2011	2012	2013			
ICTC	PP	1.89	1.40	1.28	1.10	1.05			
	NT	2429	4650	6331	6293	7893			
STI									
No. of STI episodes		1062	448	1105	1016	768			
Proportion(%) of GUD									
cases		20.62	23.21	13.21	12.3	10.41			
% Syphilis positivity		2.17	1.75	1.31	1.89	0.00			

PLHIV Profile									
				%					
	Total	% on ART	% 15-24	Illiterate	% Fema	ale			
PLHIV	174	40.22	25.28	17.81	30.93				
Route of transmission, ART data									
					Parent				
			Blood	Needle	to				
	Heterosexual	Homosexual	transfusion	syringe	child	Unknown			
% of total									
(N=174)	89	0.57	1.14	1.14	7.47				

HRG Size							
	FSW	MSM	IDU				
Size estimate (mapping data							
2009)	483	NA	323				
% total HRG	59.93	NA	40.07				

% Total population	% Total population				0.024	
Programme coverage	720	NA		340		
Typology			NA			
Male Migration, 2001 census						
	Inter-state	Intra-state	Int	ra-district		
No. of Out- migration	22636	486	8		11,496	
Top three states for migration : West Arunachal Pr	1		icts for intra-st tia,Sibsagar,Ka	tate migration: amrup		

	Programme Response										
<u>2007</u> 2008 2009 2010 2011 2012 201											
ICTC	1	1	2	2	2	2	2				
No. tested in ICTC	1796	2075	2429	4650	6331	6293	7893				
РРТСТ	1	1	1	1	1	1	1				
No. tested in PPTCT	483	3031	5450	7598	10372	12068	2847				
STI Clinics	105	1	1	1	10572	12000	1				
ART center	1	1	1	1	1	1	1				
Link ART center	NA	NA	NA	NA	NA	NA	NA				
FSW TIs	1	1	1	1	1	1	1				
MSM TIs	NA	NA	NA	NA	NA	NA	1				
IDU TIs	NA	1	1	1	1	1	1				
Composite TIs	NA	NA	NA	NA	NA	NA	NA				
Red Ribbon clubs											
Blood Banks	8	8	8	8	8	8	8				

DimaHasao District

Introduction

The DimaHasao is an autonomous district, inaugurated on the 29th April 1952. It is one of the two hill District of Assam with an area of 4890 sq.KM. The district is bounded on the North by Karbi-Anglong and part of Nagaon district, on the south by cachardistrict, on the East by Manipur and part of Nagaland and on the west by Meghalaya and part of Karbi-Anglong District of Assam. This district is the homeland for more than a dozen hill-tribes, viz, the Dimasas, the ZemeNagas, the Kukis, the Hmars, the Karbis, the Bietes, the Jaintias, the Hrangkhols, the Khelmas and the Viapheis etc. Among these hill-tribes, the dimasas are the Dominant tribe followed by the ZemeNagas.

HIV Epidemic Profile:

- As per HSS-ANC 2012-13, the level of HIV prevalence among ANC attendees is moderate (0.50%).
- The PPTCT data shows a stable trend in HIV positivity during 2009 to 2013.
- The Blood Bank data shows a stable trend in HIV positivity during 2009 to 2013.
- The HIV positivity among the ICTC attendees is showing a fluctuating trend during 2009 to 2013.
- In 2013, 322 episodes of STI/RTI were treated. Among them, 2.79 were GUD herpetic /non herpetic.
- The PLHIV in the district is 6 and they are on ART as per ART data.
- FSW (62.29%) is the main typology in the district. They are mostly home based and street based.
- The out migration of people is mostly to Nagaland, Meghalaya ,and West Bengal,
- Intra-State migration is to Cachar, KarbiAnglong, and Kamrup.

- Improving the coverage of FSW and IDU'S by the targeted intervention may be taken as a high priority for the programme in the district.
- Expansion of ICTC'S for maximum coverage of general population to reduce the impact of HIV and it infection.
- Proper needle syringe demand analysis need to be done to meet the requirement of each IDU'S.Effective BCC activities need to develop,staff of IDU'S need to be given proper training on harm reduction.

			2009	2010	2011	2012	2013
	PP	NA		NA	NA	NA	0.50
HSS-ANC							
	NT	NA		NA	NA	NA	400
РРТСТ	РР		0.00	0.23	0.05	0.15	0.07
PPICI	NT		593	1308	2104	1943	1862
Blood Bank	PP		0.00	0.00	0.19	0.12	0.17
	NT		1334	1557	2075	1650	1782
			2006	2007	2008		
	PP						
HSS-HRG	NT						
	РР						
HSS-STD	NT						
			2009	2010	2011	2012	2013
ICTC	РР		0.58	0.89	0.79	0.85	0.52
ICTC	NT		515	1011	1263	1419	1359
STI							
	first clinic visit{for the						
No. of STI	index						
episodes	STI/RTICOMPLANT}		598	830	493	407	322
Proportion(%)							_
of GUD cases			6.68%	4.45	3.65	3.68	2.79
% Syphilis			0.00	0.00	0.00	0.00	0.00
positivity			0.00	0.00	0.00	0.00	0.00

PLHIV Profile								
	Total	% on ART	% 15-24	% Illiterate	% Female	e		
PLHIV	6	6	NA	NA	0			
Route of transmission, ART data								
	Heterosexual	Homosexual	Blood transfusion	Needle syringe	Parent to child	Unknow n		
% of total (N=6)	98%	0.0%	0.0%	2%	0.0%	0.0%		

HRG Size									
	FSW	MSM	IDU						
Size estimate									
(mapping data 2009)	347	NA	210						
% total HRG	62.29%	NA	37.7						

% Total population	0.186		0.11			
Programme	400		200			
coverage(2013)	400		300			
Typology	257 Street based	home based 100	Hotel based 43			
Male Migration, 2001 census						
	Inter-state	Intra-state	Intra-district			
No. of Out-migration	1016	250	669			
Nagaland,Meghalaya	,WestBangal	Cachar,KarbiA	nglong,kamrup			

	Programme Response										
	2007	2008	2009	2010	2011	2012	2013				
ICTC	NA	NA	1	1	1	1	1				
No. tested in ICTC	NA	NA	515	1011	1263	1419	1359				
РРТСТ	NA	NA	1	1	1	1	1				
No. tested in PPTCT	NA	NA	593	1308	2104	1943	2689				
STI Clinics	NA	NA	1	1	1	1	1				
ART center	NA	NA	NA	NA	NA	NA	NA				
Link ART center	NA	NA	NA	NA	NA	NA	NA				
FSW TIs	NA	NA	1	1	1	1	1				
MSM TIs	NA	NA	NA	NA	NA	NA	NA				
IDU TIs	NA	NA	1	1	1	1	1				
Composite TIs	NA	NA	NA	NA	NA	NA	NA				
Red Ribbon clubs	NA	NA	NA	NA	NA	NA	NA				
Blood Banks	NA	NA	1	1	1	1	1				

GOALPARA DISTRICT

District Background:

Goalpara district situated at the west corner of Assam. The district Headquarter is 134 KM away from the state capital Guwahati. The district covers a geographical area of 61831 square kilometers and district has population of 8, 22,035 with Goalpara has a sex ratio of 956 females for per 1,000 males, and literacy rate of 58.03% in (2001 Census). There are two tea gardens in Goalpara.

HIV Epidemic Profile:

- Based on 2013 data, the level of HIV positivity was low among the PPTCT (0.04%) and PPTCT shows positivity was declining trend since 2007 to 2013.
- In 2013, HIV positivity among ICTC attendees was (0.27%). The trend of positivity was stable since 2009 to 2013.
- As per mapping conducted in the year 2009 FSW (487; 100% of total HRG) was the largest HRG in the district.
- In 2013, according to the HRG typology 52.12% FSW is street based which is higher among FSW
- As per the 2001Census, 5.38% of the male population was migrant population, among them 11.83% migrated to other states and 24.26% migrated to other districts within the state.
- The top three destinations for out-of-state migration were Delhi, Nagaland&Uttarpradesh.
- In 2013, 3674 episodes of STI/RTI were treated and the syphilis positivity rate among STI clinic attendees was 1.32%.
- Total 61 PLHIV registered at the Anti-Retroviral Therapy (ART) centre, 22.95% were 15-24 years of age, 54% were on ART, 18.03% were illiterate and the major route of transmission in PLHAs is heterosexual (91.16%).
- HIV and RTI/STI awareness rate among women was 55.4% and 5.9%, respectively (DLHS-III).

Key Recommendations:

• Analysis of risk profile of positive individuals should be done to determine associated factors as high HIV prevalence among FSW indicated high vulnerability of the district.

• Strengthen outreach programmes through awareness campaigns among FSW, MSM and migrants in the district.

• At present there is no TI NGO for truckers so those bridge populations is not covered in the district.

		2009	2010	2011	2012	2013
HSS-ANC	PP	NA	NA	0.00	NA	0.00
	NT	NA	NA	391	NA	400
PPTCT	PP	0.08	0.08	0.06	0.08	0.04
	NT	2613	3631	5168	7931	9374
Blood Bank	PP	0.00	0.00	0.00	0.00	0.00
	NT	2438	3357	4102	2876	2891
		2006	2007	2008		
HSS-HRG	РР	NA	NA	NA	NA	NA
	NT	NA	NA	NA	NA	NA
HSS-STD	РР					
	NT					
		2009	2010	2011	2012	2013
ICTC	РР	0.06%	0.34%	0.13%	0.33%	0.27%
	NT	1330	2376	3127	3003	4792
STI		2009	2010	2011	2012	2013
No. of STI episodes		500	1249	1404	3886	3674
Proportion(%) of GUD						
cases		3.80	3.20	11.03	12.48	15.48
% Syphilis positivity		3.73	0.98	1.01	0.66	1.32

PLHIV PROFILE

	Total	% on ART	% 15-24	% Illiterate	% Female	
PLHIV	61	54.09%	22.95%	18.03%	50.81%	
]	Route of transr	nission, ART	data		
			Blood	Needle	Parent to	
	Heterosexual	Homosexual	transfusion	syringe	child	Unknown
% of total						
(N=61)	91.16%	1.63%	0	0	0	1.63%

HRG SIZE

	FSW	MSM	IDU
Size estimate			
(mapping data			
2009)	487	NA	NA
% total HRG	100%	NA	NA
% Total			
population	0.12%		

Programme coverage(2013)	1060	NA	NA	
	Home based 52.12	2%		
Typology	Street based 45.0			
	Lodge based 2.80	%		

Ma	le Migratio	on, 2001 census			
	Overall	Inter- state	Intra-state	Intra-district	
				14449	
No. of Out-migration	22614	267	5 5489		
Top three states for inter-state migration :		Тор	ter-		
Delhi/Nagaland/Uttarpradesh		distmigration:Kamrup/Dhuburi/Bongaiga			

PROGRAMME RESPONSE

	2007	2008	2009	2010	2011	2012	2013
ICTC	1	2	2	2	2	2	2
No. tested in							
ICTC	2157	1577	1330	2376	3127	3003	4792
РРТСТ	1	1	1	1	1	1	1
No. tested in							
РРТСТ	1834	2120	2613	3631	5168	7931	9374
STI Clinics	0	0	1	1	1	1	1
ART center	0	0	0	0	0	0	0
Link ART							
center	0	0	0	0	0	0	0
FSW TIs	1	1	1	1	1	1	1
MSM TIs	0	0	0	0	0	0	1
IDU TIs	0	0	0	0	0	0	0
Composite							
TIs	1	1	1	1	1	1	1
Red Ribbon							
clubs	0	0	0	0	0	0	0
Blood Banks	1	2	2	2	2	2	2
Blood Banks	1	2	2	2	2	2	2

GOLAGHAT DISTRICT

Introduction

Golaghat district is located in the northeastern part of Assam. The neighbor districts are Karbi-Anglong and Jorhat. The border state is Nagaland in south east. As per 2011 census the total population of the district is 10, 66,888. The district consists three subdivisions namely Golaghat, Dhansiri and Bokakhat.Epidemic vulnerability is probably due to Golaghat being the transit point for trucker travelling to and fro from high HIV prevalence states of Nagaland and Manipur. Long distance truckers and several halting point increases the risk.

HIV Epidemic Profile:

- Based on 2013 HSS-ANC data, the level of HIV positivity was low (0.00%) among the ANC clients.
- Based on 2013 data, the level of HIV positivity among the PPTCT (0.58%) and Blood Bank (0.6%) clients was low with a rising trend between 2011 to 2013.
- According to 2009 TI data, the percentage of MSM of total HRG was (33.78%), FSW 38.88% and IDU 26.57%. Among the FSW, 218 were Home Based and 197 Street Based.
- In 2013, HIV positivity among ICTC attendees was 0.42%, showing a declining trend in comparison to 1.31% in 2009.
- As per the 2001Census, 15762 populations was migrant population, of them 10557 are intra district migration.
- In 2013, 785 episodes of STI/RTI were treated. Among them, 12.86% were GUD cases.
- There were 3 numbers of ICTCs operational in the district since 2009.

- Analysis of the profile of PPTCT attendees is essential as an increasing trend is noted among the pregnant women since 2011.
- Increased IEC activities among the bridge populations like migrants and truckers.
- Mainstreaming of HIV services with major industries in the districts needs to be done.

HIV LEVEL & TRENDS

		2009	2010	2011	2012	2013
	PP	NA	NA	0.00	NA	0.00
HSS-ANC						
	NT	NA	NA	400	NA	400
РРТСТ	РР	0.06	0.04	0.03	0.03	0.05
rrici	NT	8689	10721	11352	12572	13652
Blood Bank	РР	0.05	0.02	0.01	0.06	0.06
	NT	5371	6877	7284	7744	8289
		2006	2007	2008		
HSS-HRG	РР	NA	NA	NA	NA	NA
033-000	NT	NA	NA	NA	NA	NA
HSS-STD	PP	NA	NA	NA	NA	NA
H33-31D	NT	250	250	247	NA	NA
		2009	2010	2011	2012	2013
ICTC	РР	1.31%	0.52%	0.73%	0.48%	0.42%
	NT	2124	4548	4058	5985	7442
STI						
No. of STI episodes		3220	1852	1130	825	785
Proportion(%) of GUD cases		7.91	9.44	16.28	22.06	12.86
% Syphilis positivity		0.00	0.00	0.00	0.00	0.00

PLHIV Profile								
	Total	% on ART	% 15-24	% Illiterate	% Female	2		
PLHIV								
	Route c	of transmission	, ART data		-			
HeterosexuaHomosexuaBloodParentUnknowIInsyringeto childn								
% of total (N=)								

	HRG Size					
FSW	MSM	IDU				
518	450	354				
38.88%	33.78%	26.57%				
0.05%	0.04%	0.03%				
400	400	300				
Home Based: 218. Streetl Based: 197.	NA	NA				

]		
		N	Iale Migra	tion, 2001 c	ensus				
Inter-state			Intra	-state	Intra-distric	t			
		-	762	3660		10557			
Top three states fo	or inter-si	tate migra De	-	aland. Arun	achal Prades	h,	intra-st Jorh	ee districts fo ate migration at, Kamrup, biAnglong.	
			Program	nme Respor	ise				
	2007	2008	2009	2010	2011		2012	2	013
ICTC	1	2	3	3	3		3		3
No. tested in ICTC			2124	4548	4058		5985	7	442
РРТСТ	1	1	1	1	1		1		1
No. tested in PPTCT			8689	10721	11352		12572	13	652
STI Clinics		1	1	1	1		1		1
ART center			Nil	Nil	Nil	Nil		Nil	
Link ART center			Nil	Nil	Nil	Nil		Nil	
FSW TIs		1	1	1	1		1		1
MSM TIs		1	1	1	1		1		1
IDU TIs		1	1	1	1		1		1
Composite TIs			NA	NA	NA	NA		NA	
Red Ribbon clubs			NA	NA	NA	NA		NA	
Blood Banks	2	2	2	2	2		2		2

HAILAKANDI

Introduction

Hailakandi district is situated at the southern most corner of Assam. Hailakandi district, declared as the 24th district of Assam. Total population in the district is 659,260 as per 2011 census. Total geographical area of the district is 1327 Sq. KM of which 10.53 Sq. KM falls in urban areas and 1316.47 Sq.Km. Village. District vulnerabilities include proximity to high HIV prevalence states.

Epidemic Profile:

- As per HSS ANC 2013, the level of HIV prevalence among ANC attendees was moderate (0.50%). Trend analysis couldn't be done due to insufficient data.
- As per ICTC data, a increasing trend in HIV positivity (%) is noted in the district between 2011 to 2013.
- FSW (100%) is predominant HRG typology in the district. Majority of them are home based (69.02%).
- 851 episodes of STI/RTI were treated in 2013. Among them 0.24% were GUD cases.
- Among the PLHIV, major route of transmission is the heterosexual route (91%).
- As per 2001 census, major districts for intra-state migration are Cachar, Kamrup and Karbi-Anglong.

- Profile of the bridge population is essential in view of the moderate level of HIV prevalence of ANC attendees.
- Saturation coverage of the bridge populations in the district through proper district level planning.

HIV Levels and Trends

		2000	2010	2011	2012	2012
		2009	2010	2011	2012	2013
HSS ANC	PP	0	0	0	0	0.50
	NT	NA	NA	399	NA	400
PPTCT	PP	0	0	0	0	0.50%
	NT	998	1580	2977	3562	5261
Blood						
Bank	PP	0	0	0	0	0
	NT	54	76	96	77	53
		2006	2007	2008		
HSS HRG	PP	NA	NA	NA	NA	NA
	NT	NA	NA	NA	NA	Na
		2009	2010	2011	2012	2013
ICTC	РР	0.36	0.16	0.01	0.06	0.09
	NT	1108	1894	2986	3396	4622
STI						
episodes		166	1775	2052	2023	851
GUD (%)		0.00	0.45	1.36	0.98	0.24
Syphilis						
positivity						
(%)		0.00	0.56	1.42	0.00	0.00

		PLHIV Profi	ile				
	Total	% on ART	% 15-24	% Illiterate	% Femal	e	
PLHIV	42	26	NA	NA	NA		
Route of transmission, ART data							
	Heterosexual	Homosexual	Blood transfusion	Needle syringe	Parent to child	Unknow n	
% of total (N=42)	91%	0%	0%	1.2%	4.8%	3%	

	HRG S	ize	
	FSW	MSM	IDU
Size estimate (mapping data 2009)	467	0	0
% total HRG	100%	0	0
% Total population	0.07%	0	0
Programme coverage(2013)	460	0	0
Typology	Home based:69.02%	NA	NA

HRC Si

	Street based: 2 Lodge based:		
	Male M	ligration, 2001 c	census
	Inter-state	Intra-state	Intra-district
No. of Out-migration	742	6012	4378
Nagaland, Mizoram	, Meghalaya	Cacl	har. Kamrup, Karbi-Anglong

	Programme Response									
	2007	2008	2009	2010	2011	2012	2013			
ICTC	1	1	1	1	1	2	2			
No. tested in ICTC	NA	NA	1108	1894	2986	3396	4622			
РРТСТ	1	1	1	1	1	1	1			
No. tested in PPTCT	NA	NA	998	1580	2977	3562	5261			
STI Clinics	0	0	1	1	1	1	1			
ART center	NA	NA		NA	NA	NA	NA			
Link ART center	NA	NA	NA	NA	NA	NA	NA			
FSW TIs	NA	NA	1	1	1	1	1			
MSM TIs	0	0	0	0	0	0	0			
IDU TIs	0	0	0	0	0	0	0			
Composite TIs	0	0	0	0	0	0	0			
Red Ribbon clubs	0	0	0	0	0	0	0			
Blood Banks	1	1	1	1	1	1	1			

JORHAT

District Background:

Jorhat district lies in the central part of Brahmaputra Valley of Assam. The total population of the district is 9,99,221. With sex ratio of 956 females per 1000 males. The literacy rate among total population is 83.42%. While it is bounded by Lakhimpur district on the North, Nagaland state on the South, Sibsagar on the East and Golaghat on the West.

The vulnerabilities include migration of trading communities as well as others seeking employment opportunities because of industrial/agriculture prosperity of the District. The district has an extensive network of roadways and railways connecting it well with other parts of the country.

HIV Epidemic Profile:

• The PPTCT data shows that the positivity ratio among PPTCT attendees has increased from 0% to 0.06% in between 2009 to 2013.

• It is also found that the positivity ratio in Blood Bank attendees has increased in maximum level to 0.28% in the year 2011 but it decreased to 0.19% in 2013 which is still higher in comparison to 0.01% in the year 2009.

• The positivity ratio has also increased among ICTC attendees. The data shows maximum ratio of 0.94 % in the year 2012 which decreased to 0.59% in 2013.

• The data shows a positive sign as there is 0% of positivity ratio observed in syphilis Test among the STI attendees since 2011.

• In the study it is also found that the maximum inter-state migration occur from U.P, Nagaland and Arunachal Pradesh which is more lesser than Intra-state migration which occurred mostly from Kamrup, Golaghat and Sivshagar District of Assam.

Key Recommendations:

• All the data should make up to date for further course of action.

		2009	2010	2011	2012	2013
HSS-ANC	PP	-	-	0%	-	0.25%
пээ-анс	NT	-	-	400	-	400
DDTCT	PP	0%	0.05%	0.04%	0.08%	0.06%
PPTCT	NT	1994	6134	7754	9133	10,841
Blood Bank	PP	0.1%	0.16%	0.28%	0.24%	0.19%
Blood Bank	NT	3068	4415	5667	7526	8037
		2006	2007	2008		
HSS-HRG	PP	-	-	0%	-	-
пээ-пко	NT	-	-	230	-	-

HIV level and Trends:

		2009	2010	2011	2012	2013
ICTC	PP	0.4%	0.62%	0.67%	0.94%	0.59%
	NT	1484	3047	4938	4278	6627
STI						
No. of STI episode	es	687	608	309	313	1006
Proportion(%) of						
GUD cases		77	42	26	9	115
% Syphilis positiv	rity	0.44%	2.3%	0%	0%	0%
		PLHIV Profile				
			% on	% 15-	%	%
	Total		ART	24	Illiterate	Female
PLHIV			No data avail	able		
	R	oute of transmiss	ion, ART data	ı		
			Blood	Needle	Parent	
	Heterosexual	Homosexual	transfusion	syringe	to child	Unknown
% of total (N=)	88.31%	2.59%	1.2%	0%	2.5%	2.5%

			Н	RG Size					
		FS	SW	MSM		Π	DU		
Size estimate (mappin data 2009)	ng	7	90	-			-		
% total HRG		10	0%	-		-			
% Total population		0.07%		-			-		
Programme coverage	(2013)	9	20	-			-		
Typology			IL	-					
		Μ	ale Migra	ation, 2001 co	ensus				
	Int	er-sta	te	Intra-state	Intra-dis	strict			
No. of Out-migration			530	6218		99	72		
					laghat, Siv	sagar			
Uttar Pradesh, Nagala	and, Aru	inacha	l Pradesh						
			Program	nme Respons	e				
	200	7	2008	2009	2010	2011	2012	2013	
ICTC	1		1	1	1	1	1	1	
РРТСТ	1		1	1	1	1	1	1	
STI Clinics	0		1	1	1	1	1	1	
ART centre	0		0	0	0	0	0	0	
Link ART centre	0		0	0		1	1	1	
FSW TIs	1		2	2	2	2	2	2	
MSM TIs	0		0	0	0 0 0 0 0				
IDU TIs	0		0	0 0 0 0 0					
Composite TIs	2		2	2	2	-	-	-	
Blood Banks	1		2	2	2	2	2	2	

KAMRUP (METRO)

Introduction

Kamrup (metro) is the gateway of the North Eastern States and educational & business hub in the region. The main highways that pass through Kamrup(M) and it connect to the nearest states as Nagaland, Manipur, Arunachal Pradesh, Tripura and Mizoram. The famous MaaKamakhya Temple is situated at Nilachal Hill in the Guwahati city.

In 2011, Kamrup Metropolitan had population of 12.53 lakhs of which male and female were 6.47 lakhs and female 6.06 lakhs. The density of Kamrup Metropolitan district for 2011 is 1,313 people per sq. km and it administers 955 square kilometers of areas. Average literacy rate were 88.71 (male 92.13% and female 85.07%. With regards to Sex Ratio in Kamrup Metropolitan, it stood at 936 female per 1000 male.

HIV Epidemic Profile:

• Based on 2013 HSS-ANC data, the level of HIV positivity was low among the ANC clients.

• In 2013, the level of HIV positivity was low among the PPTCT (0.15%) and Blood Bank (0.12%) clients, with a stable trend in comparison to the last 4 years.

• In 2013, the level of HIV positivity was low among ICTC attendees (2.47%) with a stable trend in comparison to the last 4 years.

• As per mapping conducted in the year 2009 MSM (809; 49% of total HRG) was the largest HRG in the district, followed by FSW (635; 38% of total HRG) and IDU (208; 13%).

• In 2013, 1906 episodes of STI/RTI were treated and the syphilis positivity rate among STI clinic attendees was 1.39%.

In 2013, according to the HRG typology 94.42% FSW is street based which is higher among FSW and 50.47% MSM is Double Decker which is higher among MSM.

• As per the 2001 Census, 1.06% of the population was out migration.

• The top three destinations for out-of-state migration were Delhi, West Bengal & Meghalaya.

• In 2013, of the 1023 PLHIV initiated on Anti-Retroviral Therapy (ART), 12.7% were 15-24 years of age, 15.35 % were illiterate and 35.58% were female.

- Focused on awareness programmes among migrant labours and bridge population (as the migration data shows).
- At present there is no TI NGO for truckers so those bridge population is not covered in the district.

HIV LEVEL & TRENDS

			2009		2010	2011	2012	2013
	РР		NA		NA	0	NA	0.75
HSS-ANC								
	NT		NA		NA	400	NA	400
	РР		0.13		0.07	0.15	0.14	0.15
РРТСТ								2092
	NT	NT			19053	18696	19836	6
Blood Bank	PP		0.08		0.09	0.14	0.1	0.12
Dioou Duin								5858
	NT		48966		53043	59157	60581	5
			2006		2007	2008		
HSS-HRG	PP		0.87		1.29	2.10		
	NT		578		620	618		
HSS-STD	PP		1.82 165		1.75	3.6		
	NT	NT			171	250		
			2009		2010	2011	2012	2013
	PP		3.22		2.29	2.58	2.67	2.47
ICTC			7479		1.4.600	1.110.6	100 (0	1561
~~~	NT	NT			14698	14186	13863	4
STI			1055		1 ( = (	22.02	2220	1006
No. of STI episodes			1875		1676	3302	3230	1906
Proportion(%) of G	UD		21.5		10.11	6.22	2.06	7.24
cases			21.5		12.11	6.23	3.06	7.34
% Syphilis positivity	7		4.26		1.57	1.1	0.66	1.39
	·	DI					1	
		PL	HIV Profile	e		%	%	
	Tota		% on AR	Г	% 15-24	[%] Illiterate	[%] Female	
PLHIV		•	70 011 / IX.	•	/01 <i>J-2</i> -f		1 ciliaic	
10			71.16		12.7	15.35	35.58	
1	Rout	te of	transmissi	on,	, ART data		T	
	_				Blood	Needle	Parent	Unkn
	Ieterosexual	Ho			ransfusion	syringe	to child	own
% of total (N=)	79.96		2.24		2.44	3.81	1.56	9.99

## HRG SIZE

			FSW		MSM	IDU
Size estimate (mapping data 2009)			635		809	208
% total HRG			38%		49%	13%
% Total population			0.5%		0.6%	0.02%
Programme coverage	e(2013)	1240			800	680
HRG Typology (2013)		We Stre Hor	<u>FSW</u> g. Client attend ek: 13nos. eet Based : 94.4 ne Based : 5.5	2% 57%	<u>MS</u> Kothi : 34.09 Panthi : 15.44 Double-deck	9%0 %0
			Migration, 200			
	Inter-st	ate	Intra-state	Intr	a-district	
No. of Out-migration	1343	31 10197 37614				
Top three states for	te	Top thre	e distri	cts for intra-state	migration:	

**migration :** Delhi, West Bengal & Meghalaya **Top three districts for intra-state migration:** N.C. Hills, Nagaon&Goalpara

		Progra	mme Res	ponse			
	2007	2008	2009	2010	2011	2012	2013
ICTC	7	7	7	7	7	12	12
No. tested in ICTC	4901	8662	7479	14698	14186	13863	15614
РРТСТ	1	1	1	1	1	1	1
No. tested in							
РРТСТ	5153	8955	13607	19053	18696	19836	20926
STI Clinics	NA	NA	1	1	1	3	3
ART center	1	1	1	1	1	1	1
Link ART center	NA	NA	NA	1	1	1	1
FSW TIs	NA	1	1	1	1	1	1
MSM TIs	NA	1	1	1	1	1	1
IDU TIs	NA	1	1	1	1	1	1
<b>Composite TIs</b>	NA	NA	NA	NA	NA	NA	NA
<b>Red Ribbon clubs</b>	NA	NA	NA	NA	31	31	31
Blood Banks	NA	15	14	14		40	40

## **KAMRUP (Rural)**

#### Introduction

In 2011, Kamrup had population of 15.17 lakhs of which male 7.78 Lakhs and female 7.39 lakhs. The initial provisional data released by census India 2011, shows that density of Kamrup district for 2011 is 489 people per sq. km. and it administers 3,105 square kilometers of areas. Average literacy rate of Kamrup in 2011 were 75.55%, out of which male 81.30% and female literacy were 69.47%. The Sex Ratio is 949 females per 1000 male.

The district includes high deployment of labours, industrial workers in the Amingaon area and there is migration of people from neighboring Garo Hills (Meghalaya). There is deployment of army, BSF personal in Azara, Changsari and Rangia.

# **HIV Epidemic Profile:**

- Based on 2013 HSS-ANC data, the level of HIV positivity was low among the ANC clients.
- In 2013, the level of HIV positivity was low among the PPTCT (0.15%) and Blood Bank (0.12%) clients, with a stable trend.
- In 2013, HIV positivity was low among ICTC attendees (2.47%) with a stable trend.
- In 2013, 563 episodes of STI/RTI were treated and the syphilis positivity rate among STI Clinic attendees were 0%.
- As per the 2001 Census, 1.06% of the population was inter-state out migration.
- The top three destinations for out migration were Delhi, Wes Bengal & Meghalaya.

• In 2013, 268 PLHIV registered at ART Centre, out of that 67.91% initiated on ART, 13.80% were 15-24 years of age, 11.19 % were illiterate and 36.94% were female.

- Focused on awareness programmes to come out the hidden unknown PLHA (because the data of out migration is high).
- Scale up the MSM TI project in the district (ART data shows there are MSM HRG also in the district).
- At present there is no TI NGO for truckers so that bridge population is not covered in the district.

	HIV LEVEL		ENDS							
	200	9	2010		2011		2012	2013		
PP	NA	L	NA		0%		NA	0%		
NT	NA		NA		391		NA	397		
PP	0.059	%	0.04%		0.03%	, D	0%	0.01 %		
NT	6052	2	9668		14503	3	17763	14952		
РР	NA	<u>.</u>	NA		NA	NA		NA		
NT	NA		NA		NA		NA	NA		
PP	NA		NA		NA		NA	NA		
NT	NA		NA		NA		NA	NA		
PP	NA	L.	NA		NA		NA	NA		
NT	NA		NA		NA		NA	NA		
PP	0.139	%	0.22%	, )	0.11%	, D	0.05%	0.19 %		
NT	224:	5	6422		6212		5570	6741		
	45		47		436		696	563		
UD	0%		0%		1.37%	, D	0.43%	0.35 %		
y	0%		0%		0.58%	, D	0.23%	0%		
	PI HIV Profi	مان								
Tatal	%		%	т	%					
200	07.7170	1	5.0070		1.17/0	50	.7770			
Route of transmission, ART data										
Heterosexua l	Homosexua l	nosexua Blood		Needle syringe		Parent to child		Unkno wn		
80.97%	1.87%	1	.11%	(	).75%	1.49%		13.81		
	NT   PP   Stationary   PP   NT   PP <td>PPNANTNAPP0.059NT6052PPNANT6052PPNANTNANTNAPPNANTNAPPNANTNAPP0.139NT2243PP0.139NT2243PP0.139NT2243PP0.139NT2243S45UD0%y0%O9%O9%O9%O9%O9%O9%C7.91%Heterosexua1I1</td> <td>PPNANTNAPP$0.05\%$NT$6052$PPNANTNANTNAPPNANTNAPPNANTNAPPNANTNAPPNANTNAPPNANTNAPP0.13%NT2245S45UD0%y0%y0%Totalon ART26867.91%HeterosexuaHomosexuaII</td> <td>PP$2009$$2010$PPNANANTNANAPP$0.05\%$$0.04\%$NT$6052$$9668$PPNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANT22456422S4547UD0%0%y0%0%y0%0%S4547UD0%0%S4547UD0%0%S61.91%13.80%Route of transmission, ART dzHeterosexua lHomosexua lBlood transfusion</td> <td>PPNANANTNANAPP0.05%0.04%NT60529668PPNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANT22456422S4547UD0%0%y0%0%y0%0%113.80%1Evte of transmission, ART dataHeterosexuaHomosexuaBlood transfusionIIStasfusionN</td> <td>PP     NA     NA     O%       NT     NA     NA     0%       PP     NA     NA     0%       NT     NA     NA     391       PP     0.05%     0.04%     0.03%       NT     6052     9668     14503       PP     NA     NA     NA       NT     NA     NA     NA       PP     NA     NA     NA       NT     NA     NA     NA       PP     NA     NA     NA       NT     2245     6422     6212       O%     <td< td=""><td>PP     NA     NA     0%       NT     NA     NA     0%       NT     NA     NA     0%       NT     NA     NA     391       PP     0.05%     0.04%     0.03%       NT     6052     9668     14503       PP     NA     NA     NA       NT     2245     6422     6212       G</td><td>PP     NA     NA     O%     NA       NT     NA     NA     0%     NA       PP     0.05%     0.04%     0.03%     0%       NT     6052     9668     14503     17763       PP     NA     NA     NA     NA     NA       NT     6052     9668     14503     17763       PP     NA     NA     NA     NA       NT     2245     6422     6212&lt;</td></td<></td>	PPNANTNAPP0.059NT6052PPNANT6052PPNANTNANTNAPPNANTNAPPNANTNAPP0.139NT2243PP0.139NT2243PP0.139NT2243PP0.139NT2243S45UD0%y0%O9%O9%O9%O9%O9%O9%C7.91%Heterosexua1I1	PPNANTNAPP $0.05\%$ NT $6052$ PPNANTNANTNAPPNANTNAPPNANTNAPPNANTNAPPNANTNAPPNANTNAPP0.13%NT2245S45UD0%y0%y0%Totalon ART26867.91%HeterosexuaHomosexuaII	PP $2009$ $2010$ PPNANANTNANAPP $0.05\%$ $0.04\%$ NT $6052$ $9668$ PPNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANT22456422S4547UD0%0%y0%0%y0%0%S4547UD0%0%S4547UD0%0%S61.91%13.80%Route of transmission, ART dzHeterosexua lHomosexua lBlood transfusion	PPNANANTNANAPP0.05%0.04%NT60529668PPNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANTNANANT22456422S4547UD0%0%y0%0%y0%0%113.80%1Evte of transmission, ART dataHeterosexuaHomosexuaBlood transfusionIIStasfusionN	PP     NA     NA     O%       NT     NA     NA     0%       PP     NA     NA     0%       NT     NA     NA     391       PP     0.05%     0.04%     0.03%       NT     6052     9668     14503       PP     NA     NA     NA       NT     NA     NA     NA       PP     NA     NA     NA       NT     NA     NA     NA       PP     NA     NA     NA       NT     2245     6422     6212       O% <td< td=""><td>PP     NA     NA     0%       NT     NA     NA     0%       NT     NA     NA     0%       NT     NA     NA     391       PP     0.05%     0.04%     0.03%       NT     6052     9668     14503       PP     NA     NA     NA       NT     2245     6422     6212       G</td><td>PP     NA     NA     O%     NA       NT     NA     NA     0%     NA       PP     0.05%     0.04%     0.03%     0%       NT     6052     9668     14503     17763       PP     NA     NA     NA     NA     NA       NT     6052     9668     14503     17763       PP     NA     NA     NA     NA       NT     2245     6422     6212&lt;</td></td<>	PP     NA     NA     0%       NT     NA     NA     0%       NT     NA     NA     0%       NT     NA     NA     391       PP     0.05%     0.04%     0.03%       NT     6052     9668     14503       PP     NA     NA     NA       NT     2245     6422     6212       G	PP     NA     NA     O%     NA       NT     NA     NA     0%     NA       PP     0.05%     0.04%     0.03%     0%       NT     6052     9668     14503     17763       PP     NA     NA     NA     NA     NA       NT     6052     9668     14503     17763       PP     NA     NA     NA     NA       NT     2245     6422     6212<		

# HIV LEVEL & TRENDS

		HRG SIZE					
	]	FSW	MSM	IDU			
Size estimate (mapping 2009)	data	NA	NA	NA			
% total HRG		NA	NA	NA			
% Total population		NA	NA	NA			
Programme coverage(2	2013)	400	NA	NA			
HRG Typology	Street I Home I Brothe	lient attends Pe Based : 59% Based : 37.84% Based : 3.16%					
	Inter-state	Intra-state	Intra-district				
No. of Out-migration	13431	10197	3	7614			
<b>Top three states fo</b> <b>migratio</b> Delhi, West Bengal	n :	<b>Top three districts for intra-state migration:</b> N.C. Hills, Nagaon&Goalpara					

	Programme Response											
	2007	2008	2009	2010	2011	2012	2013					
ICTC	NA	NA	11	18	18	18	18					
No. tested in ICTC	NA	NA										
РРТСТ	NA	NA	NA	NA	NA	NA	NA					
No. tested in PPTCT	NA	NA	NA	NA	NA	NA	NA					
STI Clinics	NA	NA	NA	1	1	1	1					
ART center	NA	NA	NA	NA	NA	NA	NA					
Link ART center	NA	NA	NA	NA	NA	NA	NA					
FSW TIs	NA	NA	NA	0	1	1	1					
MSM TIs	NA	NA	NA	NA	NA	NA	NA					
IDU TIs	NA	NA	NA	NA	NA	NA	NA					
Composite TIs	NA	NA	NA	1	1	1	1					
Red Ribbon clubs	NA	NA	NA	NA	NA	NA	NA					
Blood Banks	NA	NA	NA	NA	NA	NA	NA					

#### KARIMGANJ

#### Introduction

Karimganj district is located in the southern tip of Assam a state north eastern corner of India. Cachar and Hailakandi are near district. Total area of the district is 1809 Sq. KMs. According to the 2011 census Karimganjdistrict has a population of 1217002. Karimganj has sex ratio of 961 females for every 1000 males and literacy rate of 97.72 %. Muslims 527214 form a slight majority in the district, at 52.23% of the population.

#### **HIV EpidemicProfile**

- As per HSS ANC data, the level of HIV prevalence among ANC attendees has been consistently higher in the last two rounds of HSS.
- As per PPTCT data, a stable trend in HIV positivity is noted among ANC attendees during 2009 to 2013.
- The blood bank data shows a rising trend in HIV positivity during 2011 to 2013.
- The ICTC data in the district shows a declining trend in HIV positivity (%) since 2011.
- FSW (100%) is the main HRG group in the district. More than half of the FSW (55%) are street based.
- 2276 episodes of STI/RTI were treated in 2013 among which 0.48% were GUD cases.
- As per 2001 census, majority of the out-migration from the district happens to Mizoram and Nagaland.

- Profiling of the bridge population is needed in the district to understand the role of bridge population in the higher HIV prevalence among the ANC attendees.
- Improvement in the blood banking services including promotion of voluntary blood donation is needed as HIV positivity among the blood donors is showing a increasing trend.

# **HIV Levels and Trends**

2012	2013	
0	0.25	
τ.	400	
	400	
	0.06	
5844	6744	
0.00	0.18	
	1119	
1115	1119	
T <b>A</b>	NA	
	Na	
	2013	
	0.81	
	3456	
2300	5450	
2662	2276	
2002	2270	
0.90%	0.48%	
0.82%	0%	
male		
t Un	know	
ld n		
, 0.8	3%	
	0	
	0	
	0	
	0	
NA		
	0.82% nale d n 0.8	

Male Migration, 2001 census											
	Inter-state	Intra-state	Intra-district								
No. of Out-											
migration	6922	8550	4438								
Mizoram, Nagala	and, Meghalaya	Cachar. Kamrup, Karbi-Anglong									

	Programme Response											
	2007	2008	2009	2010	2011	2012	2013					
ICTC	1	1	1	2	4	4	4					
No. tested in ICTC	609	2575	1084	1681	2299	2560	3456					
РРТСТ	1	1	1	1	1	1	1					
No. tested in												
PPTCT	123	682	1319	2677	6334	5844	6744					
STI Clinics	1	1	1	1	1	1	1					
ART center	NA	NA	NA	NA	NA	NA	NA					
Link ART center	NA	NA	NA	1	1	1	1					
FSW TIs	NA	NA	1	1	1	1	1					
MSM TIs	0	0	0	0	0	0	0					
IDU TIs	0	0	0	0	0	0	0					
Composite TIs	0	0	0	0	0	0	0					
Red Ribbon clubs	0	0	0	0	0	0	0					
Blood Banks	1	1	1	1	1	1	1					

#### KOKRAJHAR

#### **Background:**

Kokrajhar district is surrounded by the international boundary with Bhutan in the north and interstate boundary with West Bengal in the west besides Chirang and Bongaigaon districts on the east and Dhubri district on the south. Kokrajhar is the headquarter of the BTAD. The District has two sub Divisions: Kokrajhar and Gossaigaon. According to the 2011 census, Kokrajhar district has a population of 886,999 with a sex ratio of 958 females for every, 1000 males, and a literacy rate of 66.63%. The district is demographically dominated by tribal and non-tribal communities. The economy of Kokrajhar district mainly depends on agricultural products. Both road (NH31C) and N.F.Railway line passes through the district.

#### **HIV Epidemic Profile:**

- In 2013, the level of HIV positivity was low among the PPTCT (0.07%) clients, with a stable trend.
- In 2013, HIV positivity among ICTC attendees was low (0.41%) with a stable trend.
- In 2013, 1598 episodes of STI/RTI were treated among which 0.93% were GUD cases.
- As per mapping conducted in 2009, FSW (313,100% of total HRG) was the largest HRG in the district. Of the FSW 44.46% were home based and 44.40% were street based, 3.38% were Lodge based, and 11.73% were Dhaba based.
- The Top destination for interstate migration was West Bengal, which was low prevalence state.
- In 2013, of the 105 PLHIV registered at the ART Centre,80% were on ART,18.09% were 15-24 years of age,20% were illiterate and 37.14% were female.
- The HIV and RTI STI awareness rates were 36.6% and 7.4% respectively among women (DLHS-III).

- Generate awareness about HIV through campaigning among the truck halt points, Bus stand and Railway station in the district.
- TI projects should be started for MSM and IDU population in the district.
- Enhanced assessment of typology of FSWs and size and profile of the clients, including migrants and trucker will help in better understanding of district vulnerabilities.

# **HIV Levels and Trends**

			2009		2010		201	1	2012	,	2013	
		РР	NA		NA		NA		NA		0.00	
HSS-ANC		NT	NA		NA		NA		NA		400	
		PP	0.15		0.1		0.08	3	0.08		0.07	
PPTCT		NT	2615		3915		577	3	4670		5421	
		РР	0.03		0.00		0.04	1	0.15		0.00	
Blood Bank	C	NT	2501		2295		2079		9 1976		1598	
			2006		2007		200	8				
		PP	NA		NA		NA		NA		NA	
HSS-HRG		NT	NA		NA		NA		NA		NA	
			2009		2010		201	1	2012		2013	
	PP		0.56		0.28		0.42	2	0.41		0.41	
ICTC		NT	2671		3828		514	9	4617		5742	
STI												
No. of STI episodes			528		580	1294		4	1595		1598	
Proportion(												
GUD cases % Syphilis			1.89		3.96		0.61	L	0.06		0.93	
positivity			0.04		0.62		0.34	1	0.23		0.00	
			PLHIV	Profi	le							
	Тс	otal	% on ART	% 1:	5-24	% Illiterate % Fema		emale	nale			
PLHIV	10	05	80	1	8.09		20		37.14			
			Route o	f tran	ismissio	n, A	ART da	ita				
				Bloc			eedle					
$0/$ $C_{1}$ $(1)$	Hetero	osexual	Homosexual	trans	sfusion	sy	ringe	Pare	nt to child	[ ]	Unknown	
% of total (N=105)	89	.52	0		1.9		3.8		0.9	5		3.8
				н	IRG Siz	'e						
		FSW			MSM				IDU			
(mapping c 2009)	lata		313				NA					
% total HR	G		100				NA				NA NA	
% Total	J		100				11/1			INA NA		
population			0.03			NA				NA		
Programme coverage(20			400				NA			NA		

Typolog		Home Based- Street Based Dhaba Based Lodge Based	40.40%, 11.73%,		NA		NA		
Typolog.	y		Male Migra						
		Inter-state			a-state	Intra-d	listrict		
No. of Out- migration		55114		50976 44815					
		inter-state mi estBengal, M							
Programme Reponses	2007	2008	2009	2010	2011	2012	2013		
ICTC	1	1	1	2	2	2	2		
No. tested in ICTC	673	4452	2671	3828	5149	4617	5742		
РРТСТ	0	1	1	1	1	1	1		
No. tested in PPTCT	165	1982	2615	3915	5773	4670	5421		
STI Clinics	0	0	1	1	1	1	1		
ART center	0	0	0	0	0	0	0		
Link ART center	0	0	0	0	0	0	0		
FSW TIs	1	1	1	1	1	1	1		
MSM TIs	0	0	0	0	0	0	0		
IDU TIs	0	0	0	0	0	0	0		
Composite TIs	0	0	0	0			0		
Red Ribbon clubs	0	0	2	2	2	2	2		
Blood Banks	1	1	1	1	1	1	1		

# LAKHIMPUR

#### **District Background:**

Lakhimpur district is situated at the Northeast corner of ASSAM with its headquarters at North Lakhimpur. It is bounded on the north by Siang and Papumpare district of Arunachal Pradesh and on the East Dhemaji District and Subansiri River. According to 2011 census, Lakhimpur has a population of 10, 40,644. Lakhimpur district is spread over an area of 2277 sq. kilometer and the sex ratio of the district is 965 females per 1000 males.

## **Epidemic Profile:**

- Based on 2013 HSS-ANC data, the level of HIV positivity was low among the ANC.
- The HIV positivity level was low among PPTCT (0.03%) clients in 2013, a slight increasing trend in 2009 2013 considering the moving average.
- The HIV positivity level was low in ICTC (0.135) clients also with a stable trend in 2009 2013.
- Syphilis positivity among the STI patient was 0.81% (2013) showing a declining trend between 2009 and 2013.
- ART data of 2013 shows that 26 PLHIV was registered with the ART Centre among which 30.77% were on ART and 46.15% were female. 23.08% of them were in the age group of 15-24 years and 15.38% were illiterate.
- The main route of transmission of the HIV positive cases registered on ART was Heterosexual (80.77%) followed by Homosexual (MSM) = 0.00%, Blood transfusion=0.00%, Needle syringe= 7.69%, Parent to Child= 11.54%.
- As per 2001 Census, 4.56% of the total population was male migration. Out of which 2.96% interstates, 0.56% inter districts and 1.04% intra district migration.
- The top three destinations for out of state migrations were Delhi, Arunachal Pradesh & Uttar Pradesh.

- Since the largest HRG was FSW, assessment of the size and profile of FSW group will help to understand district vulnerabilities.
- Strengthen outreach programmes through awareness campaigns for general population in the district.

# HIV level and Trends:

Source of	Data		2009	2010	2011	2	012	2013
		PP	0		0			0
HSS-A		NT	0		399			400
РРТС	۲r []	PP	0	0.02	0.02	C	0.05	0.03
1110	]	NT	3048	4797	5294	6	607	7369
Blood Bank		PP	0	0	0		0	0
Blood B		NT	2068	2593	2652	2	267	3234
			2006	2007	2008			
USS U		PP						
HSS-HRG		NT	N/A	N/A	N/A			
HSS-STD		PP						
1155-5	]]	NT	N/A	N/A	N/A			
			2009	2010	2011		012	2013
ICTC		PP	0.19	0.57	0.15		0.07	0.13
		NT	1575	2111	3261	4	326	6375
STI								
No. of STI epise			1861	2196	2545		248	2990
Proportion(%) of	of GUD							
cases			2.58	1.55	0.31		0.68	0.80
% Syphilis posi	tivity		2.09	1.43	0.68	C	0.38	0.81
		PLHIV P	rofile		1		1	
	Total	% on ART	%	15-24	% Illit	erate	%	Female
PLHIV	26	30.77		23.08	15.	38		46.15
	R	Route of trans	missio	n, ART d	ata		·	
			Bl	bod	Needle	Parent		T., <b>1</b>
	Heterosexual		ai tra	nsfusion	syringe	to chi		Jnknown
% of total (N)	80.77	0		0	7.69	11.54	4	0

	HRG Size									
	FSW	MSM	IDU							
Size estimate (mapping data 2009)	656	0	0							
% total HRG	100%	0%	0%							
% Total population	0.06%	0%	0%							
Programme coverage(2013)	660	0	0							
Typology	FSW	N/A	N/A							
Male Mig	ration, 2001 c	ensus								
	Inter-state	Intra-state	Intra-district							
No. of Out-migration	26324	4988	9268							
Three state of Inter-State Migration-Delhi	, Arunachal	Three district of	Intra State							
Pradesh, Uttar pradesh	Migration -Dhemaji, Kamrup,									
		Sonitpur								

	Programme Response												
	2007	2008	2009	2010	2011	2012	2013						
ICTC	1	1	2	2	2	2	2						
РРТСТ	1	1	1	1	1	1	1						
FICTC	0	0	0	0	1	1	3						
STI Clinics	1	1	1	1	1	1	1						
ART centre	0	0	0	0	0	0	0						
Link ART centre	0	0	0	0	0	1	1						
FSW TIs	1	1	1	1	1	1	1						
MSM TIs	0	0	0	0	0	0	0						
IDU TIs	0	0	0	0	0	0	0						
Composite TIs	0	0	0	0	0	0	0						
Blood Banks	1	1	1	1	1	1	1						

#### MORIGAON

#### **District Background:**

Morigaon district is bounded by the mighty Brahmaputra River on the North, Karbi-Anglong district on the south, Nagaon district on the East and KamrupDistric on the West. Total population of the district is 957853 with sex ratio of 974 females per 1000 males. The literacy rate among total population is 69.37%

# **HIV Epidemic Profile:**

- Based on 2013 HSS-ANC data, the level of HIV positivity was low among the ANC.
- The level of HIV positivity was low among the PPTCT (0.02%) and Blood Bank (0.02%) clients. a declining trend is noted during 2007-2013.
- In 2013, HIV positivity among ICTC attendees was (0.13%). The trend of positivity was almost stable since 2009 to 2013.
- TI mapping data shows the presence of FSWs in the district of which 88.22% were street based, 11.60% were home-based and 0.16% was lodge based. No brothel based FSWs in the district.
- The syphilis positivity rate among STI clinic attendees was 14.24% (2013) with a slight increasing trend in 2010 to 2013.
- ART data of 2013 shows that 47 PLHIV from the district were registered on ART centre, out of which 15% were among the age group of 15-24 and 51% were female. 53% of the total registered cases were on ART and 26% were illiterate.
- As per 2011 census, 2.65% of the total population was male migration, out of which 1.36% of interstate, 0.43% of intrastate and 0.85% of intra district.

#### **Key Recommendations:**

• Analysis of risk profile of positive individuals should be done to determine associated factors in HIV prevalence among general population.

• Strengthen outreach programmers through awareness campaigns among migrates and among FSW in the district.

# HIV level and Trends:

						2013
Source of Data		2009	2010	2011	2012	
	РР	NA		0%		0%
HSS-ANC	NT	NA		400		400
	РР	0.04%	0.03%	0%	0%	0.02%
РРТСТ	NT	2551	3388	4022	5776	6779
	РР	0%	0%	0.09%	0%	0.02%
Blood Bank	NT	603	903	1102	1044	10832
		2006	2007	2008		
	PP	1.32%	0%	0%		
HSS-HRG	NT	153	54	239		
		2009	2010	2011	2012	2013
	PP	0.15%	0.19%	0.16%	0.12%	0.13%
ICTC	NT	2741	3083	3207	2529	3746
STI						
No. of STI episodes		1290	907	2366	3222	1040
Proportion(%) of GUD						
cases		1.62%	0.22%	0.42%	0.06%	0.09%
% Syphilis positivity		1.44%	0.09%	0.18%	0.57%	14.24%

PLHIV Profi	le					
	Total	% on ART	% 15-24	% Illiterate	% F	emale
PLHIV	47	53%	15%	26%	5	1%
Route of tran	smission, ART	data				
	Heterosexual	Homosexual	Blood transfusion	Needle syringe	Parent to child	Unknown
% of total (N)	85%	0%	0%	0%	2%	2%

HRG Size			
	FSW	MSM	IDU
Size estimate (mapping data 2009)	218	NA	NA
% total HRG	100%	NA	NA
% of total population	0.02%	NA	NA
Programme coverage(2013)	1060	NA	NA
	Home base-11.60%, Brothel		
	base-0%, street base 88.22%,		
Typology	lodge base-0.16%	NA	NA

Male Migration, 2001 census			
	Inter-state	Intra-state	Intra-district
No. of Out-migration	13040	4170	8228
Three state of Inter-state Migrat Arunachal, Delhi	•		ntar-state migration- agaon, Darrang

	Pro	gramme Re	sponse				
	2007	2008	2009	2010	2011	2012	2013
ICTC	1	1	1	1	1	1	1
PPTCT	1	1	1	1	1	1	1
FICTC	0	0	0	0	2	2	4
STI Clinics	1	1	1	1	1	1	1
ART Centre	0	0	0	0	0	0	0
Link ART Centre	0	0	0	0	0	0	0
FSW TIs		1	2	2	2	2	1
MSM TIs	0	0	0	0	0	0	0
IDU TIs	0	0	0	0	0	0	0
Composite TIs	0	0	0	0	0	0	0
Migrant TIs	1	1	1	1	1	1	0
Blood Banks	1	1	1	1	1	1	1

****

### NAGAON

#### **District Background:**

Nagaon district is situated in central part of Assam nearest to the capital of the State. The district is bounded the north by Sonitpur district south by Karbianglong and DimaHasao east by Karbianglong and Golaghat while on the west it covers Morigaon district. The total population of

the district is 28,26,006 (2011 census). The district has networks both the railways and roadways.

# **HIV Epidemic Profile:**

- Based on 2013 the level of HIV positivity was low among PPTCT (0.07%) and Blood Bank (0.04%) with a stable trend in 2009 2013.
- Based on 2013 the level of HIV positivity was low among ICTC (0.94%) with a stable trend in 2009 2013.
- Syphilis positivity among the STI patient was showing a declining trend between 2009 and 2013.
- ART data of 2013 shows that 508 PLHIV was registered with the ART Centre among which 60% were on ART and 41% were female. 11% of them were in the age group of 15-24 years.
- As per mapping data, the largest group of HRG in the district was Female Sex Worker (FSW) (total 547; 43.58% of the total HRGs) of which majority was street based (61%) followed by home based (39%).
- As per 2001 Census, top three states for out migrant were Nagaland, West Bengal and Delhi.
- The top three destinations for out-of-district migration were Sonitpur, Golaghat and Sibsagar.

# **Key Recommendations:**

• To decline positive among Blood Donors it is necessary to increase awareness for voluntary Blood Donation.

• Strengthen awareness campaigns among HRGs and general population through outreach activities.

# HIV level & Trends

Source of Data		2009	2010	2011	2012	2013
HSS ANC	PP	NA		0.25%		0%
	NT	NA		400		400
РРТСТ	РР	0.05%	0.02%	0.05%	0.10%	0.07%
	NT	7360	11290	13802	16367	15870
Blood Bank	РР	0.06%	0.12%	0.07%	0.05%	0.04%
	NT	10419	12061	13558	13775	12688
		2006	2007	2008		
HSS-HRG	РР	1.76%	0.69%	1.41%	NA	NA
	NT	397	1430	1773	NA	NA
		2009	2010	2011	2012	2013
ICTC	PP	1.48%	1.06%	0.98%	1.59%	0.94%
	NT	1614	2727	6597	6005	7747
STI						
No. of STI episodes		744	1038	1467	1483	1004
Proportion(%) of GUD cases		5.91%	8.38%	5.45%	6.20%	0.60%
% Syphilis positivity		2.87%	1.36%	1.07%	0.30%	0.00%

			PLHIV Profil	e	
PLHIV	Total	% on ART	% 15-24	% of illiterate	% Female
	508	60%	11%	Not Available	41%

# Route of transmission of ART data: Data not available

# **HRG Size:**

	FSW	MSM	IDU		
Size estimate (mapping data 2009)	547	404	304		
% total HRG	43.58%	32.19%	24.22%		
% Total population	0.019%	0.014%	0.01%		
Programme coverage (2013)	1000	0	400		
Typology	Home Based 39%, Street based 61%				

	Male Migration, 2001 census									
			Inte	Inter-state		Intra-district				
	4	41676 19828			828					
Top three state of Inte Nagaland, West Benga	-		s for intra at and Sib		gration:					
		Progra	mme Resp	onse						
	2007	2008	2009	2010	2011	2012	2013			
ICTC	1	3	4	4	4	4	4			
РРТСТ	1	1	1	1	1	1	1			
FICTC	0	0	0	0	5	5	5			
STI Clinics	0	1	1	1	1	1	1			
ART center	0	0	0	0	0	0	0			
Link ART center	0	0	1	1	1	1	1			
FSW TIs	0	2	2	2	2	2	2			
MSM TIs	0	0	0	0	0	0	0			
IDU TIs	0	0	0 1 1 1 0							
Composite TIs	0	0	0	0 0 0 0 1						
Blood Banks	1	1	1	1	4	4	4			

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## NALBARI

#### **District Background:**

Nalbari District was created in 1957 when it was divided from kamrup district on 1st June 2004. The district has population of 769919 with 395804 males and 374115 females. The literacy rate is 79.58% and the sex ratio is 945 females per 1000 males. Total geographical area of district is 2257 square KMs.

# **HIV Epidemic Profile:**

• Based on 2013 PPTCT data, the level of HIV positivity was low among PPTCT with a stable trend in 2009 - 2013.

• In 2013, HIV positivity among ICTC (0.16) with declining trend at low levels. There was a stable trend among all ICTC attendees.

• As per mapping conducted in 2009 FSW (216; 43.72% of total HRG) FSW followed by 52.72% were street based while 83.33% were home based. & MSM (278; 56.27% of total HRG). Followed by 45.27% kothi, panthi, 39.43% and double decker15.29%.

• As per the 2001Census, 6.26% of the total population was male migrant. Out of which inter state8.06% and inter district 54.87%.

• Total 113 PLHIV registered at Anti-Retroviral Therapy (ART) centre, out of which 15% were 15-24 years of age, 61% were on ART, 12% were illiterate and 30.08% female.

• HIV and RTI/STI awareness rate among women was 56.3% and 8.9%, respectively (DLHS-III).

## **Key Recommendations:**

• Analysis of risk profile of positive individuals should be done to determine associated factors in HIV prevalence among general population.

• Strengthen outreach programmes through awareness campaigns among FSW and MSM and migrants and among truckers in truck halt points and highways in the district.

• Since the largest HRG was FSW and MSM, assessment of the size and profile of FSW and MSM group, will help in understanding district vulnerabilities.

# HIV level and Trends:

Source of Data		2009	2011	2010	2012	2013
	PP			1.25		
HSS-ANC	NT			400		
	РР	0.02	0.01	0.01	0	0
РРТСТ	NT	6700	7493	7847	6816	8354
	PP	0	0	0	0.04	0.1
Blood Bank	NT	1640	1985	1511	2014	1843
		2006	2007	2008		
	PP	0	0	0	0	0
HSS-HRG	NT	0	0	0	0	0
		2009	2010	2011	2012	2013
	РР	0.3%	0.13%	0.25%	0.23%	0.15%
ICTC	NT	2302	3704	4797	4588	5678
STI						
No. of STI episodes		748	1000	1380	1342	1474
Proportion(%) of GUD						
cases		9.62%	1.9%	1.95%	0.44%	0.47%
% Syphilis positivity		2.94%	1.61%	0.23%	0.00%	0.00%

PLHIV Profile							
	Total	% on ART	% 15-24	% Illitera	ite %	6 Female	
PLHIV	113	61.06	15.04%	12.39% 30.08%		30.08%	
	Route of transmission, ART data						
			Blood	Needle	Parent		
	Heterosexual	Homosexual	transfusion	syringe	to child	Unknown	
% of total							
(N=)113	74.33%	11.50%	0%	1.77%	0.88%	3.53%	

HRG Size						
	FSW	MSM	IDU			
Size estimate (mapping data 2009)	216	278	0			
% total HRG	43.72%	56.27%	0%			
% Total population	0.023%	0.04%	0%			
Programme coverage(2013)	920	460	0			
Typology	Street based (52.72%), Home based (47.28%)	Kothi (45.27%), Panthi (39.43%), Double-decker (15.29%)	0			

	Ma	ale Migra	tion, 200	1 census				
	Inter-	Inter-state		Intra-state		Intra-district		
No. of Out-migration	200	00	1	13608		9192		
Top three states for inte Delhi/Arunachalprac	•		Тор			-district m Bongaigao	•	
		Progran	nme Resp	oonse				
	2007	2008	2009	2010	2011	2012	2013	
ICTC	1	2	2	2	2	2	2	
РРТСТ	1	1	1	1	1	1	1	
FICTC	0	0	0	0	0	0	1	
PPP ICTC	0	0	0	0	0	1	1	
STI Clinics	1	1	1	1	1	1	1	
ART Centre	0	0	0	0	0	0	0	
Link ART Centre	0	0	0	0	0	0	0	
FSW TIs	1	1	1	2	2	2	2	
MSM TIs	0	1	1	1	1	1	1	
IDU TIs	0	0	0 0 0 0 0					
Composite TIs	0	1	1	1 1 1 1 1				
Blood Banks	1	1	2	2	2	2	2	

# SIBSAGAR

## **District Background:**

Sibsagar is a famous historical district being the seat of the Ahom kingdom for many years. Jorhat and Golaghat district were the part of Sibsagar before becoming independent district. According to the 2011 census, Sibsagar district has a population of 1,150,253. The district has a population density of 431 inhabitants per square KM.

# **HIV Epidemic Profile:**

- The HIV positivity level was low among PPTCT (0.02%) clients in 2013 and it shows a decreasing trend in 2009 to 2013.
- Based on 2013 the HIV positivity level was low among ICTC (0.27%) and Blood Bank (0.06%) with a stable trend in 2009 to 2013.
- In 2009, HIV prevalence among ICTC client was (1.22%) and in 2013 (0.27%) with a declining trend.
- .As per mapping conducted, MSM (483, 61.68% of total HRG) was the largest HRG in the district followed by street based (61%) & home based (39%).
- In 2009, GUD cases were 3.91% and decline to 0.82% in 2013.
- As per 2001 Census, top three interstate out migration states were Bihar Nagaland and Arunachal Pradesh.
- The top three destinations for out-of-district migration were Dibrugarh, Kamrup and Jorhat.

## **Key Recommendations:**

• Carry out in-depth analysis of ANC data to assess risk factors of HIV transmission among general population.

• Strengthen awareness campaigns among HRG's and general people through outreach.

## HIV level and Trends:

Source of Data		2009	2010	2011	2012	2013
HSS ANC	РР	NA		0		0
	NT	NA		388		400
РРТСТ	РР	0.07%	0.03%	0.00%	0.00%	0.02%
	NT	2746	3364	4936	4593	5787
Blood Bank	РР	0.06%	0.00%	0.13%	0.00%	0.06%
	NT	3504	2882	3118	3163	3199
		2006	2007	2008		
HSS-HRG	PP	Na	data Availa	h1.		
	NT	INO	o data Avalla	ble		
		2009	2010	2011	2012	2013
ICTC	РР	1.22%	0.28%	0.30%	0.28%	0.27%
	NT	1063	1807	2986	2173	3742
STI						
No. of STI episodes		818	998	1093	1047	725
Proportion(%) of						
GUD cases		3.91%	3.23%	3.56%	0.76%	0.82%
% Syphilis positivity		6.02%	2.48%	1.16%	0.15%	0.96%

	PLHIV Profile							
	Total	% on	ART	% 15-24	% I	% Female		
PLHIV	122	66%	66%		37%	37%		
	T	Route of tra	,		1			
			Needle	Blood	Parent to			
	Heterosexual	Homosexual	Syringe	transfusion	child	Unknown		
% of total	88.6%	5.8%	0.8%	1.5%	3.3%	0%		
(N=)								

HRG Size			
	FSW	MSM	IDU
Size estimate (mapping data 2009)	300	483	0
% total HRG	38.31%	61.68%	0.00%
% Total population	0.02%	0.04%	0%
Programme coverage(2013)	1000	400	0
Typology	Home Based 39%	Street Based 61 %	

Male Migration, 2001 census						
	Inter-state	Intra-state	Intra-district			
No. of Out- migration	20789	NA	10252			
Top three State of Inter State Migration: Bihar, Nagaland and Arunachal Pradesh		Top three districts fo Dibrugarh, Kamrup	or intra-state migration: and Jorhat			

	Programme Response							
	2007	2008	2009	2011	2012	2013		
ICTC	1	1	2	2	2	2		
РРТСТ	1	1	1	1	1	1		
FICTC	0	0	0	1	2	3		
PPP ICTC	0	0	0	0	0	0		
STI Clinics	1	1	1	1	1	1		
ART centre	0	0	0	0	0	0		
Link ART centre	0	0	0	0	0	1		
FSW TIs	2	1	1	1	1	1		
MSM TIs	0	1	1	1	1	1		
IDU TIs	0	0	0	0	0	0		
Composite TIs	0	0	0	0	0	0		
Blood Banks	1	3	3	3	3	3		

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### SONITPUR

#### **District Background:**

Sonitpur is an administrative district of ASSAM with its headquarters at Tezpur. According to 2011 census, Sonitpur has a population of 1,925,975. Sonitpur district is spread over an area of 5324 sq. KMs. In terms of population it ranks third in Assam after Kamrup and Nagaon districts. The sex ratio of the district is 929 females per 1000 males.

# **Epidemic Profile:**

- Based on 2013, PPTCT (0.04%) and Blood bank (0.03%), the level of HIV prevalence among general population is low with a stable trend during 2009 to 2013.
- Based on 2013 ICTC data, HIV prevalence among high risk and vulnerable populations in Sonitpur district is Low (0.53%) with a stable trend during 2009 to 2013.
- In 2013, 2209 STI/RTI episodes were treated in Sonitpur district. The rate ofSyphis positive showing a declining trend during 2009 to 2013.
- Based on 2013, 106 PLHIV registered at Anti-Retroviral Therapy (ART) Centre, out of which 62.26% were on ART, 10.38% were 15-24 years of age, 16.04% were illiterate and 37.74% were female.
- Based on 2013, ART data, the heterosexual route of transmission was highest with 86.79, Blood transfusion=0.94%, Needle syringe=1.89%, Parent to Child= 1.89% and Unknown=8.49%.
- As per mapping conducted FSW (852; 98.73% of total HRG) was the largest HRG in the district.
- FSW typology followed by Home based 43.02%, Street based 44.95% &Hotel / Lodge based 12.01%
- As per 2001 Census, 4.23% of the total population was male migrant population. Out of which 2.36% interstate, 0.35% inter-districts and 1.53% intra district.

- Since the highest HRG was FSW, assessment of the size and profile of FSW group will help to understand district vulnerabilities.
- Strengthen outreach programmes through awareness campaigns for general population in the district.

# HIV level and Trends:

Data Source		2009	2010	2011	2012	2013
	РР					0
HSS ANC	NT					400
	PP	0.03	0.05	0.05	0.05	0.04
PPTCT	NT	5742	9740	15029	16877	17624
	PP	0.05	0.02	0.06	0.06	0.03
Blood Bank	NT	8120	9900	8858	10114	9974
		2006	2007	2008		
	РР	NA	NA	0		
HSS-HRG	NT	NA	NA	241		
		2009	2010	2011	2012	2013
	РР	0.75	0.78	0.53	0.75	0.53
ICTC	NT	2674	2663	5431	7363	9256
STI						
No. of STI episodes		611	1856	2423	2827	2209
Proportion(%) of GUD cases		33.38	5.23	2.15	3.5	1.49
% Syphilis positivity		1.49	1.55	0.82	2.34	0

PLHIV Profile							
	Total	% on ART	% 15-24	% Illiterat	e %	Female	
PLHIV	106	6.26	10.38	16.04	16.04 37.74		
	]	Route of transm	ission, ART d	ata			
	Heterosexual	Homosexual	Blood transfusion	Needle syringe	Parent to child	Unknown	
% of total (N=)	86.79	0	0.94	1.89	1.89	8.49	

HRG Size						
	FSW	MSM	IDU			
Size estimate (mapping data 2009)	852	0	11			
% total HRG	98.73	0	1.27			
% Total population	0.04	0	0.00005			
Programme coverage(2013)	800	0	0			
	Home Based=43.02%					
	Brothel Based=0%					
	Street Based=44.95%					
Typology	Hotel-Lodge Based=12.01%					

Male Migration, 2001 census						
Inter-state Intra-district						
No. of Out-migration	39625	5811	25606			
	Top three district of Intra district					
Top three State of Inter State Migrat	tion: Arunachal	migration: Kamrup, Lakhimpur,				
Pradesh, Delhi, West-Be	Darrang					

Programme Response								
	2007	2008	2009	2010	2011	2012	2013	
ICTC	2	3	4	5	5	5	5	
РРТСТ	1	1	1	1	1	1	1	
FICTC	0	0	0	1	2	2	2	
PPP ICTC	0	0	1	1	1	1	1	
STI Clinics	1	1	1	1	1	1	1	
ART centre	0	0	0	0	0	0	0	
Link ART centre	0	0	1	1	1	1	1	
FSW TIs	3	3	3	2	2	2	2	
MSM TIs	0	0	0	0	0	0	0	
IDU TIs	0	0	0	0	0	0	0	
Composite TIs	0	0	0	0	0	0	0	
Blood Banks	3	3	3	3	3	3	3	

## TINSUKIA

#### **District Background:**

Tinsukia District is in Upper Assam and bounded by - in East-South by Arunachal Pradesh, In the South-west by Dibrugarh District and in North by Dhemaji District which is separated from Tinsukia District by the mighty river Brahmaputra. As per 2011 Census data, it has a area of 3790 Sq.Km. Total Popultion is 13,16,948 (Total Male Population is 6,75,986, Total Female Population is 6,60,962). Literacy Rate is 70.92 %.

	Programme Data of Tinsukia District							
Year		2009	2010	2011	2012	2013		
	<b>General Population</b>							
А	HSS ANC							
i	Total No. of Testing			399		399		
ii	Total No. of Positive			1		2		
iii	Percentage							
В	РРТСТ							
iv	Total No. of Testing	1718	4269	6012	5815	6521		
V	Total No. of Positive	2	3	2	2	2		
vi	Percentage	0.12	0.07	0.03	0.03	0.03		
С	Blood Bank							
vii	Total No. of Testing	3810	5118	5423	6097	6288		
viii	Total No. of Positive	1	6	0	2	0		
ix	Percentage	0.03	0.12	0	0.03	0		
D	HSS HRG							
i	Total No. of Testing							
ii	Total No. of Positive							
iii	Percentage							
Е	ICTC							
iv	Total No. of Testing	2674	3316	4430	3507	4865		
V	Total No. of Positive	20	22	17	30	27		
vi	Percentage	0.75	0.66	0.38	0.86	0.55		
F	STI							
x	First Clinic Visit (for the index STI/RTI Complaint)	407	1097	1451	959	599		
	GUD - Non herpetic							
xi	(number)	27	27	23	10	14		
xii	GUD - Herpetic (number)	10	0	2	1	0		
xiii	Total No. of RPR/VDRL Testing	256	969	2818	2731	121		
xiv	Total No. of RPR/VDRL Reactive	14	43	27	14	1		

## UDALGURI

#### **District Background:**

As per 2011 Census, Udalguri district has a population of 8,32,769and administers 2,012 square kilometers of areas with the density of 413 people per sq. km and the north side is Bhutan boarder. Average literacy rate of Udalguriwere 65.41% (male 72.58% and Female 58.05%) and the sex ratio is 973 females per 1000 males.

# **HIV Epidemic Profile:**

- Based on 2013 HSS-ANC data, the level of HIV positivity was low among the ANC clients.
- In 2013, HIV positivity level was low among ICTC attendees (0.27%) with a stable trend during the last 4 years.
- In 2013, 953 episodes of STI/RTI were treated and the syphilis positivity rate among STI clinic attendees was 0%.
- In 2013, according to FSW HRG typology the street based is high (39.95%) in comparison to the home based (34.10%).
- In 2013, of the 66 PLHIV registered at ART centre GMCH, out of which 68.18% initiated on ART. Among the registered cases 12.7% were 15-24 years of age, 15.35 % were illiterate and 35.58% were female.

#### **Key Recommendations:**

• Need to scale up the TI project to cover the MSM HRGs.

		2009	2010	2011	2012	2013
	РР	NA	NA	NA	NA	0%
HSS-ANC	NT	NA	NA	NA	NA	401
DDTCT	PP	NA	NA	NA	NA	NA
PPTCT	NT	NA	NA	NA	NA	NA
Blood Bank	PP	NA	NA	NA	NA	NA
BIOOU BAIK	NT	NA	NA	NA	NA	NA
		2006	2007	2008		
HSS-HRG	PP	NA	NA	NA	NA	NA
	NT	NA	NA	NA	NA	NA
	PP	NA	NA	NA	NA	NA
HSS-STD	NT	NA	NA	NA	NA	NA
		2009	2010	2011	2012	2013
ICTC	PP	0.27	0.07	0.16	0.05	0.27
	NT	2716	2395	3483	3340	2947
STI						
No. of STI episodes		128	67	838	1408	953
Proportion(%) of GUD cases		0%	0%	2.50%	1.06%	0.42
% Syphilis positivity		0%	8.79%	0.15%	0.46%	0%

#### HIV level and Trends

PLHIV Profile									
Total% on ART% 15-24% Illiterate% Female									
PLHIV	66	68.18%	28.78%	18.18%	33	33.33%			
	Route of transmission, ART data								
Heterosexual Homosexual Blood Needle Parent Unkn transfusion syringe to child own									
% of total (N=)	81.81%	1.51%	3.03%	0%	0%	1.51%			

#### **HRG Size**

	1110	GUILU					
	FSW	MSN	M IDU				
Size estimate (mapping data 2009)	NA	NA	NA NA				
% total HRG	NA	NA	A NA				
% Total population	NA	NA	A NA				
Programme coverage(2013)	460	460 NA NA					
HRG Typology (2013)							
	Male Migrati	on, 2001 census					
	Inter-state	Intra-state	Intra-district				
No. of Out- migration	NA	NA	NA				
<b>Top three states for inter-state migration:</b> NA		Top three districts for intra-state migration:NA					

Programme Response								
	2007	2008	2009	2010	2011	2012	2013	
ICTC	0	0	0	2	2	2	2	
РРТСТ	0	0	0	0	0	0	0	
STI Clinics	0	0	0	0	1	1	1	
ART center	0	0	0	0	0	0	0	
Link ART center	0	0	0	0	0	0	0	
FSW TIs	0	0	0	0	0	1	1	
MSM TIs	0	0	0	0	0	0	0	
IDU TIs	0	0	0	0	0	0	0	
Composite TIs	0	0	0	0	0	0	0	
Blood Banks	0	0	0	0	0	0	0	