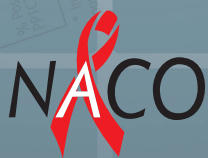
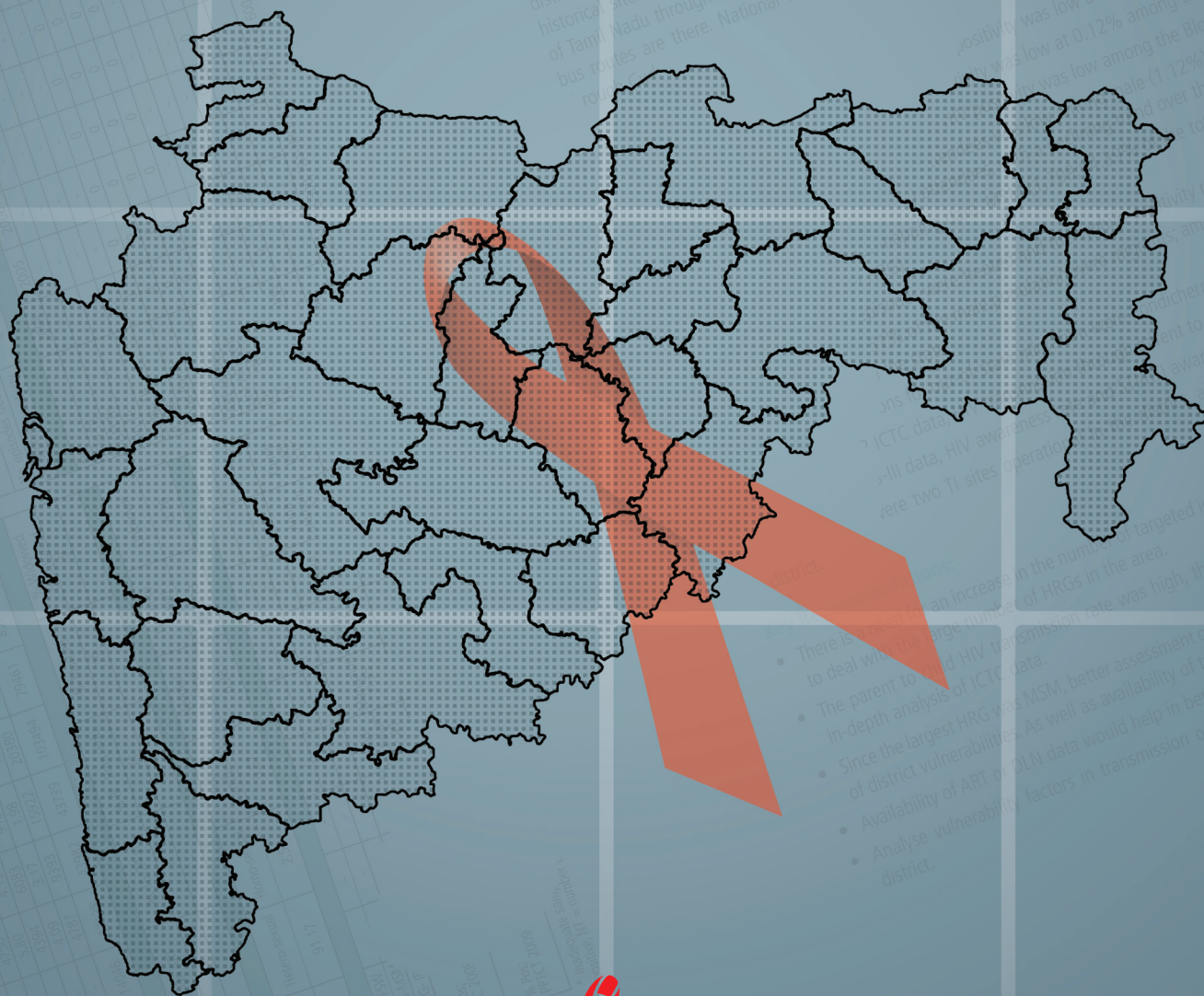


District HIV/AIDS Epidemiological Profiles

developed through Data Triangulation

FACT SHEETS

Maharashtra



National AIDS Control Organisation

India's voice against AIDS

Ministry of Health & Family Welfare, Government of India
6th & 9th Floors, Chandralok Building, 36, Janpath, New Delhi - 110001
www.naco.gov.in

District HIV/AIDS Epidemiological Profiles
developed through Data Triangulation

FACT SHEETS

Maharashtra



National AIDS Control Organisation

India's voice against AIDS

Ministry of Health & Family Welfare, Government of India

6th & 9th Floors, Chandralok Building, 36, Janpath, New Delhi - 110001

www.naco.gov.in

December 2014



Dr. Ashok Kumar, M.D.
F.I.S.C.D & F.I.P.H.A
Dy. Director General

Tele : 91-11-23731956
Fax : 91-11-23731746
E-mail : ddgak.dac@gmail.com



भारत सरकार
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
एड्स नियंत्रण विभाग
राष्ट्रीय एड्स नियंत्रण संगठन
6वां तल, चन्द्रलोक बिल्डिंग, 36 जनपथ, नई दिल्ली-110001
Government of India
Ministry of Health & Family Welfare
Department of AIDS Control
National AIDS Control Organisation
6th Floor, Chandralok Building, 36 Janpath, New Delhi - 110001

FOREWORD

The national response to HIV/AIDS in India over the last decade has yielded encouraging outcomes in terms of prevention and control of HIV. However, in recent years, while declining HIV trends are evident at the national level as well as in most of the States, some low prevalence and vulnerable States have shown rising trends, warranting focused prevention efforts in specific areas.

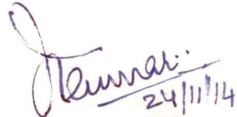
The National AIDS Control Programme (NACP) is strongly evidence-based and evidence-driven. Based on evidence from 'Triangulation of Data' from multiple sources and giving due weightage to vulnerability, the organizational structure of NACP has been decentralized to identified districts for priority attention.

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.

Information collected and analysed during the extensive data triangulation exercise conducted during 2009-10 and 2010-11 and updated data from recent years has been the basis for this technical document on District HIV Epidemiological Profiling. For each district it consists of a brief narrative report on the district background, the HIV/AIDS epidemic profile of the district based on the updated information compiled from all the available sources, and key recommendations based on the identified information gaps and areas for programme interventions. I strongly feel that this document will be highly useful for programme managers at district, State and national levels.

The major outcomes of this exercise were systematic compilation of the available data for a district at one place, identification of information gaps for effective strategic planning at district level, and development of a framework for re-prioritisation of districts under the programme. The other key achievements were institutional strengthening, capacity building of programme staff in data analysis and data use, and involvement and ownership of staff of service delivery units in the entire process.

We congratulate the efforts made by the National Technical Team, the State AIDS Control Societies, and the State Coordinating agencies and all the district level personnel involved in the process. The technical & financial support provided by our partner agencies UNAIDS, USAID, BMGF and PHFI for this exercise is gratefully acknowledged. Special thanks to the officers from CDC, FHI 360, WHO, UNAIDS & JSI for their efforts in finalizing the individual factsheets. The efforts of the Officers of Data Analysis & Dissemination Unit at NACO for planning, coordinating & successfully completing this process and bringing out this valuable document, are appreciated.


24/11/14
(Dr. Ashok Kumar)

Acknowledgement

Under the project 'District Epidemiological Profiling' using Data Triangulation, the National AIDS Control Organisation had undertaken a systematic compilation and analysis of all the available data for 539 districts of the country from multiple sources, including surveillance data and programme data, to derive meaningful inferences. This document is an outcome of the Data Triangulation exercise and provides the district-wise HIV epidemic summary and programme response.

This enormous task would not have been possible without the involvement and ownership of district level programme managers and staff of service delivery units. The contributions of the District AIDS Prevention and Control Unit teams (Programme Managers, M&E Officers), ICTC Supervisors, Counselors, Targeted Intervention staff, ART Research Officers, NRHM District Programme Officers and others who were actively involved in the entire process, are highly appreciated.

The collaborative effort of the State Coordinating Agencies and the State AIDS Control Societies (SACS) involved in identifying programme questions, performing quality checks and data validation, preparation of data tables and compiling data for development of district profile reports, is sincerely acknowledged. The efforts of Deputy Director (M&E), State Epidemiologists and M&E Officers of SACS who implemented this exercise under the guidance and leadership of the Project Directors and Additional Project Directors are also appreciated.

The efforts made by the National Technical Team members who developed guidelines and tools for undertaking this project, and the teams involved in finalizing the database for each district and in preparing the district factsheets, are highly commendable.

The technical & financial support provided by our partner agencies UNAIDS, USAID, BMGF and PHFI for this exercise is gratefully acknowledged. Special thanks to the officers from CDC, FHI 360, WHO, UNAIDS & JSI for their sincere efforts in finalizing the individual district database and factsheets.

Role of Officers of Data Analysis & Dissemination Unit at NACO are deeply appreciated for planning, coordinating & successfully completing this process and bringing out this valuable document.

Contents

Foreword	iii
Acknowledgement	iv
Contents	v
Acronyms	vi
Glossary	vii
Introduction	1
Methodology	2
Specific Notes on Fact sheets	6
District Map of Maharashtra	9
1. Ahmednagar	10
2. Akola	12
3. Amravati	14
4. Aurangabad	16
5. Beed	18
6. Bhandara	20
7. Buldana	22
8. Chandrapur	24
9. Dhule	26
10. Gadchiroli	28
11. Gondia	30
12. Hingoli	32
13. Jalgaon	34
14. Jalna	36
15. Kolhapur	38
16. Latur	40
17. Mumbai	42
18. Nagpur	44
19. Nanded	46
20. Nandurbar	48
21. Nashik	50
22. Osmanabad	52
23. Parbhani	54
24. Pune	56
25. Raigarh	58
26. Ratnagiri	60
27. Sangli	62
28. Satara	64
29. Sindhudurg	66
30. Solapur	68
31. Thane	70
32. Wardha	72
33. Washim	74
34. Yavatmal	76

Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ANC	Antenatal Clinic
ART	Anti-Retroviral Therapy
BSS	Behavioral Surveillance Survey
CCC	Community Care Centre
CMIS	Computerised Management Information System
DEP	District Epidemiological Profile
DIC	Drop-in-Centre
DLHS	District Level Health Survey
DLN	District Level Network for HIV positive people
FSW	Female Sex Workers
HIV	Human Immunodeficiency Virus
HRG	High Risk Group
HSS	HIV Sentinel Surveillance
IBBA	Integrated Biological and Behavioral Assessment
IBBS	Integrated Biological and Behavioral Survey
ICTC	Integrated Counseling and Testing Centre
IDU	Injecting Drug Users
IEC	Information Education & Communication
LAC	Link ART Centre
MSM	Men who have Sex with Men
NACO	National AIDS Control Organisation
NACP	National AIDS Control Programme
NFHS	National Family Health Survey
PLHIV	People Living with HIV
PPTCT	Prevention of Parent to Child Transmission
RRC	Red Ribbon Club
RTI	Reproductive Tract Infection
SACS	State AIDS Control Society
SCA	State Coordinating Agency
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infection
TB	Tuberculosis
TI	Targeted Interventions

Glossary

1. **ART Centre:** Free first line and second line Anti-Retroviral Treatment (ART) is provided to clinically eligible PLHIV at designated centres across the country. As soon as the persons are detected to be HIV positive at ICTC, they are referred to the ART centre for pre-ART registration. At the time of registration, all the baseline investigations are done including CD4 count. If these persons are clinically eligible for treatment, they are started on first line ART. Otherwise, PLHIV are followed up every six months for CD4 count. The number of PLHIV on ART mentioned in the document refers to those on first line ART at NACO-supported ART centres. Another 30,000 PLHIV are estimated to be receiving ART in the private sector.
2. **Blood Safety:** Under the Blood Safety programme, Blood Banks across the country are supported by NACO and voluntary blood donation is strongly promoted to ensure that every blood unit collected is screened and is free from HIV and other infections.
3. **Community Care Centres (CCC):** CCC have been set up in the non-government sector with the objective of providing PLHIV with psychosocial support, counseling for drug adherence and nutrition, treatment of opportunistic infections, home-based care, referral and outreach services for follow up, besides tracing patients lost to follow up and those missing anti-retroviral drugs as per schedule.
4. **Condom Promotion:** The condom promotion strategy under NACP focuses on two aspects: ensuring availability of and creating demand for condoms. There are two channels of condom supply by the Government, namely free and socially marketed. Under the programme, free condoms are distributed to High Risk Groups through TI projects and service delivery outlets such as ICTCs, STI clinics, etc. Under the Targeted Condom Social Marketing Programme, condoms are provided at subsidized rates for HRG as well as general population through traditional and non-traditional condom outlets, rural outlets, and outlets at TIs and truck halt points.
5. **Core Composite TI:** Targeted Interventions providing HIV prevention services to more than one High Risk Group.
6. **Counseling and Testing Services:** Integrated Counseling and Testing Centre (ICTC) is a place where a person is counseled and tested for HIV on his/her own volition (Client-Initiated) or as advised by a health service provider (Provider-Initiated) in a supportive and confidential environment. These centres are the entry points for reinforcing HIV prevention messages and linking HIV positive people to HIV care, support and treatment services. There are several contexts for providing HIV testing services - voluntary counseling and testing, prevention of parent to child transmission, screening of TB patients and diagnostic testing of symptomatic patients.
7. **Drop-in-Centre (DIC):** DIC is a platform to provide PLHIV psycho-social support, linkages with services counseling on drug adherence, nutrition, livelihood and legal issues. They have been set up in the high prevalent districts and are managed primarily by PLHIV networks.
8. **High Risk Groups (HRG):** Populations with high risk behaviour for contracting HIV, include Female Sex Workers (FSW), Men who have Sex with Men (MSM) and Injecting Drug Users (IDU). The other risk groups identified as Bridge Population (between the General population and HRG) include the Single Male Migrants and Long Distance Truckers.

9. **Link ART Centres:** In order to facilitate the delivery of ART services nearer to the homes of beneficiaries, the Link ART Centres (LAC), located mainly at ICTC in the District/Sub-district level hospitals, were set up and linked to nodal ART centres within accessible distance.
10. **PLHIV Networks:** Networks of HIV positive persons have been formed at the national, state and district levels. Such networks act as platforms for People Living with HIV/AIDS (PLHIV) to share their concerns, and seek support and legal aid. They address stigma and discrimination-related cases among their members and also provide social support for those isolated by their family and community. The networks are encouraged to advocate and promote the utilisation of HIV related services.
11. **Prevention of Parent to Child Transmission (PPTCT):** Mother to child transmission of HIV may take place during pregnancy, during childbirth or through breast feeding. To prevent this, under the PPTCT programme every pregnant woman visiting antenatal clinics or visiting hospital at the time of delivery is tested for HIV infection. A pregnant woman found positive for HIV infection is closely followed up to ensure institutional delivery. At the time of delivery, the pregnant woman and the new-born baby are given a single dose of Nevirapine to prevent mother to child transmission of HIV.
12. **Red Ribbon Clubs:** Red Ribbon Clubs (RRC) formed in colleges provide a forum for students to come together to share information on HIV/AIDS and safe behaviours, to discuss related issues and also motivate them to participate in voluntary blood donation.
13. **STI/RTI Services:** Sexually Transmitted Infections/Reproductive Tract Infections increase the risk of HIV transmission significantly. STI/RTI services are aimed at preventing HIV transmission and promoting sexual and reproductive health under the National AIDS Control Programme and the Reproductive and Child Health programme of the National Rural Health Mission (NRHM).
14. **Targeted Intervention:** Targeted Interventions (TI) are peer-led preventive interventions focused on HRG and bridge populations, implemented by Non-Government Organisations and Community-based Organisations in a defined geographic area. They provide prevention services such as behavioural change communication, condom distribution, STI/RTI services, needle and syringe exchange, Opioid substitution therapy, referrals and linkages to health facilities providing HIV/AIDS services, community mobilisation and creating enabling environment.

Introduction

The National AIDS Control Programme under National AIDS Control Organisation 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, behavioural surveys research studies, and 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, behavioural/ vulnerability data and programme data for the district level were compiled and analysed 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.

This technical document consists of the epidemiological profile summary along with the available updated information for each district of the State. Each district summary highlights the key epidemiological features of the district and key recommendations based on these findings. The document would be useful to programme managers, academicians and researchers as a quick reference for the HIV/AIDS situation in a district.

Methodology

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

Table 1: Components of District Epidemiological Profiling

Components of District Profiling	What it Does?	Guiding Elements	Action To Do	Output
Descriptive Analysis	Describes (What? Who? When? Where?)	Themes	Analyse 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 (Fig.1):

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 behaviour, Migration, contextual factors/regional vulnerabilities)
3. Programme response and gaps
4. Information gaps

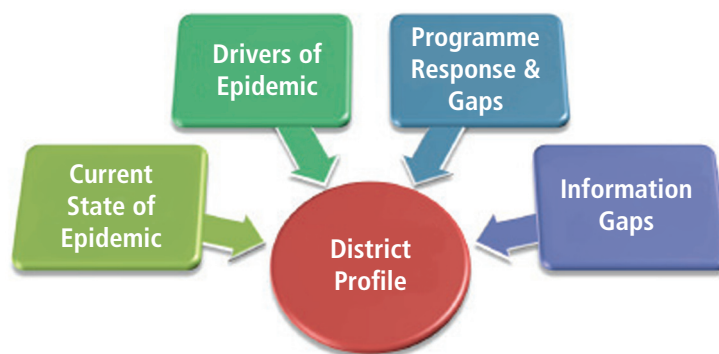


Fig. 1: Thematic Areas of District Profiling
Epidemiological Framework of HIV/AIDS Scenario in the District

Data 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 the time plane or geographical plane. **Triangulation** synthesizes the data on the following three elements to explain the inferences arrived at in the descriptive analysis and provides answers to the programmatic questions.

1. Information on HIV and STIs in different population groups (epidemiological data)
2. Information on vulnerabilities (mapping and behavioural data on Risk Groups, district vulnerabilities)
3. Information on programme response (programme data)

Concept of Data Triangulation: Data Triangulation is an **Analytical Approach** that synthesizes data from multiple sources to improve the understanding of a public health issue and guide programmatic decision-making to address the issue (Fig. 2). By putting different bits of information from different sources into a meaningful framework, it explains and improves the understanding of HIV/AIDS scenario in the district. By providing answers to vital programme questions, it helps in taking effective decisions for planning and implementation of HIV prevention and control efforts. It helps to understand the gap between need and programme response and also helps to identify the information gaps that hinder effective planning.

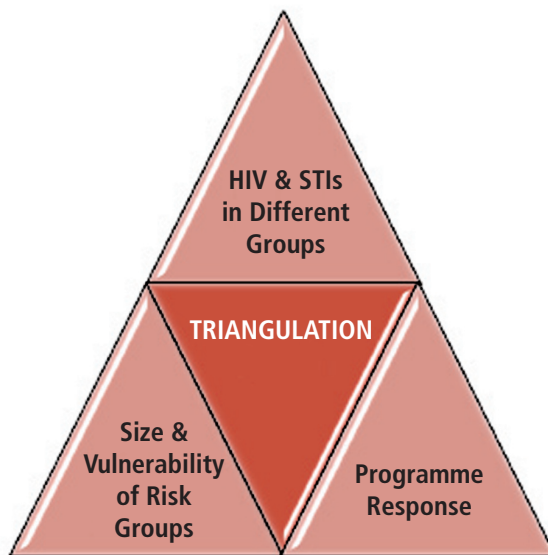


Fig. 2: Conceptual Framework of Data Triangulation
 Synthesis of Epidemiological, Behavioural and Programme Data

The basic principle of Data Triangulation is “to analyse and interpret a dataset in the light of information emerging from other datasets, so that the synthesis offers a better understanding of the issues than what will be inferred from a single dataset.” Triangulation involves **compilation, examination, comparison and collective interpretation** of data from multiple independent data sources, followed by reasonable explanation of facts pertaining to the issue under consideration (Fig. 3). The explanation is aimed towards developing a comprehensive picture of the issue, building an epidemiological framework that depicts the possible interplay among various factors and answering some pre-specified questions.



Fig. 3: Schematic representation of processes involved in Data Triangulation

Other key features of the process of Data Triangulation are as follow:

1. It gives importance to every bit of information
2. It helps overcome limitations and biases inherent in each dataset
3. It adds value to each dataset and improves their utility
4. It gives high importance to quality analysis of data and undertakes thorough quality checks and validation
5. Indicates the level of reliability in any inference or conclusion

Table 2: Data Sources used for District Epidemiological Profiling

Thematic areas for HIV Epidemiological Profiling	Major Sources
HIV Levels, Trends and Differentials	HIV Sentinel Surveillance (HSS); Integrated Biological & Behavioural Assessment (IBBA); ICTC data; PPTCT data; Blood bank data; NFHS-III; Any other HIV prevalence studies
STI Levels, Trends and Differentials	Behavioural Surveys (IBBA); STI Clinic data; Targeted Intervention (TI) data; NFHS-I,II & III; DLHS-I ,II & III; Other Behavioral studies
HIV burden in the district	HIV estimations
Size Estimates of General Population and Other Risk Groups	Census Population Projections; Mapping of HRG; TI data
Profile, Turn-over & Migration of key risk groups	HSS ;IBBA; BSS; Mapping of HRG ;ICTC data; STI Clinic data; TI data; Other Studies on High Risk Groups; DLHS
Size & Patterns of Migration among General Population	Census data; Mapping of Migrants; Population Council studies; Other studies on migrants
Risk Behaviours and Prevention Practices among key risk groups and general population	BSS; IBBA; DLHS; TI data; Mapping of HRG; Other published/ unpublished data
Profile of PLHIV	HSS; IBBA; ICTC data; PPTCT data; ART data; Positive person networks; Blood Bank Data; NFHS-III; Any other HIV prevalence studies
District Vulnerabilities	Local Knowledge; Open sources such as Wikipedia; District Websites; State Government Websites; etc.
Programme Response	Programme reporting through CMIS

Process of District Epidemiological Profiling: The process starts with identifying a broad set of important, actionable and appropriate questions that the programme wants to find answers to, in a given region, and revisits and refines the questions at every step of the process. The process of DEP has the following steps:

1. Understanding thematic areas and questions for District Profiling and Triangulation
2. Review of data sources and assessment of data availability in the district
3. Decision on themes to be described and questions to be answered for the district
4. Compilation of secondary data
5. Quality check for completeness, correctness and consistency
6. Data validation, adjustments and filling data gaps
7. Preparation of data tables with clean data for analysis
8. Data analysis, interpretation and inferences; describe thematic areas
9. Data Triangulation (hypotheses building; answer triangulation questions)
10. Preparation of district and State reports
11. Discussions and consultation with SACS, local experts, district level programme managers and service delivery functionaries on draft reports
12. Presentation and discussion of draft reports with the National Technical Team
13. Finalisation of District Epidemiological Profile reports

Important Outcomes of District Epidemiological Profiling include:

1. Cleaning and validation of programme data (since 2004)
2. Systematic compilation of all data related to HIV for each district at one place for routine use
3. District reports describing the profile of HIV epidemic and programme response in each district
4. Development of framework for re-prioritisation of districts under the programme
5. Prioritisation extended upto Sub-district/Block level with high priority blocks identified
6. Identification of information gaps at district and state level for planning strategic Information activities
7. Capacity building of district level programme managers and staff of service delivery units in handling and analyzing data, enabling them to understand the importance of the data they generate and the need for ensuring its quality, and appreciate the use of data for programme review, decision-making and effecting improvements.
8. Enhanced understanding among the programme managers of HIV epidemic and response in the state and different districts
9. Better use of data in developing District and State Annual Action Plans
10. Institutional strengthening (building state level resource pools) and fostering linkages between programme units and academic institutions for addressing Strategic Information needs in the programme

Specific Notes on Fact sheets

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 makes 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. Data on ANC utilization mentioned in the table refer to the proportion of women who received at least three or more antenatal checkups (Data source: DLHS-III).
7. 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.
8. HIV positivity rates among HSS-HRG, HSS-STD and ICTC general clients disaggregated by sex and nature of client (direct walk-in and referred) 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.
9. Positivity at HSS, PPTCT, Blood bank and ICTC sites is presented only for those years where the sample size is valid i.e. HSS-ANC: ≥ 300 tested, HSS-HRG/STD: ≥ 187 tested, ICTC (male + female/direct walk-in + referred): ≥ 600 tested, PPTCT and BB: ≥ 900 tested.
10. HIV positivity among PPTCT and ICTC attendees at sub-district level wherever data is available is presented under block level details.
11. 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.

12. Information on major vulnerabilities that are influencing the epidemic/high risk behaviour 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
13. 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” .
14. 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” .
15. 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.
16. 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.
17. The number of TIs mentioned in the document includes only NACO-supported TIs. Migrant TIs include source, transit and destination TIs.
18. All maps used in this document have been prepared from the Survey of India.
19. The district wise factsheets include updated information till 2012. Therefore, the districts newly created after 2012 have not been shown as separate districts. The districts with insufficient data are also not included in this report.

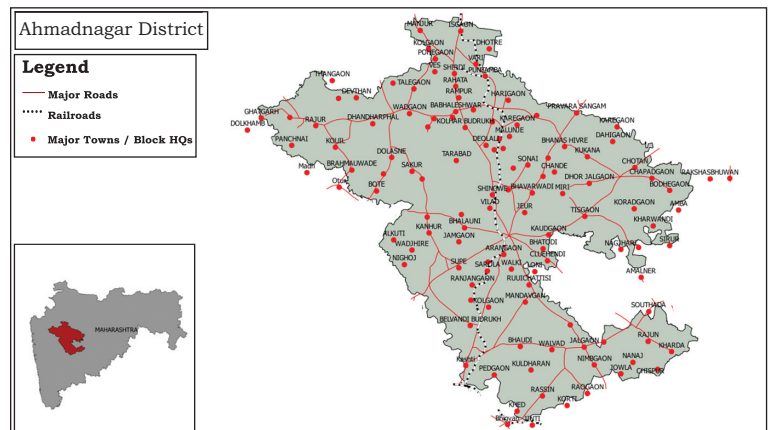
District Map of Maharashtra



Ahmednagar

Background:

Ahmednagar is the largest district of Maharashtra. The neighbouring districts to Ahmednagar are Solapur, Osmanabad, Beed, Aurangabad, Nashik, Thane, and Pune. The district has a population of 45.43 lakh, a sex ratio of 934 females per 1,000 males, and a female literacy rate of 71.15% with an overall literacy rate of 80.22% (Census 2011). It is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme (BRGF). This district is known for the town of Shirdi associated with Sai Baba, attracting a large number of devotees and tourists. Ahmednagar is well connected by roads with various major cities of Maharashtra and other states. National Highway-222 passes through the district.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.13%) among the ANC attendees, while the prevalence for last five rounds showed a fluctuating trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.18%) and blood bank (0.31%) attendees, with an overall decreasing trend for both.
- As per 2010 HSS-FSW data, HIV positivity was high (18.40%) among the FSWs, with a rising trend in the last three recorded years but last five rounds showed fluctuations.
- According to 2012 ICTC data, HIV positivity was low among male (2.85%) and female (3.37%) attendees, as well as among referred (3.06%) attendees and direct walk-ins (3.10%), with a decreasing trend among all the ICTC attendees.
- According to 2008 HRG size mapping data, MSM (465; 55.96% of total HRG) was the largest HRG in the district followed by FSW (366; 44.04% of total HRG).
- As per 2001 Census; 13.24% of the males were migrants, among them 1.20% migrated to other states and 40.02% migrated to other districts within the state.
- In 2012, the number of STI/RTI episodes treated was 11,554 and the syphilis positivity rate among STI clinic attendees was 0.09%.
- The top two destinations for out-of-state migration were Surat, Gujarat and Belgaum, Karnataka.
- As per 2012 ICTC data, HIV transmission through parent to child route accounted for 8.86% of the total route of HIV transmissions in the district
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 91.6% and 38.6%, respectively.

Key Recommendations:

- The parent to child HIV transmission rate was high, thus more needs to be done to understand the profile of these attendees through in-depth analysis of ICTC & ART data.
- The prevalence and risk behavior among MSM and its sexual dynamics with FSWs and migrants requires IBBS like or HSS surveys to provide further information to understand the epidemic in the district among risk groups and its HIV spread.
- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population.
- Ensuring the quality of services for HIV prevention and control and ART support to be strengthened further to keep the epidemic contained.
- Analyze risk factors and client profiles among FSWs, due to the high level of positivity among the group.
- Strengthen outreach programme for risk groups and migrants through awareness campaigns around source and transit points like railway stations and bus stands and using mass and mid media activities.

Ahmednagar

District Population: 45,43,083 (4.04% of Maharashtra Population); Female Literacy¹: 71.15%; ANC Utilization²: 83.3%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	1.62	0.75	1.00	0.51		0.63		0.13	
	NT ⁴	801	800	800	785		800		800	
PPTCT	PP	2.66	1.39	0.73	0.56	0.27	0.23	-	0.18	
	NT	1352	5533	16390	28076	40977	39220	-	40530	
Blood Bank	PP	0	0	0.48	0.55	0.55	0.58	0.43	0.31	
	NT	0	0	11018	27562	36746	37443	31471	1966	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	16.40	26.80	8.80	14.80		18.40		-	
	NT	250	250	250	250		250		-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	32.76	23.44	15.22	10.33	5.56	3.97	2.89	2.85	
	NT	464	1024	4764	13234	20608	26643	42124	32894	
ICTC Female	PP	38.08	25.73	14.24	13.99	6.56	5.03	3.28	3.37	
	NT	260	754	2788	8736	15302	19406	29530	25228	
ICTC Referred	PP	38.16	23.95	17.19	11.16	5.53	4.21	2.88	3.06	
	NT	152	593	2117	6900	14275	21400	35018	29281	
Walk-in	PP	33.74	24.64	13.95	12.07	6.28	4.60	3.22	3.10	
	NT	572	1185	5435	15070	21635	24649	36636	28841	
Total tested at ICTCs ⁵	NT	2076	7311	23942	50041	81886	85269	71654	98652	

PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (11771)	47	35	23	10	8					
DLN (NA)	-	-	-	-	-					

Route of HIV Transmission, ICTC 2012						
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown
% of Total (N=1739)	89.13	0.81	0.23	0.06	8.86	0.92

Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	366	465	-	278810	3333	111585	163892			
% Total HRG	44.04	55.96	-	13.24	0.16	5.30	7.78			
% Total Pop.	0.01	0.01	-	100	1.20	40.02	58.78			
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Surat, Gujarat	Belgaum, Karnataka	Indore, Madhya Pradesh	Valsad, Gujarat	Surat, Gujarat		
% <25 yrs	-	-	-							
% Married	-	-	-							

	STI/RTI				
	2009	2010	2011	2012	
No. episodes treated	808	3429	11711	11554	
% Syphilis positivity	0	0.22	0.42	0.09	

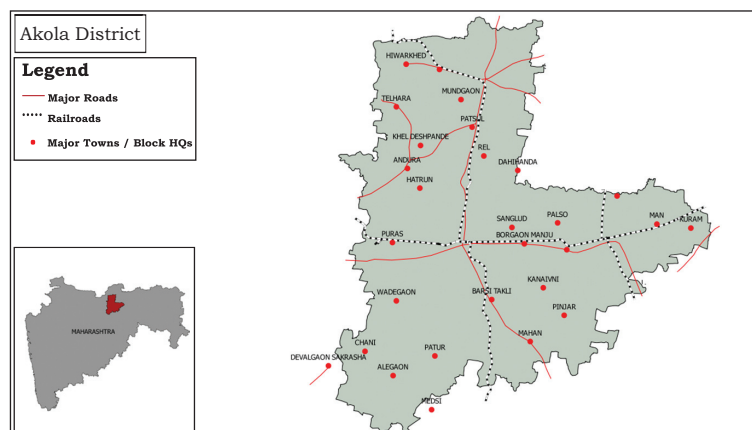
	Programme Response										
	No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	1	1	1	1	1	1	1	1	1	
MSM TIs	-	1	1	1	1	1	1	1	1	1	
IDU TIs	-	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	-	
ICTCs	10	12	30	30	30	41	56	86	90		
Blood Banks	2	2	2	2	2	2	3	3	3		
STI clinics	-	-	-	-	-	-	-	-	-		
ART centres	-	-	-	-	-	-	-	-	-		
Link ART centres	-	-	-	-	-	-	-	-	-		
PLHIV Networks	-	1	1	1	1	1	1	1	1		
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-		
Comm. care centres	-	-	-	-	-	-	-	-	-		
Drop-in-centres	-	-	1	1	1	1	1	1	1		
Condom outlets	-	-	-	-	-	-	9	15	38		

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Akola

Background:

Akola forms the central part of Amravati division, and was a former British Raj Berar province. It is surrounded by Amravati in the north, Washim in the south, Amravati and Washim in the east and Buldhana in the west. The district has a population of 18.18 lakh, a sex ratio of 942 females per 1,000 males, and a female literacy rate of 81.91% with an overall literacy rate of 87.55% (Census 2011). The economy of Akola is mostly agriculture based. Akola is well connected via roads and railway, and National Highway 6 connects it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2010 HSS-ANC data, HIV prevalence was low (0.13%) among the ANC attendees, with a decreasing trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.10%) and blood bank (0.42%) attendees. HIV positivity levels showed a fluctuating trend for PPTCT, while a decreasing trend was observed for Blood Bank attendees till 2011, but a sudden rise was seen in 2012.
- As per 2008 HSS-FSW data, HIV positivity was moderate (6%) among the FSWs, with a fluctuating trend for last three rounds.
- According to 2012 ICTC data, HIV prevalence was low among male (1.50%) and female (1.62%) attendees, as well as among referred (0.82%) attendees and direct walk-ins (2.49%), with a decreasing trend among all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,234; 77.56% of total HRG) was the largest HRG in the district followed by MSM (357; 22.44% of total HRG).
- As per 2001 Census; 11.73% of the males were migrants, among them 5.06% migrated to other states and 47.75% migrated to other districts within the state.
- In 2012, the number of STI/RTI episodes treated was 5,033 and the syphilis positivity rate among STI clinic attendees was 0.11%.
- The top two destinations for out-of-state migration were Surat in Gujarat and Indore in Madhya Pradesh.
- As per 2012 ICTC data, 5.26% of the district's total route of HIV transmissions was the transmission through parent to child.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 80% and 21.2%, respectively.
- In 2012, total of only one TI site for FSWs was operational in the district.
- In 2012, a total of 35 ICTCs were operational, and an overall 70,669 attendees were tested for HIV in the district.

Key Recommendations:

- HIV prevalence and risk behavior among MSM and its sexual dynamics with FSWs and migrants requires IBBS like or HSS surveys or operational research, to provide further information to understand the epidemic in the district among risk groups and HIV spread.
- Ensuring the quality of services for HIV prevention and control, and ART support to be strengthened further to keep the epidemic contained.
- There is a need to strengthen quality of services provided through number of TI sites in the district, with respect to coverage and quality of services.
- Analyze risk factors and client profiles among FSWs, due to the moderate level of HIV positivity among the group and their large number in the district.
- The parent to child HIV transmission rate was high, thus more needs to be done to understand the profile of these attendees through in-depth analysis of ICTC data. Strengthen outreach programme for risk groups and migrants through awareness campaigns around source and transit points like railway stations and bus stands and using mass and mid media activities.

Akola

District Population: 18,18,617 (1.62% of Maharashtra Population); Female Literacy¹: 81.91%; ANC Utilization²: 69.1%

		HIV Levels and Trends ³									
		2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	0	0.63	0.63	0.51		0.13				
	NT ⁴	800	800	800	787		800				
PPTCT	PP	0.73	0.86	1.01	0.56	0.21	1.11				0.10
	NT	2868	4476	10176	15434	19218	18304				30807
Blood Bank	PP	-	-	0.47	0.54	0.29	0.33	0.21	0.42		
	NT	-	-	1929	19588	21496	19116	11184	3796		
HSS-STD	PP	10	9.20	13.20	11.01						
	NT	250	250	250	227						
HSS-FSW	PP	-	5.20	14.80	6.00						
	NT	-	250	250	250						
HSS-MSM	PP	-	-	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-	-	-
HSS-IDU	PP	-	-	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-	-	-
ICTC Male	PP	14.14	21.77	9.79	4.86	4.86	3.81	2.24	1.50		
	NT	856	1277	5261	7318	7318	11211	14541	23241		
ICTC Female	PP	12.27	17.53	8.90	4.92	4.92	3.90	2.36	1.62		
	NT	652	793	3170	4574	4574	7325	10321	16621		
ICTC Referred	PP	13.81	18.04	7.01	3.86	3.86	2.75	1.22	0.82		
	NT	536	593	2039	2899	2899	6591	12831	22381		
Walk-in	PP	13.07	20.99	10.23	5.22	5.22	4.45	3.44	2.49		
	NT	972	1477	6392	8993	8993	11945	12031	17481		
Total tested at ICTCs ⁵	PP	4376	6496	18607	27326	35515	36840	24862	70669		
	NT	-	-	-	-	-	-	-	-		
PLHIV Profile, 2012											
	% On ART		% 15-24 yrs		% Ill., Prim. Edu.		% Married		% Widowed or Divorced		
ART (7488)	32	12		65		47		13			
DLN (NA)	-	-	-	-	-	-	-	-	-	-	-
Route of HIV Transmission, ICTC 2012											
	Hetero-sexual		Homo-sexual		Blood Transfusion		Needle/ Syringe		Parent to Child		Unknown
% of Total (N=551)	93.83	0	0.54	0	5.26	0.36					
Block-Level Details											
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-	-

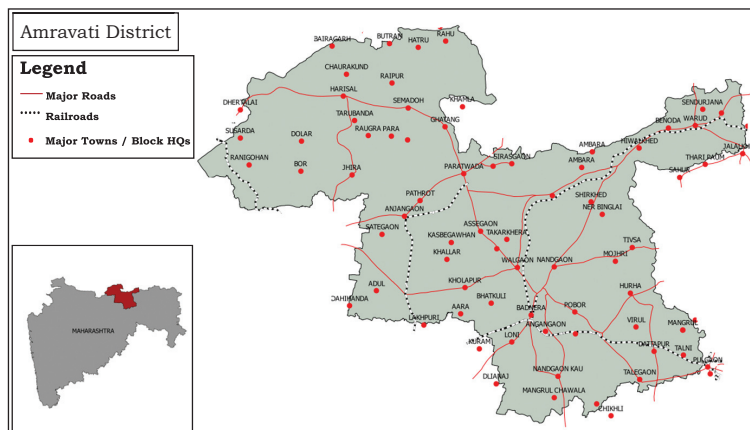
* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

		HRG Size				Vulnerabilities					
		FSW	MSM	IDU	Male Migration, 2001 Census		Top 5 districts for inter-state out-migration				
					Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)		1234	357	-							
					No. out-migration	98645	4991	47104	46550		
% Total HRG		77.56	22.44	-	% of male pop.	11.73	0.59	5.60	5.54		
	% Total Pop.	-	-	-	% total migration	100	5.06	47.75	47.19		
Program Target	NA	NA	NA	NA							
Program Coverage	-	-	-	-							
Typology	Home based - NA;	Kothi - NA;	Daily Injectors- NA;								
	Brothel based- NA;	Pantli - NA;	Non daily Injectors- NA								
	Street based - NA	Double decker- NA									
% <25 yrs	-	-	-	-							
% Married	-	-	-	-							
STI/RTI											
No. episodes treated	2009	2010	2011	2012							
% Syphilis positivity	713	2801	4796	5033							
	0	0.20	0.08	0.11							
Programme Response											
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012		
FSW TIs	1	1	1	1	1	-	-	1	1		
MSM TIs	-	-	-	-	-	-	-	-	-		
IDU TIs	-	-	-	-	-	-	-	-	-		
Comp. TIs	-	-	-	-	-	-	-	-	-		
ICTCs	2	4	12	12	12	12	20	30	35		
Blood Banks	3	3	3	3	3	3	3	3	3		
STI clinics	-	-	-	-	-	-	-	-	-		
ART centres	-	-	1	1	1	1	1	1	1		
Link ART centres	-	-	-	-	-	-	-	4	4		
PLHIV Networks	-	-	-	-	1	2	2	2	2		
Red Ribbon Clubs	-	-	-	-	-	-	3	5	9		
Comm. care centres	-	-	-	-	-	1	1	1	1		
Drop-in-centres	-	-	-	-	-	-	-	1	1		
Condom outlets	-	-	-	-	-	-	100	122	162		

Amravati

Background:

Amravati is bordered by Betul district of Madhya Pradesh to the north, and by Nagpur to the northeast, Wardha to the east, Yavatmal to the south, Washim to the southwest, and Akola and Buldhana to the west. It has a population of 28.87 lakh, a sex ratio of 947 females per 1,000 males, and a female literacy rate of 83.52% with an overall literacy rate of 88.23% (Census 2011). The district is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme (BRGF). Amravati is the main growing region for the Ellachipur Sanman Chili pepper. It is also a major station in the Central Railway line. Road network is also developed in the district, with National Highway 6 connecting it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2010 HSS-ANC data, HIV prevalence was moderate (0.50%) among the ANC attendees, with an increasing trend in the last three rounds.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low among PPTCT (0.14%) and Blood bank (0.18%) attendees. A fluctuating trend was observed for PPTCT attendees in the last three recordings, whereas, a decreasing trend was seen for blood bank attendees in the last three years.
- According to 2012 ICTC data, HIV positivity was low among male (1.58%) and female (1.46%) attendees, as well as among referred (1.92%) and direct walk-in (1.24%) attendees, with a stable trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,658; 95.56% of total HRG) was the largest HRG in the district.
- As per 2001 Census; 10.30% of the males were migrants, among them 4.91% migrated to other states and 34.61% migrated to other districts within the state.
- In 2012, the number of STI/RTI episodes treated was 7,034 and the syphilis positivity rate among STI clinic attendees was 0.01%.
- The top two destinations for out-of-state migration were Surat in Gujarat and Betul in Madhya Pradesh.
- As per 2012 ICTC data, 6.47% of the HIV transmission in the district was through parent to child route.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 63.9% and 21.7%, respectively.
- The estimate of FSWs was considerable in the district, but there was only one FSW targeted intervention site operational in the district.
- In 2012, 58 ICTCs were functional and a total of 93,073 attendees got tested for HIV in the district.

Key Recommendations:

- There is a need to increase the number of TI's and ensuring quality of service provision in the district due to sizable FSW population.
- Conduct socio-demographic analysis of HSS ANC data to understand risk factors for HIV epidemic among general population.
- Due to the high rate of parent to child HIV transmission, as well as large numbers of migrants, it is recommended to strengthen positive prevention and PPTCT programmes in order to curb the possible spread of HIV to migrants & their spouses.
- Continue HIV prevention strategies to maintain HIV prevalence at low levels, due to a low HIV prevalence of positivity in the district.
- Strengthen outreach programme for risk groups and migrants through awareness campaigns around source and transit points, like railway stations and bus stands and using mass and media activities.

Amravati

District Population: 28,87,826 (2.57% of Maharashtra Population); Female Literacy¹: 83.52%; ANC Utilization²: 77.8%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴ 0.63 NT ⁴ 800	0.25 800	0.63 800	0.13 783		0.25 800		0.50 800		
PPTCT	PP 0.21 NT 6290	0.46 12746	0.42 17908	0.34 24403	0.20 25464	0.45 24424		0.14 63391		
Blood Bank	PP - NT -	- -	0.35 4830	0.30 19770	0.35 27023	0.34 24600	0.29 21103	0.18 8649		
HSS-STD	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
HSS-FSW	PP - NT -	- -	- -	4.00 250		- -	- -	- -		
HSS-MSM	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
HSS-IDU	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
ICTC Male	PP 12.88 NT 1095	9.62 1872	4.09 7256	2.92 13063	2.33 15320	1.71 20643	1.32 32407	1.58 19087		
ICTC Female	PP 15.51 NT 503	14.53 750	4.81 2829	2.87 6233	2.24 7629	2.06 10121	1.30 17201	1.46 10595		
ICTC Referred	PP 15.38 NT 624	13.76 1163	7.14 3373	4.60 5104	2.92 8568	2.12 13268	1.73 19209	1.92 12987		
ICTC Direct	PP 12.63 NT 974	8.84 1459	2.86 6712	2.29 14192	1.93 14381	1.61 17496	1.06 30399	1.24 16695		
Walk-in	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
Total tested at ICTCs ⁵	NT 7888	15368	27993	43699	53611	55188	49608	93073		
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (2859)	45	7	-	-	-					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=479)	90.19	0.21	0	0.21	6.47	2.92				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-				
No. HRG-MSM	-	-	-	-	-	-				
No. HRG-IDU	-	-	-	-	-	-				
% Pos. ICTC	-	-	-	-	-	-				
% Pos. PPTCT	-	-	-	-	-	-				

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

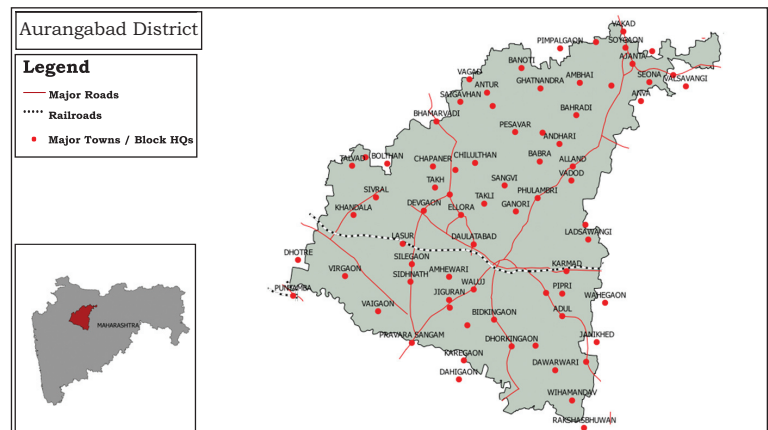
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	1658	77	-							
% Total HRG	95.56	4.44	-							
% Total Pop.	0.06	0	-							
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Surat, Gujarat	Betul, Madhya Pradesh	East Nimar, Madhya Pradesh	Chhindwara, Madhya Pradesh	Daman, Daman & Diu		
% <25 yrs	-	-	-							
% Married	-	-	-							
	STI/RTI									
No. episodes treated	2009 877	2010 3671	2011 5187	2012 7034						
% Syphilis positivity	0	0	0.22	0.01						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	1	1	1	1	1	-	1	
MSM TIs	-	-	-	-	-	-	-	-	-	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	3	5	16	16	16	28	45	52	58	
Blood Banks	1	1	1	1	1	1	1	1	1	
STI clinics	-	-	-	-	-	2	2	2	2	
ART centres	-	-	-	-	-	1	1	1	1	
Link ART centres	-	-	-	-	-	-	-	3	3	
PLHIV Networks	-	-	-	-	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	3	6	25	27	
Comm. care centres	-	-	-	-	1	1	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	1	1	
Condom outlets	-	-	-	-	-	1	86	59	28	

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Aurangabad

Background:

Aurangabad is located mainly on the Godavari River Basin and partly on the Tapi River Basin. It is bordered by the districts of Nashik to the west, Jalgaon to the north, Jalna to the east, and Ahmednagar to the south. It has a population of 36.96 lakh, a sex ratio of 917 females per 1,000 males, and a female literacy rate of 70.81% with an overall literacy rate of 80.40% (Census 2011). It is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme. The district is well connected via roads and railway, National Highway 211 connecting it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low among the ANC attendees, with a decreasing trend.
- Based on 2012 PPTCT and Blood Bank data, HIV positivity was low for PPTCT (0.11%) and Blood bank (0.15%) attendees. HIV positivity levels showed a decreasing trend for PPTCT and blood bank attendees.
- According to 2012 ICTC data, HIV positivity was low among male (2.26%) and female (1.87%) attendees, as well as among referred (1.60%) and direct walk-ins (2.59%) attendees. The HIV positivity levels showed a stable trend for all the ICTC attendees in the last three recordings, though the positivity has declined if observed for seven years.
- According to 2008 HRG size mapping data, FSW (2,238; 95.56% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 14,913 and the syphilis positivity rate among STI clinic attendees was 0.09%.
- As per 2001 Census, 9.31% of the males were migrants, among them 3.14% migrated to other states and 38.37% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Ludhiana in Punjab and Panipat in Haryana.
- As per 2012 ICTC route of HIV transmission data, 6.34% of the district's total HIV transmissions were via Parent to child route.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 51.3% and 9.4%, respectively.
- In 2012, a total of two TI sites were operational in the district.

Key Recommendations:

- Though HIV prevalence has declined among both HSS-ANC and ICTC attendees, district needs continued attention to decrease and limit the spread of the infection further.
- Asses the size and profile of FSWs client population, including migrants and truckers, to improve the understanding of district vulnerabilities, since the largest HRG was FSW.
- More needs to be done to understand the profile of the attendees through in depth analysis of ICTC data as the parent to child HIV transmission rate was high.
- Strengthen outreach programme through awareness campaigns around source and transit points, like railway stations and bus stands.

Aurangabad

District Population: 36,95,928 (3.29% of Maharashtra Population); Female Literacy¹: 70.81%; ANC Utilization²: 58%

HIV Levels and Trends ³								
	2005	2006	2007	2008	2009	2010	2011	2012
HSS-ANC	PP ⁴	0	0.75	0.25	0.28		0.38	0
	NT ⁴	800	800	800	722		798	400
PPTCT	PP	0.44	4.18	0.35	0.34	0.30	0.29	0.18
	NT	8684	13406	22706	22608	33982	2035	1673
Blood Bank	PP	-	-	0.42	0.52	*	*	0.15
	NT	-	-	4318	36715	*	*	20293
HSS-STD	PP	6.80	10	10.04	-	-	-	-
	NT	250	250	249	-	-	-	-
HSS-FSW	PP	-	-	-	2.00	-	-	-
	NT	-	-	-	250	-	250	-
HSS-MSM	PP	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-
HSS-IDU	PP	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-
ICTC Male	PP	17.64	18.31	13.04	9.60	5.32	2.65	3.26
	NT	1769	3539	7248	10734	14354	980	19310
ICTC Female	PP	8.07	22.96	15.56	9.92	5.14	1.69	2.34
	NT	1760	1629	3341	6492	10211	1064	21823
ICTC Referred	PP	8.39	16.30	14.63	9.41	5.39	1.93	2.19
	NT	2192	2300	4286	6516	8990	1814	24113
Walk-in	PP	20.19	22.56	13.30	9.92	5.16	3.91	3.57
	NT	1337	2868	6303	10710	15575	230	16911
Total tested at ICTCs ⁵	NT	12213	18574	33295	39834	37266	4079	38405
PLHIV Profile, 2012								
	% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced			
ART (10356)	30	14	67	51	12			
DLN (NA)	-	-	-	-	-			
Route of HIV Transmission, ICTC 2012								
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown		
% of Total (N=899)	88.54	0.78	0.33	0	6.34	4.00		
Block-Level Details								
No. HRG-FSW	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

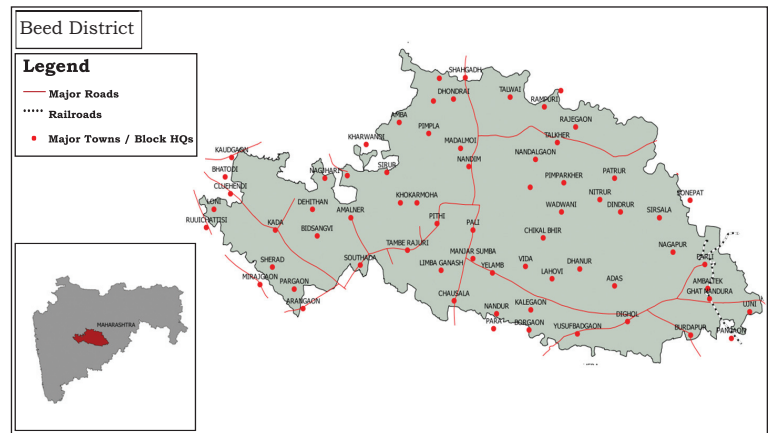
Vulnerabilities									
	HRG Size			Male Migration, 2001 Census					
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	2238	89	15						
% Total HRG	95.56	3.80	0.64	No. out-migration	141643	4446	54348	82849	
% Total Pop.	0.06	0	0	% of male pop.	9.31	0.29	3.57	5.44	
Program Target	NA	NA	NA	% total migration	100	3.14	38.37	58.49	
Program Coverage	-	-	-	Top 5 districts for inter-state out-migration					
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Ludhiana, Punjab	Panipat, Haryana	Faridabad, Haryana	Surat, Gujarat	Hisar, Haryana	
% <25 yrs	-	-	-						
% Married	-	-	-						
STI/RTI									
No. episodes treated	2009	2010	2011	2012					
% Syphilis positivity	3700	21252	24757	14913					
	0	0.40	0.12	0.09					
Programme Response									
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012
FSW TIs	2	2	2	2	3	3	3	3	2
MSM TIs	-	-	-	-	-	-	1	1	-
IDU TIs	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-
ICTCs	5	5	15	21	21	22	25	41	42
Blood Banks	-	-	-	6	6	6	6	6	6
STI clinics	-	-	-	-	1	1	1	2	2
ART centres	-	-	1	1	1	1	1	2	2
Link ART centres	-	-	-	-	5	5	5	4	4
PLHIV Networks	1	1	1	1	1	1	1	1	1
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-
Comm. care centres	-	-	-	-	1	1	1	1	1
Drop-in-centres	-	-	-	-	-	-	-	-	-
Condom outlets	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Beed

Background:

Beed which is also known as Bhir, falls under Aurangabad division in Maharashtra. It is surrounded by Aurangabad and Jalna in the north, Parbhani and Latur in the east, Ahmednagar and Osmanabad in the south and Ahmednagar in the west. It has a population of 25.85 lakh, a sex ratio of 912 females per 1,000 males, female literacy rate of 62.29% with an overall literacy rate of 73.53% (Census 2011). Beed is greatly dependent on monsoon being the agricultural hub of the state. It is also one of the largest suppliers of man power as laborers in India. The district is well connected via roads and railways. National Highway 211 connects it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.13%) among the ANC attendees, with a decreasing trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.14%) attendees while moderate among blood bank (0.54%) attendees. Overall a stable trend was observed among the PPTCT and blood bank attendees.
- As per 2010 HSS-FSW data, HIV positivity was moderate among FSWs (7.60%), but due to lack of data, a trend was not determined.
- According to the 2012 ICTC data, HIV positivity was low among male (2.73%) and female (2.09%) attendees, and also among referred (1.26%) attendees and direct walk-ins (4.10%), with an overall declining trend among all the ICTC clients.
- According to 2008 HRG size mapping data, FSW (310; 69.35% of total HRG) was the largest HRG in the district followed by MSM (137; 30.65% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 14,321.
- As per 2001 Census; 16.09% of the males were migrants, among them 4.07% migrated to other states and 67.68% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Belgaum and Bagalkot in Karnataka.
- In 2012, parent to child HIV transmission which accounted for 7.24% of the total HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 73.5% and 21.4%, respectively.
- In 2012, a total of three TI sites were operational in the district.
- In 2012, a total of 39 ICTCs were functional and an overall 71,053 attendees got tested for HIV in the district.

Key Recommendations:

- Migration to high prevalent districts within the state could be a driver of HIV epidemic in the state, outreach efforts should be focused towards migrants at source and transit sites.
- More vulnerability could be studied through in depth analysis of ICTC data, to know transmission dynamics like place, person infected and profile of attendees at PPTCT as the parent to child HIV transmission rate was also high.
- Assess the size and profile of FSWs client population, including migrants and truckers, to improve the understanding of district vulnerabilities, since the largest HRG was FSW.
- Generate information on typology of HRG population to better understand district epidemiological profile.
- Availability of ART or DLN data would help to understand the district vulnerabilities more precisely.

Beed

District Population: 25,95,962 (2.30% of Maharashtra Population); Female Literacy¹: 62.29%; ANC Utilization²: 61.5%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴ 0.88 NT ⁴ 800	0.75 800	0.63 800	0.63 799		0.13 800		0.13 800	
PPTCT	PP - NT -	- -	- -	19431 19797	20742 19797	0.38 19797		0.14 28632	
Blood Bank	PP - NT -	- -	0.53 4682	0.65 5396	0.52 8510	0.23 9293	0.44 7530	0.54 5025	
HSS-STD	PP - NT -	- -	- -	- -	- -	- -	- -	- -	
HSS-FSW	PP - NT -	- -	- -	11.60 250		7.60 250		- -	
HSS-MSM	PP - NT -	- -	- -	- -	- -	- -	- -	- -	
HSS-IDU	PP - NT -	- -	- -	- -	- -	- -	- -	- -	
ICTC Male	PP 25.51 NT 1431	21.23 2572	16.74 6230	9.65 13983	6.04 13983	4.89 14858	3.76 13661	2.73 19789	
ICTC Female	PP 17.67 NT 1279	23.54 1589	18.55 3353	12.06 6936	6.90 9708	4.82 11701	3.69 12979	2.09 22632	
ICTC Referred	PP 15.81 NT 1006	18.94 1130	15.26 2753	7.19 5647	4.37 8852	3.00 13452	2.06 14605	1.26 25575	
ICTC Direct	PP 25.35 NT 1704	23.29 3031	18.23 6830	12.08 12627	7.60 14839	6.78 13107	5.74 12035	4.10 16846	
Total tested at ICTCs ⁵	NT 2710	4161	9583	18274	50299	26559	26640	71053	
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced				
ART (8927)	36	9	69	50	15				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
% of Total (N=898)	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
	91.20	0.45	0.22	0	7.24	0.89			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos: ICTC	Aurad, 0.29	Balki, 0.5	Basava kalyana, 0.71	Bidar, 0.26	Humna-bad, 0.41	-	-	-	-
% Pos: PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

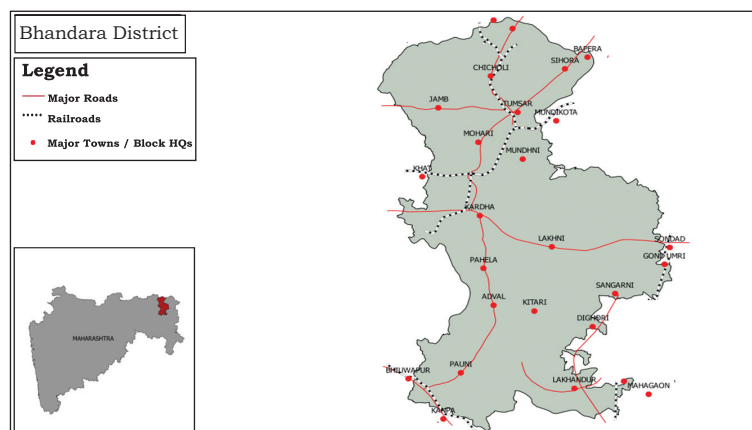
Vulnerabilities										
	HRG Size				Male Migration, 2001 Census					
	FSW	MSM	IDU		Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	310	137	-		No. out-migration	180313	7342	122030	50941	
% Total HRG	69.35	30.65	-		% of male pop.	16.09	0.66	10.89	4.55	
% Total Pop.	0.01	0.01	-		% total migration	100	4.07	67.68	28.25	
Program Target	NA	NA	NA		Top 5 districts for inter-state out-migration					
Program Coverage	Home based - NA;	Kothi - NA;	Daily Injectors- NA;		Belgaum, Karnataka	Bagalgot, Karnataka	Surat, Gujarat	Bijapur, Karnataka	-	
Typology	Brothel based- NA;	Pantri - NA;	Double decker- NA	Non daily Injectors- NA						
% <25 yrs	-	-	-	-						
% Married	-	-	-	-						
	STI/RTI									
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	1865	6872	9861	14321						
	10.53	1.12	0.54	-						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	1	1	1	1	1	1	2	2	2	
MSM TIs	1	1	1	1	1	1	1	1	1	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	4	4	17	17	17	19	47	47	39	
Blood Banks	2	2	2	2	2	2	2	2	3	
STI clinics	2	2	2	2	2	2	2	2	2	
ART centres	1	1	1	1	1	1	1	1	2	
Link ART centres	-	-	-	-	-	-	4	5	4	
PLHIV Networks	1	1	1	1	1	1	1	1	1	
Red Ribbon Clubs	2	2	2	2	2	2	63	63	63	
Comm. care centres	-	-	-	-	-	-	1	1	-	
Drop-in-centres	1	1	1	1	1	1	1	1	1	
Condom outlets	89	89	89	89	89	89	89	314	314	

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Bhandara

Background:

Bhandara is one of the major districts in Maharashtra, situated in the Nagpur division. It is known as, 'rice bowl of Maharashtra' and is popularly known as the district of lakes. It is enveloped by Balaghat (Madhya Pradesh) in the north, Gondia in the east, Chandrapur in the south and Nagpur in the west. Bhandara has a population of 11.98 lakh, a sex ratio of 984 females per 1,000 males, and a female literacy rate of 77.02% with an overall literacy rate of 85.14% (Census 2011). Bhandara has a mixed economy with agriculture, industries and forest resources contributing to it. It is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme (BRGF). The district is well connected via roads and railway, National Highway 6 connecting it to the rest of the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.26%) among the ANC attendees, with a fluctuating trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.10%) and Blood bank (0.11%) attendees. HIV positivity levels showed a decreasing trend for PPTCT attendees and also for Blood Bank attendees.
- According to the 2012 ICTC data, HIV prevalence was low among male (1.27%) and female (2.32%) attendees, as well as among referred (1.29%) attendees and direct walk-ins (2.31%). The HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (406; 92.06% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 3,273.
- As per 2001 Census, 12.35% of the males were migrants, among them 5.73% migrated to other states and 47.85% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Balaghat, Madhya Pradesh and Surat, Gujarat.
- In 2012, HIV transmission from parent to child was high at 7.20%, out of all the HIV transmission in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 68.2% and 31.7%, respectively.
- In 2012, there was no information for TI site in the district.

Key Recommendations:

- Though HIV prevalence has declined among both HSS-ANC and ICTC attendees, district needs continued attention to decrease and limit the spread of the infection further.
- Analyse vulnerability factors in transmission of HIV from ICTC and STI data, although there was a low level of HIV epidemic in the district.
- Considering high rate of migration to high HIV prevalent state, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.
- Parent to child HIV transmission was high in the district; therefore, it is necessary to strengthen PPTCT program coverage in the district.

Bhandara

District Population: 1,98,810 (1.07% of Maharashtra Population); Female Literacy¹: 77.02%; ANC Utilization²: 84.5%

	HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴ 1.13	0.38	0.75	0.38		0.26		0.63		
	NT ⁴ 800	800	800	799		779		799		
PPTCT	PP 0.80	0.97	0.59	0.42	0.49	0.29		0.10		
	NT 2361	6066	14458	16612	13968	17216		18130		
Blood Bank	PP -	-	*	0	0.42	0.26	0.21	0.11		
	NT -	-	*	3149	5756	6830	6101	4655		
HSS-STD	PP -	-	-	-	-	-	-	-		
	NT -	-	-	-	-	-	-	-		
HSS-FSW	PP -	-	-	-	-	-	-	-		
	NT -	-	-	-	-	-	-	-		
HSS-MSM	PP -	-	-	-	-	-	-	-		
	NT -	-	-	-	-	-	-	-		
HSS-IDU	PP -	-	-	-	-	-	-	-		
	NT -	-	-	-	-	-	-	-		
ICTC Male	PP 7.01	-	3.21	2.90	2.69	1.73	1.93	1.27		
	NT 2125	-	13195	13538	13269	15426	16877	15796		
ICTC Female	PP 7.67	-	6.05	5.42	5.64	3.53	2.76	2.32		
	NT 848	-	1968	3688	3490	5501	8066	6986		
ICTC Referred	PP 7.46	-	5.58	5.03	3.45	2.09	2.03	1.29		
	NT 992	-	2528	4696	6836	12155	16175	16028		
ICTC Direct	PP 17.60	-	2.45	3.18	3.20	2.36	2.51	2.31		
	NT 500	-	9963	12187	9923	8772	8768	6754		
Walk-in	NT -	-	-	-	-	-	-	-		
Total tested at ICTCs ⁵	NT 5334	17137	29621	33838	32262	38143	24943	40912		
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (2776)	52	7	82	65	17					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=347)	91.35	0.58	0	0.29	7.20	0.58				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-				
No. HRG-MSM	-	-	-	-	-	-				
No. HRG-IDU	-	-	-	-	-	-				
% Pos. ICTC	-	-	-	-	-	-				
% Pos. PPTCT	-	-	-	-	-	-				

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

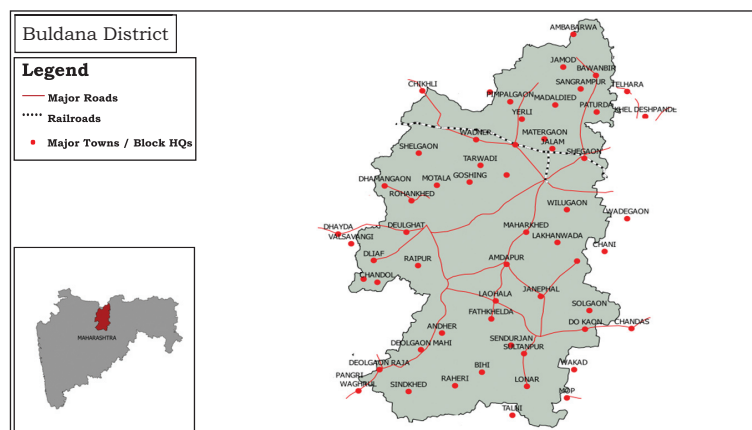
	HRG Size					Vulnerabilities				
	FSW	MSM	IDU			Male Migration, 2001 Census				
Size Est. (Mapping, Year: 2008)	406	35	-			Overall	Inter-State	Intra-state	Intra-district	
% Total HRG	92.06	7.94	-			No. out-migration	70812	4061	33881	32870
% Total Pop.	0.03	0	-			% of male pop.	12.35	0.71	5.91	5.73
Program Target	NA	NA	NA			% total migration	100	5.73	47.85	46.42
Program Coverage	-	-	-			Top 5 districts for inter-state out-migration				
Typology	Home based - NA; Street based - NA	Kothi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Balaghat, Madhya Pradesh	Surat, Gujarat	Rajpur, Chhatis-garh	Durg, Chhatis-garh	Rajnand-gaon, Chhatis-garh		
% <25 yrs.	-	-	-							
% Married	-	-	-							
STI/RTI										
No. episodes treated	2009 759	2010 2147	2011 3244	2012 3273						
% Syphilis positivity	0	0.14	0.34	0						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	1	1	1	1	1	1	1	
MSM TIs	-	-	-	-	-	-	-	-	-	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	2	2	12	12	12	16	26	27	28	
Blood Banks	1	1	1	1	1	1	1	1	1	
STI clinics	-	-	-	-	-	-	-	-	-	
ART centres	-	-	-	-	-	-	-	-	-	
Link ART centres	-	-	-	-	-	-	-	-	-	
PLHIV Networks	-	-	1	1	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-	
Comm. care centres	-	-	-	-	-	-	-	-	-	
Drop-in-centres	-	-	-	-	-	-	-	-	-	
Condom outlets	10	10	20	20	20	20	215	215	215	

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Buldana

Background:

Buldana is a district in the Amravati division of Maharashtra in western India. It is situated at the westernmost border of Vidarbha region of Maharashtra and is 500 km from the state capital, Mumbai, bordered by Madhya Pradesh on the north, Akola, Washim, and Amravati on the east, Jalna on the south, and Jalgaon and Aurangabad on the west. Buldana has a population of 25.88 lakh, a sex ratio of 928 females per 1,000 males, and a female literacy rate of 72.95% with an overall literacy rate of 82.09% (Census 2011). The district has major industrial areas and its economy depends upon agriculture. The district is well connected via roads and railway, National Highway 6 and 20-A connecting it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a fluctuating trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.05%) and Blood bank (0.28%) attendees. HIV positivity levels showed a decreasing trend for PPTCT attendees while a stable trend was observed for Blood Bank attendees.
- According to 2012 ICTC data, HIV prevalence was low among male (1.02%) and female (1.12%) attendees, as well as among referred (0.85%) and direct walk-in (1.58%) attendees. The HIV positivity levels showed an overall decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,237; 89.96% of total HRG) was the largest HRG in the district followed by MSM (138; 10.04% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 11,008.
- As per 2001 Census; 10.91% of the males were migrants, among them 4.64% migrated to other states and 38.49% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat in Gujarat and North-West Delhi.
- In 2012, the route of HIV transmission was high from parent to child at 7.48%, out of all the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 69.1% and 22.7%, respectively.
- A total of two TI sites were operational in the district in the year 2012.

Key Recommendations:

- Continue attention on the district to decrease and limit the spread of HIV infection further, though HIV prevalence has declined from high to low levels among ICTC attendees.
- The parent to child HIV transmission rate was high, thus more needs to be done to understand the profile of the attendees through in-depth analysis of ICTC data.
- Since the largest HRG was FSW, improved assessment of the size and profile of FSW's client population, including migrants and truckers, will help in better understanding of district vulnerabilities. As well as availability of typology data would help to analyze risk factors.
- Strengthen outreach programme through awareness campaigns around source and transit points, like railway stations and bus stands.

Buldana

District Population: 25,98,039 (2.30% of Maharashtra Population); Female Literacy¹: 72.95%; ANC Utilization²: 66.7%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	0.38	0.88	0.25	0.83		0		0.25	
	NT ⁴	800	800	800	727		799		800	
PPTCT	PP	0.57	0.40	0.40	0.14	0.13	0.11		0.05	
	NT	1217	5700	15123	18946	19885	16113		33960	
Blood Bank	PP	-	-	*	0.39	0.23	0.33	0.23	0.28	
	NT	-	-	*	6189	8272	8700	8964	3966	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	16.47	12.18	4.56	2.79	1.60	1.58	1.07	1.02	
	NT	583	1125	4628	9786	15214	16129	23090	22775	
ICTC Female	PP	22.35	15.96	6.88	4.69	2.46	2.17	1.40	1.12	
	NT	264	445	1671	3601	6857	7882	13496	13820	
ICTC Referred	PP	26.72	17.71	8.89	4.42	1.89	1.48	1.07	0.85	
	NT	262	401	1383	3372	10958	13822	22353	26207	
ICTC Direct	PP	14.53	11.72	4.26	2.93	1.84	2.17	1.38	1.58	
	NT	585	1169	4911	10015	11113	10189	14233	10388	
Walk-in	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
Total tested at ICTCs ⁵	PP	2064	7270	21422	32333	44271	40124	36586	70555	
	NT	-	-	-	-	-	-	-	-	
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (1503)	44	8	90	66	19					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=401)	89.28	1.50	0.75	0	7.48	1.00				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

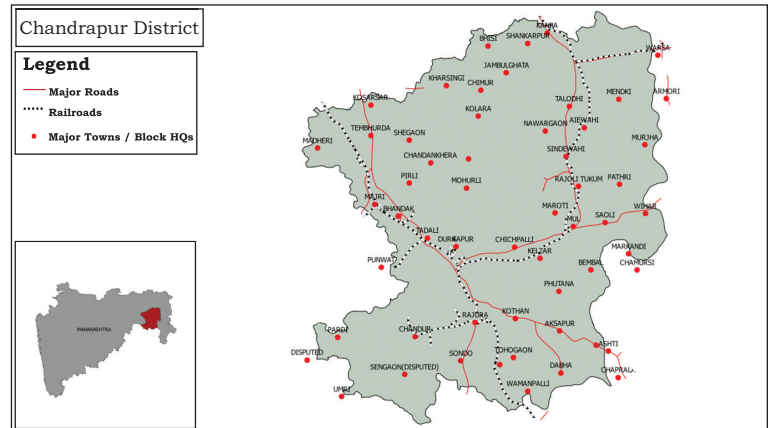
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	1237	138	-							
% Total HRG	89.96	10.04	-	No. out-migration	124897	5794	48073	71030		
% Total Pop.	0.05	0.01	-	% of male pop.	10.91	0.51	4.20	6.21		
Program Target	NA	NA	NA	% total migration	100	4.64	38.49	56.87		
Program Coverage	-	-	-	Top 5 districts for inter-state out-migration						
Typology	Home based - NA;	Kothi - NA;	Daily Injectors - NA;	Surat, Gujarat	North West Delhi	East Nimar, Madhya Pradesh	Indore, Madhya Pradesh	Valsad, Gujarat		
	Brothel based - NA;	Pantri - NA;	Non daily Injectors - NA							
Street based - NA	Double decker - NA									
% <25 yrs	-	-	-							
% Married	-	-	-							
STI/RTI										
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	3671	2625	6429	11008						
	0	0	0	0						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	-	-	-	-	1	1	1	
MSM TIs	-	-	-	-	-	-	-	1	1	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	2	4	16	21	21	21	26	40	47	
Blood Banks	5	5	6	6	6	6	6	6	6	
STI clinics	1	1	1	1	1	1	1	1	1	
ART centres	-	-	-	-	-	1	1	1	1	
Link ART centres	-	-	-	-	-	-	4	4	4	
PLHIV Networks	-	-	-	-	-	-	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-	
Comm. care centres	-	-	-	-	-	-	1	1	1	
Drop-in-centres	-	-	-	-	-	-	1	1	1	
Condom outlets	-	-	-	-	-	-	-	-	-	

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Chandrapur

Background:

Chandrapur was formerly known as Chanda district. It shares border with Adilabad to the west, Bhandara to the North, Gadchiroli to the East, Wardha to the North, and Yavatmal to the west. Chandrapur has a population of 21.94 lakh, a sex ratio of 959 females per 1,000 males, and a female literacy rate of 73.65% with an overall literacy rate of 81.35% (Census 2011). In 2006, the Ministry of Panchayati Raj named Chandrapur one of the country's 250 most backward districts and is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme. The district is well connected via roads and railway to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a decreasing trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.17%) and Blood bank (0.19%) attendees, with a decreasing trend for both.
- As per 2010 HSS data, HIV positivity was moderate among FSWs (6.80%), with a decreasing trend.
- According to 2012 ICTC data, HIV prevalence was low among male (1.93%) and female (2.22%) attendees, as well as among referred (1.13%) attendees and direct walk-ins (3.33%). The HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (2,355; 98.62% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 18,398 and the syphilis positivity rate among STI clinic attendees was 0.46%.
- As per 2001 Census, 12.76% of the males were migrants, among them 2.20% migrated to other states and 25.16% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Adilabad and Karimnagar in Andhra Pradesh.
- As per 2012 ICTC data, the route of HIV transmission was high through parent to child at 6.27%, out of all the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 59.4% and 11.1%, respectively.
- While there were over 2,300 mapped HRGs in the district, there was only one TI site operational in the district in 2012.

Key Recommendations:

- Strengthen targeted interventions sites in the district; the current number of TI sites is not enough to deal with the large number of HRGs in the area.
- Since the largest HRG was FSW, better assessment of the size and profile of FSW's client population, including migrants and truckers, will help in better understanding of district vulnerabilities. As well as availability of typology data would help to analyze risk factors.
- Due to the high rate of parent to child HIV transmission as well as large numbers of migrants to high prevalent districts, more needs to be done to strengthen positive prevention and PPTCT programmes in order to curb the possible spread of HIV to migrant's spouses.
- Conduct special awareness campaign especially among pockets of out-migrants transit points and around truck halting halt points and highways in the district.

Chandrapur

District Population: 2,19,94,262 (1.95% of Maharashtra Population); Female Literacy¹: 73.65%; ANC Utilization²: 83.2%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	2.63	1.75	1.13	1.41		0.38		0.25
	NT ⁴	800	800	800	780		799		799
PPTCT	PP	1.08	0.96	0.63	0.53	0.39	0.20		0.17
	NT	3613	11760	17238	19254	22234	25081		26096
Blood Bank	PP	-	-	0.56	0.54	0.45	0.31	0.23	0.19
	NT	-	-	1071	13964	16714	16097	14138	4751
HSS-STD	PP	15.20	8.40	16.80	11.89		-		-
	NT	250	250	250	244		-		-
HSS-FSW	PP	22.00	20.80	12.80	8.40		6.80		-
	NT	250	250	250	250		250		-
HSS-MSM	PP	-	-	-	-		-		-
	NT	-	-	-	-		-		-
HSS-IDU	PP	-	-	-	-		-		-
	NT	-	-	-	-		-		-
ICTC Male	PP	12.87	9.59	5.04	5.38	3.45	2.60	2.10	1.93
	NT	1235	4065	10033	16639	16675	22111	27071	21390
ICTC Female	PP	7.43	13.54	8.46	7.09	5.03	3.82	2.80	2.22
	NT	1441	1728	3440	7375	7131	9360	12585	11670
ICTC Referred	PP	9.77	15.12	7.32	5.40	3.65	1.78	1.45	1.13
	NT	1740	2599	5762	8735	9074	16519	22924	19581
ICTC Direct	PP	10.26	7.23	4.86	6.82	4.10	4.27	3.51	3.33
	NT	936	3194	7713	10146	14732	14952	16732	13479
Walk-in	PP	-	-	-	-		-		-
	NT	-	-	-	-		-		-
Total tested at ICTCs ⁵	PP	6289	17553	30711	43268	52466	56552	39656	59156
	NT	-	-	-	-		-		-
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced				
ART (6329)	42	10	40	33	7				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=638)	92.01	0.47	0.94	0	6.27	0.31			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive, NT = number tested; ⁶ General clients & pregnant women.

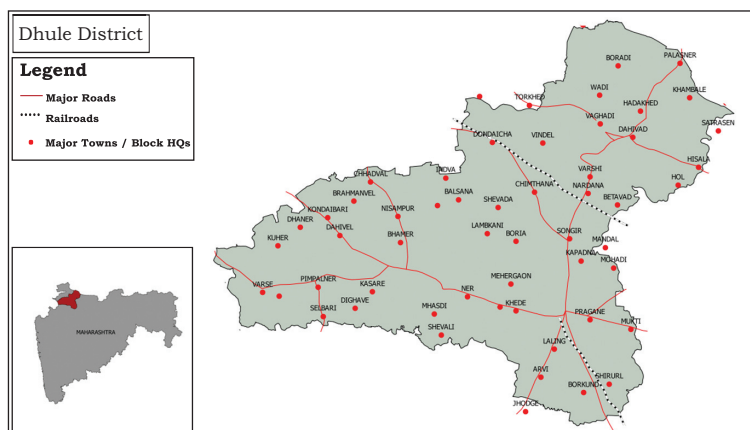
Vulnerabilities									
	HRG Size			Male Migration, 2001 Census					
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	2355	33	-						
% Total HRG	98.62	1.38	-						
% Total Pop.	0.11	0	-						
Program Target	NA	NA	NA						
Program Coverage	-	-	-						
Typology	Home based - NA;	Kothi - NA;	Daily Injectors - NA;	Adilabad, Andhra Pradesh	Karimnagar, Andhra Pradesh	Chhindwara, Madhya Pradesh	Durg, Chhatisgarh	Rajnandgaon, Chhatisgarh	
% <25 yrs	-	-	-						
% Married	-	-	-						
STI/RTI									
No. episodes treated	2009	2010	2011	2012					
% Syphilis positivity	0.59	1.52	0.96	0.46					
Programme Response									
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012
FSW TIs	1	1	1	1	1	1	1	1	1
MSM TIs	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-
ICTCs	2	2	15	15	15	33	34	53	55
Blood Banks	1	1	1	1	1	1	1	1	1
STI clinics	2	2	2	2	2	2	2	2	2
ART centres	-	-	-	-	-	-	-	-	-
Link ART centres	-	-	-	-	-	-	-	-	-
PLHIV Networks	-	-	-	-	-	-	-	-	-
Red Ribbon Clubs	-	-	-	-	25	25	25	50	100
Comm. care centres	-	-	-	-	-	-	-	-	-
Drop-in-centres	-	1	1	1	1	1	1	1	1
Condom outlets	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive, NT = number tested; ⁶ General clients & pregnant women.

Dhule

Background:

Dhule previously comprised tracts of land predominantly inhabited by tribal population. The district was then bifurcated on 1st July 1998 into two separate districts now known as Dhule and Nandurbar, the latter comprising the tribal region. The district shares its borders with Nandurbar lying in the north-east, Nashik in the south and Jalgaon lies to the east of the district. It has a population of 20.48 lakh and a sex ratio of 941 females per 1,000 males, and a female literacy rate of 66.21% with an overall literacy rate of 74.61% (Census 2011). Agriculture remains the basic profession of the population in this district. Around 26.11% population of Dhule district resides in urban area. The district is well connected via roads and railway, there are 3 major National Highways passing through the Dhule district. (NH-6, NH-3 and NH-211)



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a decreasing trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was high for PPTCT (0.10%) and low among Blood bank (0.14%) attendees. HIV positivity levels showed a fluctuating trend for PPTCT in the last three recordings and a stable trend was observed for Blood Bank attendees.
- According to 2012 ICTC data, HIV prevalence was low among male (3.02%) and female (2.92%) attendees, as well as among referred (2%) and direct walk-in (4.35%) attendees. The HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (511; 79.43% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 6,068 and the syphilis positivity rate among STI clinic attendees was 0.12%.
- As per 2001 Census, 17.14% of the males were migrants; among them, 21.14% migrated to other states and 37.77% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Bharuch in Gujarat.
- According to 2012 ICTC data, route of HIV transmission was high through parent to child at 6.47% in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 56.1% and 21.8%, respectively.
- In 2012, one FSW-TI site was functional in the district.

Key Recommendations:

- Conduct socio-demographic analysis of ANC data to understand risk factors for HIV epidemic among general population.
- Strengthen efforts to wards assessing route of HIV transmission at the ICTCs.
- It is necessary to strengthen PPTCT program coverage in the district as parent to child HIV transmission was high.
- Generate information on typology of HRG population to better understand district epidemiological profile.
- Strengthen outreach programme through awareness campaigns around source and transit points, like railway stations and bus stands.

Dhule

District Population: 20,48,781 (1.82% of Maharashtra Population); Female Literacy¹: 66.21%; ANC Utilization²: 59.5%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	-	1.13	1.13	0.63					
	NT ⁴	-	800	800	798		800		800	
PPTCT	PP	0.43	3.27	0.58	0.34	0.31	1.16		0.10	
	NT	6350	8155	11643	16365	19643	21493		30306	
Blood Bank	PP	-	-	*	0.24	0.21	0.16	0.17	0.14	
	NT	-	-	*	17670	19264	28387	17004	5834	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	18.92	23.57	18.31	12.24	7.86	5.62	3.44	3.02	
	NT	1263	2295	4937	8431	9703	12397	18237	15434	
ICTC Female	PP	17.50	24.95	16.05	10.94	7.23	4.55	2.86	2.92	
	NT	737	1487	3439	6217	7114	9199	14318	13031	
ICTC Referred	PP	12.68	18.30	11.58	6.53	6.31	4.31	2.68	2.00	
	NT	1325	1579	4014	7996	9282	12546	19251	16681	
Walk-in	PP	29.63	28.28	22.72	17.89	9.17	6.35	3.92	4.35	
	NT	675	2203	4362	6652	7535	9050	13304	11784	
Total tested at ICTCs ⁵	NT	8350	11937	20019	31013	41339	43089	32555	58771	
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced					
ART (10123)	34	7	51	35	11					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=726)	88.98	0.14	0	0	6.47	4.41				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

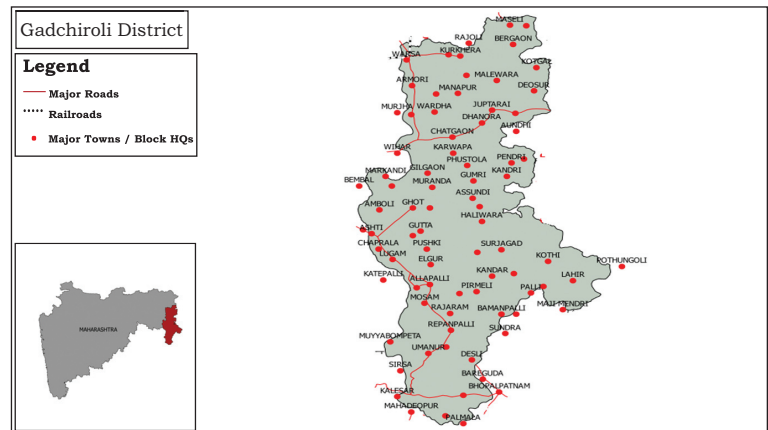
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	511	20	10							
% Total HRG	94.45	3.70	1.85							
% Total Pop.	0.02	0	0							
Program Target	NA	NA	NA							
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA							
% <25 yrs	-	-	-							
% Married	-	-	-							
	STI/RTI			Programme Response						
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	1231	2743	2870	6068						
	0	4.26	2.13	0.12						
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	1	1	1	1	1	1	1	1
MSM TIs	-	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-	-
ICTCs	3	3	11	11	11	11	17	39	50	
Blood Banks	1	1	1	1	1	1	1	1	1	
STI clinics	-	-	-	-	-	-	-	-	-	
ART centres	-	-	1	1	1	1	1	1	1	
Link ART centres	-	-	-	-	1	1	1	1	1	
PLHIV Networks	-	-	1	1	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-	
Comm. care centres	-	-	-	-	-	1	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	-	-	
Condom outlets	-	-	1	1	1	1	1	1	1	

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Gadchiroli

Background:

Gadchiroli is situated in the southeastern corner of Maharashtra, bordered by Chandrapur to the west, Gondia to the north, Chhatisgarh to the east, and Andhra Pradesh to the south and southwest. It has a population of 10.71 lakh, a sex ratio of 975 females per 1,000 males, and a female literacy rate of 60.66% with an overall literacy rate of 70.55% (Census 2011). The district is currently a part of the Red Corridor. In 2006, the Ministry of Panchayati Raj named Gadchiroli one of the country's 250 most backward districts and is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme. The district is well connected via roads and railway, National Highway 16 connecting it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.13%) among the ANC attendees, with a fluctuating trend in the last three recordings.
- Based on 2012 PPTCT and Blood Bank data, the rate of HIV positivity was low for PPTCT (0.05%) as well as among Blood bank (0.10%) attendees; HIV positivity rates showed a stable trend for PPTCT and blood bank had a declining trend in the last three years.
- According to 2012 ICTC data, HIV positivity rate was low among male (0.74%) and female (0.86%) attendees, as well as among referred (0.65%) and direct walk-in (0.92%) attendees. The positivity rate showed a stable to declining trend for all the ICTC attendees in the last five years.
- According to 2008 HRG size mapping data, FSW (415; 99.05% of total HRG) was the largest HRG in the district.
- In 2012, the syphilis positivity rate among STI clinic attendees was 0.03%.
- As per 2001 Census; 10.44% of the males were migrants, among them 1.23% migrated to other states and 18.44% migrated to other districts while 80.33% migrated within district and could play possible role in HIV spread.
- The top two destinations for out-of-state migration were Rajnandgaon and Dantewada in Chhatisgarh.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 30.3% and 18%, respectively.
- A total of 42 ICTCs were functional in the district in the year 2012, which tested a total of 38,389 attendees.

Key Recommendations:

- Presence of HRGs especially FSWs should be considered for the initiation of TI site in the district.
- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population.
- Conduct special awareness campaign especially among pockets of out-migrants transit points and around truck halting points and highways in the district.
- Generate information on typology of HRG population to better understand district epidemiological profile.
- Availability of DLN data will help in understanding the district vulnerabilities.

Gadchiroli

District Population: 10,71,795 (0.95% of Maharashtra Population); Female Literacy¹: 60.66%; ANC Utilization²: 72.5%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴ 0.38 NT ⁴ 800	0.25 800	0 800	0 787		0.63 799		0.13 800		
PPTCT	PP 0.14 NT 1473	0.28 3524	0.21 6624	0.13 8689	0.10 13256	0.13 11207		0.05 17745		
Blood Bank	PP - NT -	- -	* *	0.62 4202	0.24 5332	0.59 5979	0.37 4827	0.10 2935		
HSS-STD	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
HSS-FSW	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
HSS-MSM	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
HSS-IDU	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
ICTC Male	PP 9.02 NT 399	3.62 884	1.60 4926	0.99 8482	0.90 8969	0.69 9313	0.72 12892	0.74 12699		
ICTC Female	PP 9.26 NT 367	6.07 247	2.14 1733	1.31 4253	1.08 4554	0.84 4896	0.74 7414	0.86 7945		
ICTC Referred	PP 10.20 NT 343	5.40 537	2.07 3713	1.43 4603	1.18 4757	0.78 5542	0.72 9080	0.65 10356		
ICTC Direct	PP 8.27 NT 423	3.03 594	1.32 2946	0.91 8132	0.84 8766	0.72 8667	0.74 11226	0.92 10288		
Walk-in	PP - NT -	- -	- -	- -	- -	- -	- -	- -		
Total tested at ICTCs ⁵	NT 2239	4655	13283	21424	29955	25416	20306	38389		
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (755)	35	9	89	70	13					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=171)	94.15	0.58	2.34	0	2.92	0				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

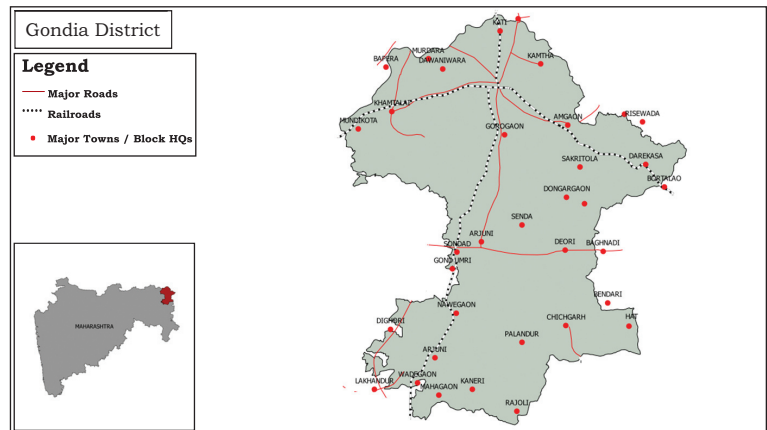
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	415	4	-	51253	628	9453	41172			
% Total HRG	99.05	0.95	-	10.44	0.13	1.93	8.39			
% Total Pop.	0.04	0	-	100	1.23	18.44	80.33			
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	-	-	-							
Typology	Home based - NA;	Kothi - NA;	Daily Injectors- NA;	Rajmand- gaon, Chhatis- garh	Dantewa- da, Chhatis- garh					
	Brothel based- NA;	Pantli - NA;	Non daily Injectors- NA							
	Street based - NA	Double decker- NA								
% <25 yrs	-	-	-							
% Married	-	-	-							
	STI/RTI									
No. episodes treated	2009 925	2010 2383	2011 3611	2012 2850						
% Syphilis positivity	0	1.14	0.03	0.03						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	-	-	-	1	1	-	-	-
MSM TIs	-	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-	-
ICTCs	2	2	2	14	14	34	37	37	42	
Blood Banks	2	2	2	2	2	2	2	2	2	
STI clinics	1	1	1	1	1	1	1	1	1	
ART centres	-	-	-	-	-	1	1	1	1	
Link ART centres	-	-	-	-	-	-	-	-	-	
PLHIV Networks	-	-	-	-	-	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-	
Comm. care centres	-	-	-	-	-	-	1	1	-	
Drop-in-centres	-	-	-	-	-	-	-	-	-	
Condom outlets	-	-	-	-	-	-	-	-	-	

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Gondia

Background:

Gondia district, also known as Gondiyain Maharashtra, is surrounded by Balaghat district of Madhya Pradesh in the north and Rajnandgaon district of Chhattisgarh in the east. The Bhandara and Chandrapur districts are to the west and south. It has a population of 13.22 lakh, a sex ratio of 996 females per 1,000 males, and a female literacy rate of 77.30% with an overall literacy rate of 85.41% (Census 2011). In 2006, the ministry of Panchayati Raj named Gondia as one of the country's 250 most backward districts and it is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme. It is well connected via roads and railway, National Highway 6 connecting it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low among the ANC attendees, with a declining trend.
- According to 2012 PPTCT data, HIV positivity was high for PPTCT (2.44%) attendees, with a fluctuating trend in the last 4 recordings
- As per 2010 Blood Bank data, HIV positivity was low among Blood donors (0.17%), with a fluctuating trend.
- According to 2012 ICTC data, HIV prevalence was low among male (1%) and female (1.64%) attendees, as well as among referred (1.32%) attendees and direct walk-ins (1.03%). The HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (388; 89.40% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 1,770 and the syphilis positivity rate among STI clinic attendees was 0.10%.
- As per 2001 Census, 8.92% of the males were migrants. Among the male migrants 8.93% migrated to other states and 40.42% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Balaghat in Madhya Pradesh and Raipur in Chhattisgarh.
- As per 2012 ICTC data, Parent to child HIV transmission accounted for 5.67% of all HIV transmissions in the districts.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 54.7% and 28.3%, respectively.
- A total of 36 ICTCs were functional, which tested a total of 36,255 attendees for HIV in the district in the year 2012.

Key Recommendations:

- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population and strengthen the PPTCT program in the district.
- When the IBBS data will be available, analyze on FSW and other groups in the district to improve the understanding of the vulnerabilities.
- Since the largest HRG was FSW, better assessment of the size and profile of FSW's client population including migrants and truckers, will help in better understanding of district vulnerabilities. As well as the availability of typology data would help to analyze risk factors.
- Strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.
- Expand coverage of HIV counseling and testing in the district to detect HIV positive cases at an early stage, due to high percentage of PLHIV on ART (47%).

Gondia

District Population: 13,22,331 (1.18% of Maharashtra Population); Female Literacy¹: 77.30%; ANC Utilization²: 83%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴ 0.38 NT ⁴ 800	0.63 800	0.38 800	0.25 792		0		0	799
PPTCT	PP 0.46 NT 2184	0.76 4199	0.41 1002.4	0.25 13777	1.24 11982	0.22 11504			2.44 16444
Blood Bank	PP - NT -	- -	1.40 1784	0 6372	0.49 3446	0.17 2929			
HSS-STD	PP - NT -	- -	- -	- -	- -	- -			
HSS-FSW	PP - NT -	- -	- -	- -	- -	- -			
HSS-MSM	PP - NT -	- -	- -	- -	- -	- -			
HSS-IDU	PP - NT -	- -	- -	- -	- -	- -			
ICTC Male	PP 7.94 NT 529	6.26 1071	2.75 5493	2.55 8014	1.90 7691	1.50 7260	1.37 12443	1.00 13853	
ICTC Female	PP 4.44 NT 473	14.07 263	8.44 1221	4.07 2945	3.16 2689	3.61 2076	2.80 4114	1.64 5958	
ICTC Referred	PP 5.79 NT 432	11.01 427	7.62 1667	3.61 4123	2.75 4332	2.40 4832	2.18 9009	1.32 11129	
ICTC Direct	PP 6.67 NT 570	6.28 907	2.52 5048	2.56 6836	1.85 6048	1.51 4504	1.19 7548	1.03 8682	
Walk-in	NT 570	907	5048	6836	6048	4504	7548	8682	
Total tested at ICTCs ⁵	NT 3186	5533	16738	24987	23732	20840	16557	36255	
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced				
ART (1433)	47	6	5	3	2				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=282)	89.01	1.42	2.48	0.71	5.67	0.71			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

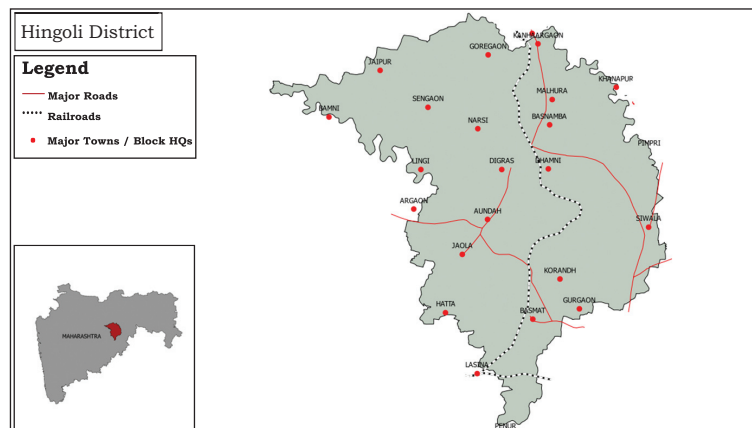
Vulnerabilities										
	HRG Size				Male Migration, 2001 Census					
	FSW	MSM	IDU		Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	388	46	-		No. out-migration	53410	4767	21588	27055	
% Total HRG	89.40	10.60	-		% of male pop.	8.92	0.80	3.61	4.52	
% Total Pop.	0.03	0	-		% total migration	100	8.93	40.42	50.66	
Program Target	NA	NA	NA		Top 5 districts for inter-state out-migration					
Program Coverage	Home based - NA;	Kothi - NA;	Daily Injectors - NA;		Balaghat, Madhya Pradesh	Raipur, Chhatis-garh	Rainand-gaon, Chhatis-garh	Durg, Chhatis-garh	North West Delhi, Delhi	
Typology	Brothel based - NA;	Pantli - NA;	Non daily Injectors - NA							
% <25 yrs	-	-	-							
% Married	-	-	-							
STI/RTI										
No. episodes treated	2009 648	2010 1659	2011 1699	2012 1770						
% Syphilis positivity	0	0.83	3.37	0.10						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	-	1	1	1	-	-	1	
MSM TIs	-	-	-	-	-	-	-	-	-	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	2	2	3	11	11	11	19	36	36	
Blood Banks	1	1	1	1	1	1	1	1	1	
STI clinics	-	-	-	-	-	-	-	-	-	
ART centres	-	-	-	-	-	-	-	-	-	
Link ART centres	-	-	-	-	-	-	-	-	-	
PLHIV Networks	-	-	-	1	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-	
Comm. care centres	-	-	-	-	-	-	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	-	-	
Condom outlets	-	-	-	-	-	-	-	-	-	

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Hingoli

Background:

Hingoli, a part of the Aurangabad division, shares border with Parbhani to the south, Washim to the north. One of the twelve Jyotirlinga shrines, the Aundha Nagnath is located in Hingoli. It has a population of 11.78 lakh, a sex ratio of 935 females per 1,000 males, and a female literacy rate of 64.73% with an overall literacy rate of 76.04% (Census 2011). In 2006, the Ministry of Panchayati Raj named Hingoli as one of the most backward district and it is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme. It is well connected via roads and railways, State Highway, SH-68 connects it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.13%) among the ANC attendees, with a decreasing trend.
- Based on 2012 PPTCT data, HIV positivity was low (0.08%) for PPTCT attendees, with a decreasing trend.
- According to 2012 ICTC data, HIV positivity was low among male (2.07%) and female (1.81%) attendees, as well as among referred (1.61%) attendees and direct walk-ins (2.99%). The HIV positivity levels showed an overall decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (565; 98.60% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 2,524 and the syphilis positivity rate among STI clinic attendees was 0.91%.
- As per 2001 Census, 6.70% of the males were migrants. Among the male migrants, 1.89% migrated to other states and 46.54% migrated to other districts within the state.
- The top destination for out-of-state migration was Dadra and Haveli Nagar Haveli.
- According to ICTC 2012 data, parent to child HIV transmission route accounted for 10.94% of all HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 67.7% and 20.4%, respectively.
- In 2012, a total of 25 ICTCs were functional that tested an overall 32,348 attendees in the district.

Key Recommendations:

- Strengthen PPTCT program so as to reduce the high HIV transmission from parent to child.
- When the IBBS data will be available, analyze on FSW and other groups in the district to improve the understanding of the vulnerabilities.
- Strengthen outreach programmes through awareness campaigns for HRGs; also around truck halt points and highways in the district.
- Generate information on typology of HRG population to better understand district epidemiological profile.
- Increase STI awareness among women of the district.
- Expand coverage of HIV counseling and testing in the district to detect HIV positive cases at an early stage, due to 51% of PLHIV on ART.

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	1.38	1.63	0.25	0.26		0.38		0.13
	NT ⁴	800	800	800	777		799		799
PPTCT	PP	*	0.54	0.38	0.28	0.35	0.21	-	0.08
	NT	*	1671	4760	6901	8928	8954	-	17107
Blood Bank	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-STD	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-FSW	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-MSM	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-IDU	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
ICTC Male	PP	*	15.19	8.52	4.93	3.15	2.49	2.41	2.07
	NT	*	665	2571	2737	5434	7343	8413	7774
ICTC Female	PP	*	13.17	9.15	6.97	3.88	2.49	1.87	1.81
	NT	*	334	1562	1607	3637	5816	7917	7467
ICTC Referred	PP	*	12.78	9.31	5.25	4.01	2.38	1.68	1.61
	NT	*	587	2148	1903	3969	6019	11561	11562
ICTC Direct	PP	*	16.99	9.42	6.02	3.00	2.59	3.29	2.99
	NT	*	412	2198	2441	5102	7140	4769	3679
Total tested at ICTCs ⁵	NT	1012	2670	8893	12568	20225	22113	16330	32348
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced				
ART (1565)	51	8	87	65	20				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=329)	87.84	0		0	10.94	1.22			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

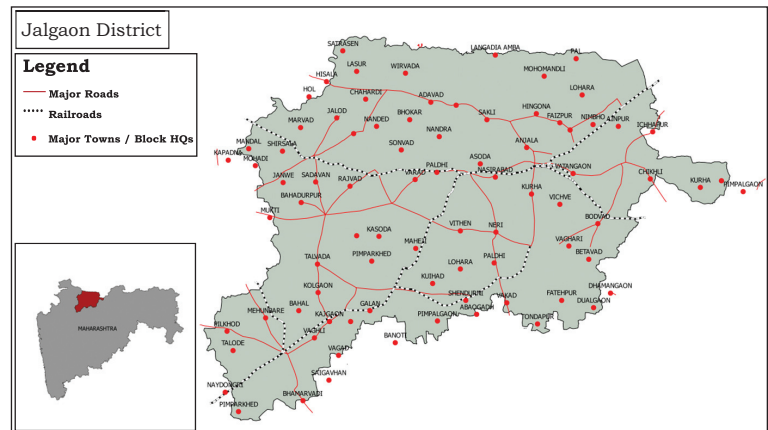
Vulnerabilities									
	HRG Size			Male Migration, 2001 Census					
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	565	8	-						
% Total HRG	98.60	1.40	-	No. out-migration	33867	639	15762	17466	
% Total Pop.	0.05	0	-	% of male pop.	6.70	0.13	3.12	3.46	
Program Target	NA	NA	NA	% total migration	100	1.89	46.54	51.57	
Program Coverage	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Pantli - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Top 5 districts for inter-state out-migration					
Typology				Dadra & Nagar Haveli, Dadra & Nagar Haveli					
% <25 yrs	-	-	-						
% Married	-	-	-						
Programme Response									
	STI/RTI								
No. episodes treated	2009	2010	2011	2012					
% Syphilis positivity	915	2250	2487	2524					
	0	0	0	0.91					
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012
FSW TIs	-	-	-	-	-	1	1	1	1
MSM TIs	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-
ICTCs	2	2	6	6	6	6	7	24	25
Blood Banks	-	-	-	-	-	-	-	-	-
STI clinics	-	-	-	-	-	1	1	1	1
ART centres	-	-	-	-	-	-	-	-	-
Link ART centres	-	-	-	-	-	-	-	3	3
PLHIV Networks	-	-	1	1	1	1	1	1	1
Red Ribbon Clubs	-	-	-	-	-	-	-	1	1
Comm. care centres	-	-	-	-	-	1	1	1	1
Drop-in-centres	-	-	-	-	-	1	1	1	1
Condom outlets	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Jalgaon

Background:

Jalgaon, formerly known as East Khandesh district, is bordered by Madhya Pradesh to the north and by Buldhana to the east, Jalna to the southeast, Aurangabad to the south, Nashik to the southwest, and Dhule to the west. It has a population of 42.24 lakh and a sex ratio of 922 females per 1,000 males, and a female literacy rate of 70.92% with an overall literacy rate of 79.73% (Census 2011). Agriculture is the main source of income in Jalgaon. It is well-connected to Mumbai, Pune as well as other major cities by an extensive road network. National Highway 6 passes through the district of Jalgaon.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.13%) among the ANC attendees, with a fluctuating downside trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.12%), as well as among Blood bank (0.26%) attendees. HIV positivity levels showed a decreasing trend for PPTCT attendees but a stable trend for blood bank attendees.
- As per 2010 HSS-FSW data, the level of HIV positivity was low among the FSWs (2.80%), and had a decreasing trend.
- According to 2012 ICTC data, HIV prevalence was low among male (2.30%) and female (1.88%) attendees, as well as among referred (1.93%) and direct walk-in (2.33%) attendees. HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, MSM (1,320; 65.61% of total HRG) was the largest HRG in the district followed by FSW (672; 33.40% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 13,146 and the syphilis positivity rate among STI clinic attendees was 0.20%.
- As per 2001 Census, 15% of the males were migrants, among them 12.64% migrated to other states and 38.38% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat in Gujarat and East-Nimar in Madhya Pradesh.
- In 2012, the major route for HIV transmission was through parent to child at 5.58%, in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 70.8% and 20.1%, respectively.
- In 2012, a total of three TI sites were functional in the district.

Key Recommendations:

- Carry out disaggregated analysis of HSS-ANC data to identify risk factors responsible for moderate HIV epidemic among general population.
- Since the largest HRG was MSM, improved assessment of the size and profile of MSM and partner population, will help in understanding of district vulnerabilities. As well as availability of typology data would help to analyze risk factors.
- Though HIV prevalence has declined among ICTC attendees, district needs continued attention to decrease and limit the spread of the infection further.
- The parent to child HIV transmission rate was high, thus more needs to be done to understand the profile of the attendees through in-depth analysis of ICTC data.
- Conduct special awareness campaign especially among pockets of out-migrants transit points and around truck halting points and highways in the district.
- Collect and analyze data at ITs and patients at ART center to understand geography and profile of groups, since 46% of PLHIV were on ART.

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	1.75	1.50	1.75	0.39				0.13	
	NT ⁴	800	800	800	765		796		800	
PPTCT	PP	1.62	1.89	0.75	0.40	0.32	0.21	-	0.12	
	NT	2538	5071	14801	27207	29838	34794	-	54189	
Blood Bank	PP	-	-	0.46	0.48	0.34	0.43	0.25	0.26	
	NT	-	-	1536	15161	14577	24324	22761	16325	
HSS-STD	PP	7.20	10.80	8.00	7.05					
	NT	250	250	250	227					
HSS-FSW	PP	21.60	11.20	6.40	1.60		2.80			
	NT	250	250	250	250		250			
HSS-MSM	PP	-	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-	-
HSS-IDU	PP	-	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-	-
ICTC Male	PP	18.27	19.85	11.32	7.76	3.94	2.61	2.30	2.30	
	NT	1029	2111	6628	13808	21255	29754	33013	31410	
ICTC Female	PP	12.69	21.28	10.12	8.26	4.08	2.98	2.25	1.88	
	NT	764	1217	3754	8718	13240	18462	21835	24112	
ICTC Referred	PP	14.07	18.88	9.36	6.27	3.38	2.25	1.97	1.93	
	NT	533	1123	4902	10374	19047	31530	31475	30154	
Walk-in	PP	16.67	21.13	12.25	9.40	4.75	3.69	2.70	2.33	
	NT	1260	2205	5496	12152	15448	16686	23373	25368	
Total tested at ICTCs ⁵	NT	4331	8399	25183	49733	65080	83010	54848	109711	

PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (7967)	46	6	7	4	1					
DLN (NA)	-	-	-	-	-					

Route of HIV Transmission, ICTC 2012						
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown
% of Total (N=949)	92.41	0.53	0.32	0	5.58	1.16

Block-Level Details						
No. HRG-FSW	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	672	1320	20							
% Total HRG	33.40	65.61	0.99							
% Total Pop.	0.02	0.03	0							
Program Target	NA	NA	NA							
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA							
% <25 yrs	-	-	-							
% Married	-	-	-							

	STI/RTI					
	2009	2010	2011	2012		
No. episodes treated	6645	9712	12665	13146		
% Syphilis positivity	0	0.50	0.53	0.20		

	Programme Response										
	2004	2005	2006	2007	2008	2009	2010	2011	2012		
FSW TIs	2	2	2	2	2	2	2	2	2		
MSM TIs	-	-	-	-	-	-	-	-	1		
IDU TIs	-	-	-	-	-	-	-	-	-		
Comp. TIs	-	-	-	-	1	1	1	-	-		
ICTCs	2	2	24	24	24	34	47	54	66		
Blood Banks	1	1	2	2	2	3	3	3	3		
STI clinics	1	1	1	1	1	1	1	1	1		
ART centres	-	-	-	-	1	1	1	1	1		
Link ART centres	-	-	-	-	-	-	7	7	7		
PLHIV Networks	-	-	-	-	-	1	1	1	1		
Red Ribbon Clubs	-	-	-	-	-	-	20	25	36		
Comm. care centres	-	-	-	-	-	1	1	1	1		
Drop-in-centres	-	-	-	-	-	1	1	1	1		
Condom outlets	5	6	8	10	14	14	83	69	54		

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Jalna

Background:

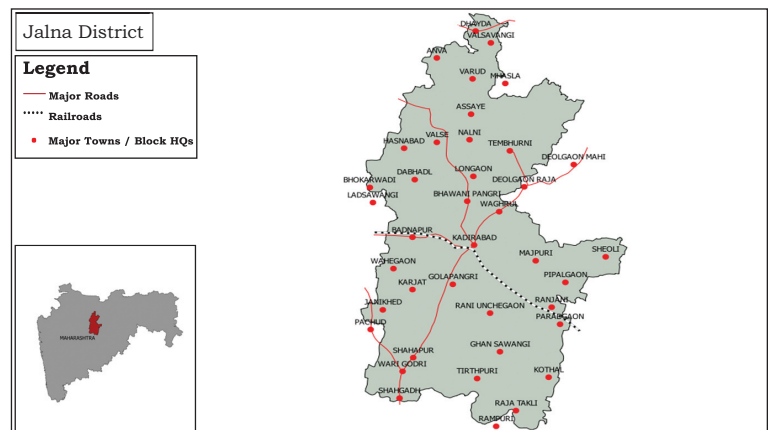
Jalna, one of the popular tourist spots in India, is bordered on the north by Jalgaon, on the east by Parbhani and Buldhana, on the south by Beed and on the west by Aurangabad. It has a population of 19.58 lakh, a sex ratio of 929 females per 1,000 males, and a female literacy rate of 61.28% with an overall literacy rate of 73.61% (Census 2011). Agriculture is the primary industry in this region. The district is well connected via roads and railways; Nagpur-Aurangabad-Mumbai Express Highway connects it to the rest of the districts within the state.

HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a stable trend in the last three recordings.
- Based on 2012 PPTCT data, HIV positivity was low (0.07%) among the PPTCT attendees, with a fluctuating trend in the last three recordings.
- According to 2012 Blood Bank data, HIV positivity was low (0.23%) among the Blood bank attendees, with a stable trend.
- According to 2012 ICTC data, HIV positivity rate was low among male (1.13%) and female (1.10%) attendees, as well as among referred (0.88%) attendees and direct walk-ins (1.35%). The HIV positivity levels showed an overall decreasing trend among all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,090; 93.08% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 9,903 and the syphilis positivity rate among STI clinic attendees was 0.77%.
- As per 2001 Census, 11.51% of the males were migrants, among them 3% migrated to other states and 57.32% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Ahmadabad in Gujarat.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 62.8% and 21.1%, respectively.
- In 2012, a total of three TI sites were functional in the district.
- The district had a total of 32 ICTCs, which tested a total of 45,001 attendees for HIV in the year 2012.

Key Recommendations:

- Though HIV prevalence has declined among both HSS-ANC and ICTC attendees, the district needs continued attention to decrease and limit the spread of the infection further.
- HSS should be conducted among FSW
- Assess the size and profile of FSWs client population, including migrants and truckers, will improve the understanding of district vulnerabilities, since the largest HRG was FSW.
- Parent to child HIV transmission was high in the district; therefore, it is necessary to strengthen PPTCT program coverage in the district.
- Higher HIV transmission rate through homosexual route necessitates strengthening of TI interventions for MSM population.
- Improve counseling at ICTCs, since the rate of unknown route of HIV transmissions was high.
- Strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.



Jalna

District Population: 19,58,483 (1.74% of Maharashtra Population); Female Literacy¹: 61.28%; ANC Utilization²: 69.2%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	0.88	1.13	0.63	0.38		0.25	0.25	
	NT ⁴	800	800	800	780		800	799	
PPTCT	PP	0.99	1.14	0.29	0.13	0.24	0.91	0.07	
	NT	1313	5180	12919	12483	15493	9682	20240	
Blood Bank	PP	-	-	#REF!	0.37	0.24	0.25	0.08	0.23
	NT	-	-	377	3274	3818	6118	7312	5596
HSS-STD	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-FSW	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-MSM	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-IDU	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
ICTC Male	PP	21.43	17.28	9.93	4.84	2.21	2.24	1.75	1.13
	NT	224	648	3061	4937	9055	10555	13291	13913
ICTC Female	PP	3.82	19.57	8.92	4.28	2.22	2.52	1.76	1.10
	NT	863	327	1972	3739	7419	6754	9255	10848
ICTC Referred	PP	3.85	15.20	9.22	4.58	2.74	1.97	1.53	0.88
	NT	727	375	1832	3277	5065	9635	12509	12272
ICTC Direct	PP	14.72	19.83	9.72	4.61	1.98	2.81	1.35	
	NT	360	600	3201	5399	11409	7674	10037	12489
Total tested at ICTCs ⁵	PP	2400	6155	17952	21159	35123	26991	22546	45001
	NT								

PLHIV Profile, 2012

	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced
ART (2261)	46	8	84	68	16
DLN (NA)	-	-	-	-	-

Route of HIV Transmission, ICTC 2012

	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown
% of Total (N=231)	94.81	0	0	0.43	4.76	0

Block-Level Details

	Ambad	Badnapur	Bhokardan	Ghana-savangi	Jafraabad	Mantha	Jalna	Partur
No. HRG- FSW	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-
No. HRG- IDU	-	-	-	-	-	-	-	-
% Pos: ICTC 2009	-	-	-	-	-	-	-	-
% Pos: PPTCT 2009	0.52	0.42	0.26	0	0.05	0.18	0.15	0

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Vulnerabilities

	HRG Size				Male Migration, 2001 Census					
	FSW	MSM	IDU		Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	1090	81	-		95033	2854	54476	37703		
% Total HRG	93.08	6.92	-		11.51	0.35	6.60	4.56		
% Total Pop.	0.06	0	-		100	3	57.32	39.67		
Program Target	NA	NA	NA		Top 5 districts for inter-state out-migration					
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA		Surat, Gujarat	Ah-madabad, Gujarat	Valsad, Gujarat	Vadodara, Gujarat	Bharuch, Gujarat	
% <25 yrs	-	-	-							
% Married	-	-	-							

STI/RTI

	2009	2010	2011	2012
No. episodes treated	2507	7027	12319	9903
% Syphilis positivity	30.77	0.86	2.01	0.77

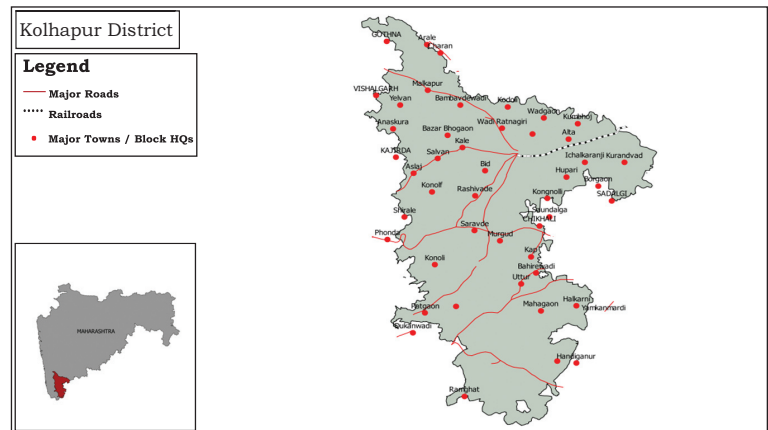
Programme Response

No.	2004	2005	2006	2007	2008	2009	2010	2011	2012
FSW TIs	-	-	-	-	-	1	1	1	1
MSM TIs	-	-	-	-	-	1	1	1	1
IDU TIs	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	1	1	1	1
ICTCs	2	4	6	9	12	22	27	32	32
Blood Banks	1	1	2	2	3	3	3	3	3
STI clinics	-	-	-	-	-	1	1	2	2
ART centres	-	-	-	-	-	1	1	1	1
Link ART centres	-	-	-	-	-	1	2	2	2
PLHIV Networks	-	-	-	-	-	1	1	1	1
Red Ribbon Clubs	-	-	-	-	2	3	5	7	9
Comm. care centres	-	-	-	-	1	1	1	1	-
Drop-in-centres	-	-	-	-	-	-	-	-	-
Condom outlets	-	-	1	2	4	6	12	15	20

Kolhapur

Background:

Kolhapur in Maharashtra is sharing its border with Belgaum to the south, Ratnagiri to the west, Sangli to the east, Sindhudurg to the south. It has a population of 38.74 lakh, a sex ratio of 953 females per 1,000 males, and a female literacy rate of 74.18% with an overall literacy rate of 82.90% (Census 2011). The district in south Maharashtra has essentially an agrarian economy, where 63% of district's total population depends on agriculture. Kolhapur is situated at a distance of 395 km to the South of Mumbai and 240 km from Pune. The district is located on the Pune - Bangalore National Highway 4.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.63%) among the ANC attendees, with an overall declining trend.
- Based on 2012 PPTCT and Blood Bank data, the HIV positivity rate was low for PPTCT (0.17%) attendees, while it was moderate among Blood donors (0.80%). HIV positivity levels showed a decreasing trend for PPTCT attendees and a stable trend for Blood bank attendees.
- Based on 2010 HSS data, HIV positivity was high among the FSWs (17.41%) and MSM (10.57%). A declining trend was observed among FSWs while a trend could not be observed among MSM due to lack of prior data.
- According to 2012 ICTC data, the HIV positivity rate was low among male (4.50%) attendees while it was moderate among female (6.78%) attendees. It was also moderate among referred (5.64%) and direct walk-in (5.11%) attendees. An overall decreasing trend was observed for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (746; 53.79% of total HRG) was the largest HRG in the district followed by MSM (641; 46.21% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 10,930 and the syphilis positivity rate among STI clinic attendees was 0.87%.
- As per 2001 Census, 11.49% of the males were migrants, among them 8.12% migrated to other states and 24.15% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Belgaum in Karnataka and North Goa.
- As per 2012 ICTC data, HIV transmission through parent to child which accounted for 7.95% of the total HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 86.9% and 38.5%, respectively.
- In 2012, a total of two TI sites were functional in the district.
- The district had a total of 54 operational ICTCs, which tested an overall 60,276 attendees for HIV in the year 2012.

Key Recommendations:

- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population.
- Since the largest HRG was FSW, better assessment of the size and profile of FSW's client population, including migrants and truckers, will help in better understanding district vulnerabilities. As well as availability of typology data would help to analyze risk factors.
- The parent to child HIV transmission rate was high, thus more needs to be done to scale up and strengthen the PPTCT programme
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.

Kolhapur

District Population: 38,74,015 (3.44% of Maharashtra Population); Female Literacy¹: 74.18%; ANC Utilization²: 82.8%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	1.88	1.38	1.38	0.38		0.75		0.63	
	NT ⁴	800	800	800	784		796		799	
PPTCT	PP	2.32	1.92	0.95	0.59	0.94	0.37		0.17	
	NT	2072	11138	17564	25875	30182	26925		26623	
Blood Bank	PP	-	-	0.99	0.75	0.63	0.64	0.62	0.80	
	NT	-	-	25222	30704	36283	33255	23379	4488	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	29.20	29.60	18.00	26.00		17.41		-	
	NT	250	250	250	250		247		-	
HSS-MSM	PP	-	-	-	16.00		10.57		-	
	NT	-	-	-	250		246		-	
HSS-IDU	PP	-	-	-	-		-		-	
	NT	-	-	-	-		-		-	
ICTC Male	PP	26.32	17.41	17.19	10.43	7.10	5.69	4.24	4.50	
	NT	1022	2722	9045	15535	13611	17897	24527	20587	
ICTC Female	PP	28.45	19.33	20.53	15.29	9.65	8.41	7.35	6.78	
	NT	717	1976	5017	8896	9137	11150	13030	13066	
ICTC Referred	PP	30.72	20.32	19.38	13.03	8.02	6.67	5.27	5.64	
	NT	853	2200	6015	10848	11662	14556	20075	17243	
Walk-in	PP	23.81	16.37	17.65	11.54	8.24	6.80	5.38	5.11	
	NT	886	2498	8047	13583	11086	14491	17482	16410	
Total tested at ICTCs ⁵	NT	3811	15836	31626	50286	57861	55972	37557	60276	

PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (15113)	46	9	49	32	14					
DLN (NA)	-	-	-	-	-					

Route of HIV Transmission, ICTC 2012						
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown
% of Total (N=1598)	88.61	0.81	0.06	0	7.95	2.57

Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	746	641	-	207193	16824	50030	140339			
% Total HRG	53.79	46.21	-	11.49	0.93	2.77	7.78			
% Total Pop.	0.02	0.02	-	% total migration	100	8.12	24.15	67.73		
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Belgaum, Karnataka	North Goa	South Goa	Bangalore, Karnataka	Bagalgot, Karnataka		
% <25 yrs	-	-	-							
% Married	-	-	-							

STI/RTI						
	2009	2010	2011	2012		
No. episodes treated	1911	5116	10095	10930		
% Syphilis positivity	0.00	0.93	0.36	0.87		

Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	1	1	1	1	1	1	1	1	1	
MSM TIs	-	-	-	-	-	-	-	-	-	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	3	5	25	25	25	30	43	53	54	
Blood Banks	2	2	2	2	2	2	2	2	2	
STI clinics	-	-	-	-	-	-	-	-	-	
ART centres	-	-	-	-	-	1	1	1	2	
Link ART centres	-	-	-	-	-	4	4	4	4	
PLHIV Networks	1	1	1	1	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	14	14	
Comm. care centres	-	-	-	-	-	-	1	1	1	
Drop-in-centres	-	-	-	-	-	-	1	1	1	
Condom outlets	-	-	-	-	-	-	312	312	312	

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Latur

Background:

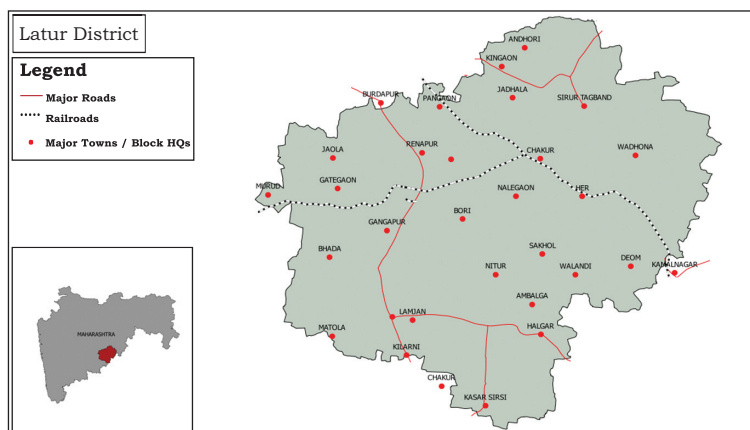
Latur is the southernmost district of Maharashtra, surrounded by Parbhani in the north, Osmanabad in the west and south, Bidar in the east, Nanded in the north-east and Beed in the north-west. It has a population of 24.55 lakh, a sex ratio of 924 females per 1,000 males, and a female literacy rate of 70.02% with an overall literacy rate of 79.03% (Census 2011). Agriculture is the chief source of income in Latur. The main crops produced here are pulses, cereals, oilseeds and grapes. Latur is also well-connected to Mumbai and Hyderabad by rail.

HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees with a declining trend.
- Based on 2012 PPTCT and Blood Bank data, the HIV positivity rate was low for PPTCT (0.22%) and Blood bank (0.10%) attendees. HIV positivity rate showed a decreasing trend for both the attendees.
- As per 2010 HSS data, HIV positivity was low among FSWs (4.02%), with a declining trend.
- According to 2012 ICTC data, HIV positivity was low among male (2.58%) and female (2.74%) attendees. It was also low among referred (1.89%) and direct walk-in (4.13%) attendees. A decreasing trend was seen among all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,507; 54.64% of total HRG) was the largest HRG in the district followed by MSM (1,226; 44.45% of total HRG).
- As per 2001 Census, 8.92% of the males were migrants, among them 2.82% migrated to other states and 45.60% migrated to other districts of state and 51.58% migrated within district.
- The top two destinations for out-of-state migration were Bidar in Karnataka and Rangareddy in Andhra Pradesh.
- As per 2012 ICTC data, parent to child route of HIV transmission accounted for 7.02% of all the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 77.1% and 31.4%, respectively.
- One MSM TI site was operational in the district in the year 2012.

Key Recommendations:

- Vulnerability was observed was due to risky behavior of females and direct walk in thus ensuring campaigns to spread awareness on comprehensive knowledge, of HIV prevention & control measures.
- Asses the size and profile of FSWs client population, including migrants and truckers, and MSM and client population, to improve the understanding of district vulnerabilities, since the largest HRG was FSW followed by MSM. Generate information on typology of HRG population to better understand district epidemiological profile.
- Conduct disaggregated analysis of ICTC direct walk-in clients & female attendees with respect to geography, age and residence from ICTC as well PPTCT to assess risk factors.
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.
- The percentage of transmission through parent to child route was high than state average. Therefore, there is a need to better understand the profile and dynamics of clinic attendees and their spouses, through analysis of ICTC data.



Latur

District Population: 24,55,543 (2.19% of Maharashtra Population); Female Literacy¹: 70.02%; ANC Utilization²: 76.2%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	1.00	0.88	0.75	0.88		0.00		0.25
	NT ⁴	800	800	800	795		756		800
PPTCT	PP	1.18	0.81	0.46	0.52	0.35	0.28		0.22
	NT	3824	8671	16872	19332	23166	20637		21542
Blood Bank	PP	-	-	1.00	1.03	0.22	0.32	0.18	0.10
	NT	-	-	3098	16525	12341	20513	9754	7825
HSS-STD	PP	10.40	10.00	7.20	-	-	-	-	-
	NT	250	250	250	-	-	-	-	-
HSS-FSW	PP	14.80	8.80	6.40	4.80		4.02		-
	NT	250	250	250	250		249		-
HSS-MSM	PP	-	-	-	9.60		10.80		-
	NT	-	-	-	250		250		-
HSS-IDU	PP	-	-	-	-		-		-
	NT	-	-	-	-		-		-
ICTC Male	PP	15.00	11.09	12.26	9.60	5.67	4.52	3.50	2.58
	NT	1053	3319	7725	10861	14164	15451	16762	18967
ICTC Female	PP	15.86	18.26	17.34	11.08	6.29	5.31	3.59	2.74
	NT	662	1687	4251	6640	9813	11129	13633	16827
ICTC Referred	PP	17.38	16.22	12.30	8.63	4.25	3.30	2.83	1.89
	NT	627	1646	3391	6885	13161	17013	20414	23601
ICTC Direct	PP	14.15	12.17	14.76	11.16	7.95	7.61	5.01	4.13
	NT	1088	3360	8585	10616	10816	9567	9981	12193
Walk-in	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
Total tested at ICTCs ⁵	PP	5539	13677	28848	36833	54484	47217	30395	57336
	NT	-	-	-	-	-	-	-	-

PLHIV Profile, 2012						
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	Parent to Child	% Widowed or Divorced
ART (7618)	40	14	51	42		11
DLN (NA)	-	-	-	-	-	-

Route of HIV Transmission, ICTC 2012						
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown
% of Total (N=897)	90.41	1.11	0.67	0.11	7.02	0.67

Block-Level Details						
No. HRG-FSW	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Vulnerabilities

	HRG Size			Male Migration, 2001 Census				
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district	
Size Est. (Mapping, Year: 2008)	1507	1226	25					
% Total HRG	54.64	44.45	0.91					
% Total Pop.	0.06	0.05	0					
Program Target	NA	NA	NA					
Program Coverage	-	-	-					
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA					
% <25 yrs	-	-	-					
% Married	-	-	-					

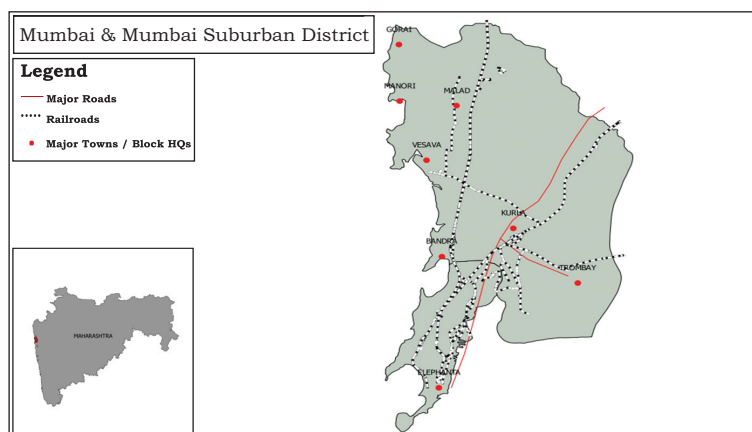
	Programme Response					
	2009	2010	2011	2012	2008	2009
No. episodes treated	27973	14841	9531	13253		
% Syphilis positivity	0.00	0.56	0.44	0.11		

	STI/RTI					
	2004	2005	2006	2007	2008	2009
FSW TIs	1	2	2	2	2	2
MSM TIs	-	-	-	-	1	1
IDU TIs	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-
ICTCs	4	4	15	23	23	36
Blood Banks	2	2	2	2	2	2
STI clinics	1	1	1	1	1	1
ART centres	-	-	-	1	1	1
Link ART centres	-	-	-	-	4	4
PLHIV Networks	-	-	-	1	1	1
Red Ribbon Clubs	-	-	-	-	-	-
Comm. care centres	-	-	1	2	1	1
Drop-in-centres	-	-	-	-	-	-
Condom outlets	-	-	-	-	-	-

Mumbai (Including Mumbai Suburban)

Background:

Mumbai is the capital city of the Indian state of Maharashtra. It is the most populous city in India, second most populous metropolitan city in India, and the fifth most populous city in the world, with a population of 124.78 lakh, a sex ratio of 847 females per 1,000 males, and a female literacy rate of 86.70% with an overall literacy rate of 90.28% (Census 2011) Mumbai lies on the west coast of India and has a deep natural harbour. It is also the wealthiest city in India, and has the highest GDP of any city in South, West or Central Asia. Mumbai is the financial and commercial capital of the country as it generates 6.16% of the total GDP. Mumbai is served by National Highway 3, 4, 8, 17 and 222 passes through the districts.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.75%) among the ANC attendees, with a decreasing trend.
- According to 2012 PPTCT data, the level of HIV positivity was low (0.36%) among the PPTCT attendees, with a decreasing trend.
- According to 2012 Blood Bank data, the level of HIV positivity was low (0.44%) among the Blood Bank attendees, with a stable trend.
- As per 2010 HSS-FSW data, HIV positivity was moderate among FSWs (8.42%), with a decreasing trend.
- As per 2010 HSS-MSM data, HIV positivity was high among (16.63%), with an increasing trend.
- As per 2010 HSS-IDU data, HIV positivity was high among (14.17%), with a decreasing trend.
- According to the 2012 ICTC data, HIV prevalence was moderate among male (5.51%) attendees, but low among female (4%) attendees, and also among referred (3.93%) attendees, but HIV prevalence was moderate for direct walk-ins (6.77%), with an overall declining trend among all the ICTC attendees.
- In 2012, the number of STI/RTI episodes treated was 1,06,388 and the syphilis positivity rate among STI clinic attendees was 0.36%.
- As per 2001 Census, 8.17% of the males were migrants, among them 17.83% migrated to other states and 82.17% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat, Gujarat and Bangalore, Karnataka.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 94.4% and 32%, respectively (Mumbai).
- According to DLHS-III data, the HIV and STI/RTI awareness rate among men was 92.3% and 28.1%, respectively (Mumbai Suburban).
- In 2012, a total of 37 TI sites were operational in the district.
- In 2012, a total of 110 ICTCs were functional and an overall 31,328 attendees got tested for HIV in the district.

Key Recommendations:

- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population.
- Carry out differential analysis of direct walk-in attendees (representative of vulnerable populations), owing to moderate positivity in 2012. An increasing trend among them can be explored by further analyzing the ICTC data.
- Increase the availability of additional information on the HIV epidemic profile of the district, including ART and HRG size data, to improve the understanding of district vulnerability.
- Considering high HIV prevalence among IDUs and MSM in the district, prevention efforts through TIs need to be strengthened.
- Conduct outreach campaign on STI awareness and sexual risk reduction messages especially among women.

Mumbai (Including Mumbai Suburban)

District Population: 1,24,78,447 (11.10% of Maharashtra Population); Female Literacy¹: 86.70%; ANC Utilization²: 91.2%

	HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴ 1.13 NT ⁴ 2400	1.05 2750	1.38 2400	1.04 2399		0.78 3197		0.63 3197		
PPTCT	PP - NT -	1.25 1525	0.91 105479	0.68 102650	0.66 92009	0.77 55698	0.37 117623	0.36 31328		
Blood Bank	PP - NT -	0.58 236360	0.50 209870	0.50 221215	0.47 261463	0.43 261655	0.45 256597	0.44 168526		
HSS-STD	PP 24.57 NT 468	16.89 438	* *	* *						
HSS-FSW	PP 30.51 NT 495	17.87 750	19.36 749	10.30 1000		8.42 1247				
HSS-MSM	PP 6.00 NT 250	7.60 250	8.40 250	9.20 250		16.63 499				
HSS-IDU	PP 12.80 NT 250	20.40 250	24.40 250	20 250		14.17 247				
ICTC Male	PP - NT -	- 35962	9.21 101558	10.38 10333	9.03 75042	7.64 67667	6.56 239207	5.51 133990		
ICTC Female	PP - NT -	- 17298	9.87 58433	10.33 49172	7.44 50142	6.13 50142	4.96 181413	4.00 103862		
ICTC Referred	PP - NT -	- 23859	9.26 91325	10.15 77805	7.75 77805	6.05 70764	5.04 266835	3.93 160655		
ICTC Direct	PP - NT -	- 29563	9.50 68666	10.63 46409	9.50 47045	8.41 47045	7.30 153785	6.77 77197		
Walk-in	PP - NT -	- 158739	9.50 262641	10.63 255864	9.50 173507	8.41 538243	7.30 269180	6.77 269180		
Total tested at ICTCs ⁵	NT -	1525	158739	262641	255864	173507	538243	269180		
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced					
ART (75570)	32	9	68	48	14					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=11428)	91.16	1.96	0.53	0.61	3.33	2.40				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-				
No. HRG-MSM	-	-	-	-	-	-				
No. HRG-IDU	-	-	-	-	-	-				
% Pos. ICTC	-	-	-	-	-	-				
% Pos. PPTCT	-	-	-	-	-	-				

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive, NT = number tested; ⁶ General clients & pregnant women.

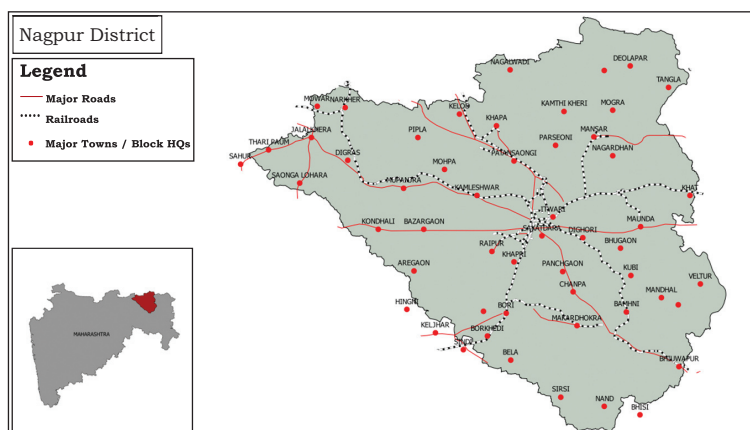
	Vulnerable					Male Migration, 2001 Census					
	HSG Size	FSW	MSM	IDU		Overall	Inter-State	Intra-state	Intra-district		
Program Target	NA	NA	NA	NA							
Program Coverage	-	-	-	-							
% Total Pop.	-	-	-	-							
% of Total HRG	-	-	-	-							
Size Est. (Mapping, Year: 2008)	-	-	-	-							
Typology	Home based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Surat, Gujarat	Bangalore, Karnataka	Alhambra, Gujarat	Vadodara, Gujarat	North Goa			
% <25 yrs	-	-	-	-							
% Married	-	-	-	-							
Programme Response											
No. episodes treated	2009	2010	2011	2012							
% Syphilis positivity	-	119269	147046	106388							
	-	0.80	0.37	0.36							
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012		
FSW TIs	6	4	5	5	10	13	14	13	19		
MSM TIs	1	1	2	2	6	8	6	12	14		
IDU TIs	1	1	1	2	2	2	3	4	4		
Comp. TIs	-	-	-	-	-	-	-	-	-		
ICTCs	26	38	64	64	74	91	90	97	110		
Blood Banks	51	50	57	56	55	57	58	58	57		
STI clinics	16	16	18	18	24	25	26	27	27		
ART centres	1	4	4	4	4	4	7	9	10		
Link ART centres	-	-	-	-	-	-	-	-	-		
PLHIV Networks	-	-	-	-	-	-	1	-	1		
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-		
Comm. care centres	-	-	-	-	-	-	-	-	-		
Drop-in-centres	-	-	-	-	-	-	-	-	-		
Condom outlets	-	-	-	-	-	-	-	-	-		

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive, NT = number tested; ⁶ General clients & pregnant women.

Nagpur

Background:

Nagpur is a district in the Vidarbha region of Maharashtra. The city of Nagpur is the district headquarters. The district is part of Nagpur division. Nagpur district is bound by Bhandara district on the east, Chandrapur district on the southeast, Wardha district on the southwest, Amravati district on the northwest and Chhindwara district of Madhya Pradesh state on the north. It has a population of 46.53 lakh, a sex ratio of 948 females per 1,000 males; female literacy rate of 85.07% and an overall literacy rate of 89.52% (Census 2011). Nagpur has been the main center of commerce in the Vidarbha region since early days and is an important trading location. Nagpur is also famous throughout the country as "Orange City" for being a major trade center of oranges that are cultivated in the region. Nagpur is a major junction for roadways as India's two major national highways, Kanyakumari-Varanasi (NH 7) and Hajira-Kolkata (NH-6), passing through the city.



HIV Epidemic Profile:

- As per 2010 HSS-ANC data, HIV prevalence was low among the ANC attendees, with a decreasing trend in the last three years.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.21%) and moderate among Blood bank (0.64%) attendees. The rate of HIV positivity showed a decreasing trend for PPTCT attendees, and a stable trend was seen among Blood bank attendees.
- According to 2008 HRG size mapping data, FSW (13,385; 86.98% of total HRG) was the largest HRG in the district followed by MSM (1,954; 12.70% of total HRG).
- According to 2012 ICTC data, HIV prevalence was low among male (3.33%) and female (3.25%) attendees, as well as among referred (3.05%) attendees and direct walk-ins (3.62%). The HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- In 2012, the number of STI/RTI episodes treated was 41,407 and the syphilis positivity rate among STI clinic attendees was 0.41%.
- As per 2001 Census, 7.74% of the males were migrants, among them 13.64% migrated to other states and 29.98% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Chhindwara in Madhya Pradesh and Surat in Gujarat.
- In 2012, parent to child route of HIV transmission accounted for 5.93%, of all HIV transmission in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 86.4% and 50.1%, respectively.
- In 2012, a total of five TI sites were operational in the district.
- A total of 73 ICTCs were operational in the district, which tested a total of 1,11,051 attendees for HIV in 2012.

Key Recommendations:

- Conduct disaggregated analysis of ICTC, PPTCT, ART data to assess geographical spread with in the district, HIV population infected and their occupational risk to understand the precise epidemic pattern in the district.
- Since the largest HRG was FSW, in depth assessment of the size and profile of FSW's client population including migrants and truckers, will help in understanding of district vulnerabilities
- Though HIV prevalence has declined from high to low levels among both ANC and ICTC attendees, district needs continued attention to decrease and limit the spread of the infection further.
- Parent to child HIV transmission was high in the district; therefore, it is necessary to strengthen PPTCT program coverage in the district.
- Strengthen outreach programme for HRG, and awareness campaigns through focused, effective mass media- mid media approach around source and transit points like railway stations and bus stands for migrants as well.

Nagpur

District Population: 46,53, 171 (4.14% of Maharashtra Population); Female Literacy¹: 85.07%; ANC Utilization²: 95.5%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	0.88	0.88	1.13	0.38				
	NT ⁴	800	800	800	790	778			
PPTCT	PP	5.83	0.90	0.82	0.59	0.55	0.43		
	NT	17149	34915	45142	51809	45608	42658		50327
Blood Bank	PP	-	-	0.56	0.67	0.57	0.60	0.52	0.64
	NT	-	-	46992	69576	77196	75496	47969	20977
HSS-STD	PP	20.40	20.40	13.60	13.11				
	NT	250	250	250	244				
HSS-FSW	PP	-	-	-	17.20		1.60		
	NT	-	-	-	250		250		
HSS-MSM	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-IDU	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
ICTC Male	PP	25.82	20.08	10.03	7.27	6.23	4.38	3.27	3.33
	NT	4709	7968	15229	25102	26586	36035	41920	37429
ICTC Female	PP	18.60	21.38	12.13	9.37	7.45	5.84	3.19	3.25
	NT	3189	3790	6136	10789	13617	16620	22350	23295
ICTC Referred	PP	19.25	21.04	14.42	9.98	7.70	4.40	3.23	3.05
	NT	4654	7206	9570	16406	20552	32131	35222	33840
Walk-in	PP	28.14	19.82	7.55	6.16	5.53	5.54	3.26	3.62
	NT	3244	4552	11795	19485	19651	20524	29048	26884
Total tested at ICTCs ⁵	NT	25047	46673	66507	87700	96752	95313	64270	111051
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced				
ART (23607)	30	6	67	56	14				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=1854)	91.64	0.49	0.81	0.22	5.93	0.92			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

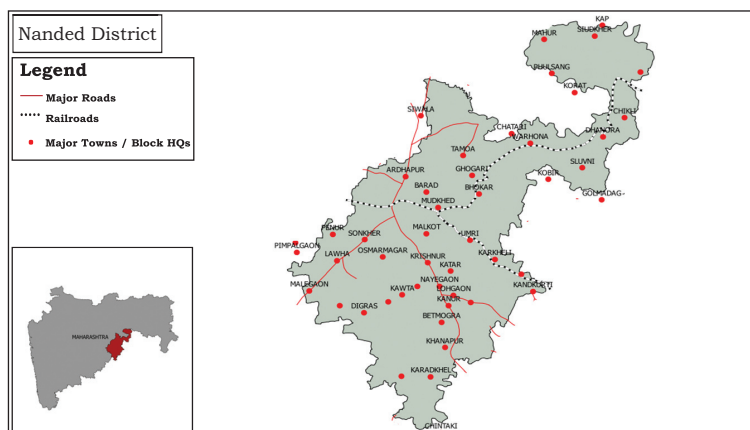
Vulnerabilities										
	HRG Size				Male Migration, 2001 Census					
	FSW	MSM	IDU		Overall	Intra-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	13385	1954	50		No. out-migration	162286	22141	48656	91489	
% Total HRG	86.98	12.70	0.32		% of male pop.	7.74	1.06	2.32	4.37	
% Total Pop.	0.29	0.04	0		% total migration	100	13.64	29.98	56.38	
Program Target	NA	NA	NA		Top 5 districts for inter-state out-migration					
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA		Chhindwara, Madhya Pradesh	Surat, Gujarat	Bhopal, Madhya Pradesh	Raipur, Chhatis-garh	Balaghat, Madhya Pradesh	
% <25 yrs	-	-	-							
% Married	-	-	-							
STI/RTI										
No. episodes treated	11970	39526	61246	41407						
% Syphilis positivity	5.38	2.34	1.17	0.41						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	1	1	1	-	2	2	4	4	4	
MSM TIs	-	-	1	1	1	1	1	1	1	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	7	7	23	23	23	42	42	67	73	
Blood Banks	6	6	6	6	6	6	6	6	6	
STI clinics	-	-	-	-	-	3	3	4	4	
ART centres	-	1	1	1	1	2	2	2	2	
Link ART centres	-	-	-	-	5	5	5	5	5	
PLHIV Networks	-	1	1	1	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	11	11	
Comm. care centres	-	-	-	-	1	1	1	-	-	
Drop-in-centres	-	1	1	1	1	1	1	1	1	
Condom outlets	-	-	-	-	-	-	-	-	-	

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Nanded

Background:

Nanded lies in the eastern portion of Marathwada region, which corresponds to Aurangabad division of Maharashtra. The district is bordered by Nizamabad, Medak and Adilabad districts of Andhra Pradesh on the east, by Bidar district of Karnataka falls on the south, by Parbhani and Latur districts of Marathwada on the west, and Yavatmal district of Maharashtra's Vidarbha region on the north. It has a population of 35.56 lakh, a sex ratio of 937 females per 1,000 males, and a female literacy rate of 66.68% with an overall literacy rate of 76.94% (Census 2011). In 2006, the Ministry of Panchayati Raj named Nanded as one of the country's 250 most backward districts. It is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme (BRGF). It is well connected via roads and railways, and National Highway-22 passes through the district.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.50%) among the ANC attendees, with a fluctuating trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT (0.18%) and Blood donors (0.32%). HIV positivity levels showed a decreasing trend for both the attendees.
- According to 2012 ICTC data, HIV prevalence was low among male (3.10%) and female (3.94%) attendees. It was also low among referred (3%) attendees and direct walk-ins (3.86%). HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (518; 100% of total HRG) was the only HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 8,599 and the syphilis positivity rate among STI clinic attendees was 0.27%.
- As per 2001 Census, 7.67% of the males were migrants. Among the male migrants, 8.53% migrated to other states and 34.40% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Adilabad and Nizamabad in Andhra Pradesh.
- As per 2012 ICTC data, parent to child HIV transmission accounted for 6.02% of the HIV positives in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 76.6% and 26.3%, respectively.
- In 2012, there was one TI site functional in the district.

Key Recommendations:

- When the IBBS data will be available, analyze on FSW and other groups in the district to improve the understanding of the vulnerabilities. Since the largest HRG was FSW, improved assessment of the size and profile of client population including migrants and truckers, will help in understanding of district vulnerabilities. As well as availability of typology data would help to analyze risk factors.
- Improve PPTCT services as the rate of parent to child HIV transmissions was high in the district.
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.

Nanded

District Population: 33,56,566 (2.47% of Maharashtra Population); Female Literacy¹: 66.68%; ANC Utilization²: 76.2%

	HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	0.63	0.50	0.38	0.69		0.38		0.50	
	NT ⁴	800	800	800	727		799		800	
PPTCT	PP	0.73	0.86	1.01	0.56	0.39	0.30		0.18	
	NT	2868	4426	10176	15434	20067	17854		19322	
Blood Bank	PP	-	-	0.60	0.78	0.67	0.47	0.40	0.32	
	NT	-	-	6265	12500	21976	28709	31500	7173	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	11.54	11.36	15.32	8.33	5.29	4.55	3.74	3.10	
	NT	1118	1356	5749	11775	14752	15727	18472	21465	
ICTC Female	PP	11.39	12.88	17.66	9.91	6.01	5.66	4.86	3.94	
	NT	667	779	3097	6339	8347	8776	9470	12155	
ICTC Referred	PP	8.88	10.61	10.46	7.47	5.58	4.76	3.73	3.00	
	NT	822	735	2733	4499	6895	7505	8909	17776	
ICTC Direct	PP	13.71	12.43	18.69	9.35	5.54	5.04	4.32	3.86	
	NT	963	1400	6115	13615	16204	16998	18133	15844	
Total tested at ICTCs ⁵	PP	4653	6561	19022	33548	46643	42357	27942	52942	
	NT	-	-	-	-	-	-	-	-	
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (7780)	44	11	46	37	9					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=1047)	91.79	0.86	0	0	6.02	1.34				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-				
No. HRG-MSM	-	-	-	-	-	-				
No. HRG-IDU	-	-	-	-	-	-				
% Pos. ICTC	-	-	-	-	-	-				
% Pos. PPTCT	-	-	-	-	-	-				

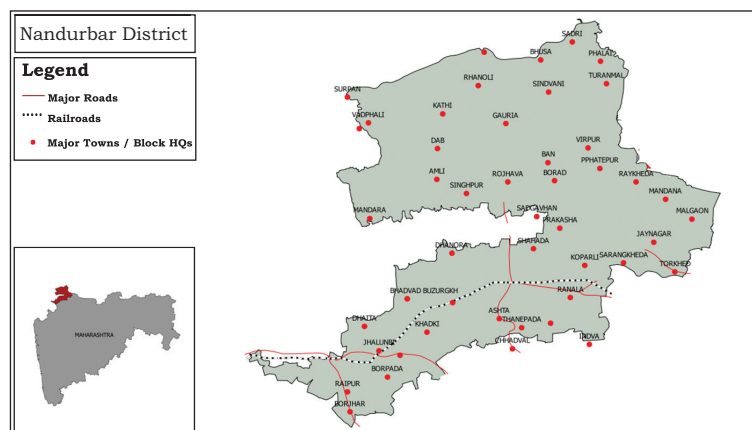
* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

	HRG Size					Vulnerabilities				
	FSW	MSM	IDU			Male Migration, 2001 Census				
Size Est. (Mapping, Year: 2008)	518	-	-			Overall	Inter-State	Intra-state	Intra-district	
% Total HRG	100	-	-			No. out-migration	113296	9663	38973	64660
% Total Pop.	0.02	-	-			% of male pop.	7.67	0.65	2.64	4.38
Program Target	NA	NA	NA			% total migration	100	8.53	34.40	57.07
Program Coverage	-	-	-			Top 5 districts for inter-state out-migration				
Typology	Home based - NA;	Kothi - NA;	Daily Injectors- NA;			Adilabad, Andhra Pradesh	Nizam-abad, Andhra Pradesh	Ran-gareddy, Andhra Pradesh	Karimna-gar, Andhra Pradesh	Medak, Andhra Pradesh
% <25 yrs	-	-	-							
% Married	-	-	-							
STI/RTI										
No. episodes treated	2099	2010	2011	2012						
% Syphilis positivity	0.94	0.37	0.20	0.27						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	-	-	-	-	1	1	1	1
MSM TIs	-	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-	-
ICTCs	2	2	20	20	20	20	29	29	48	
Blood Banks	4	4	4	4	4	4	4	4	4	
STI clinics	1	1	1	1	1	1	1	1	1	
ART centres	-	-	-	-	-	-	1	1	1	
Link ART centres	-	-	-	-	-	-	6	6	6	
PLHIV Networks	-	-	-	-	-	-	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	50	50	50	
Comm. care centres	-	-	-	-	-	-	1	1	1	
Drop-in-centres	-	-	-	-	-	-	1	1	1	
Condom outlets	-	-	-	-	-	-	21	21	21	

Nandurbar

Background:

Nandurbar is an administrative district in the northwest corner (Khandesh region) of Maharashtra. The district is bordered to the south and south-east by Dhule, to the west and north by Gujarat, to the north and north-east is Madhya Pradesh. It has a population of 16.46 lakh, a sex ratio of 972 females per 1,000 males, and a female literacy rate of 53.90% with an overall literacy rate of 63.04% (Census 2011). Current site for the construction and operation of the world's largest wind farm having an output of 1000M.W. is just 30 km away from Nandurbar city. It is one of the country's 250 most backward districts and is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme (BRGF). It is well connected via roads and railways, and National Highway 16 connects it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a declining trend although a rise was seen in 2010.
- Based on 2012 data from PPTCT and Blood Bank programs, the level of HIV positivity was low among PPTCT attendees (0.08%), as well as among Blood donors (0.38%). HIV positivity levels showed a decreasing trend for both the PPTCT attendees and the blood donors
- According to 2012 ICTC data, HIV prevalence was low among male (2.64%) and female (1.72%) attendees, as well as among referred (1.86%) and direct walk-in (4.46%) attendees. The HIV positivity levels showed a decreasing trend for all the ICTC attendees except for ICTC direct Walk-ins which experienced a stable trend.
- According to 2008 HRG size mapping data, FSW (448; 79.43% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 2,272, which was nearly two fold increase since 2011
- As per 2001 Census, 10.65% of the males were migrants. Out of the total male migrants, 22.66% migrated to other states and 17.92% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Navsari in Gujarat, as per the 2001 census.
- According to 2012 ICTC data, the route of HIV transmission was high from parent to child at 8.87%, in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 28.9% and 7.5%, respectively.
- In 2012, a total of three TI sites were operational in the district.
- There were a total of 29 ICTCs operational in the district, which tested an overall of 37,639 attendees for HIV in 2012.

Key Recommendations:

- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population and strengthen the PPTCT program in the district.
- Although there was a low level of HIV epidemic in the district, vulnerability factors in transmission of HIV needs to be analysed from ICTC and STI data.
- Intensify outreach activities with HIV prevention messages for migrants at source and destination sites.
- Strengthen efforts towards assessing route of HIV transmission at the ICTCs.
- The percentage of HIV transmission via parent to child was high. Therefore, there is a need to better understand the profile and dynamics of clinic attendees and their spouses, through analysis of ICTC data.

Nandurbar

District Population: 16,46,177 (1.46% of Maharashtra Population); Female Literacy: 53.90%; ANC Utilization²: 38.3%

		HIV Levels and Trends ³									
		2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	0.63	0.38	0.38	0.13		0.50		0.25		
	NT ⁴	800	800	800	800		795		800		
PPTCT	PP	0.95	0.55	0.57	0.26	0.20	0.26		0.08		
	NT	1269	3606	9469	15638	14537	13166		17247		
Blood Bank	PP	-	-	0.84	0.87	0.32	0.20	0.38	0.38		
	NT	-	-	2244	2420	2496	3501	3996	2355		
HSS-STD	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-FSW	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-MSM	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-IDU	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
ICTC Male	PP	28.43	11.75	7.05	5.58	4.96	3.08	2.27	2.64		
	NT	299	987	3733	5613	6234	9274	11621	10328		
ICTC Female	PP	17.13	9.98	5.54	4.45	3.89	2.43	1.68	1.72		
	NT	321	521	1967	4852	5350	7693	10403	10064		
ICTC Referred	PP	18.28	12.06	8.06	5.85	5.72	2.58	1.77	1.86		
	NT	443	987	2793	5090	6796	12930	17656	17859		
Walk-in	PP	33.33	9.40	5.06	4.30	2.67	3.47	2.88	4.46		
	NT	177	521	2907	5375	4788	4037	4368	2533		
Total tested at ICTCs ⁵	NT	1889	5114	15169	25856	28061	30133	22024	37639		
PLHIV Profile, 2012											
	% On ART		% 15-24 yrs		% Ill, Prim. Edu.		% Married		% Widowed or Divorced		
ART (2453)	43	-	-	88	-	19	-	17	-	-	-
DLN (NA)	-	-	-	-	-	-	-	-	-	-	-
Route of HIV Transmission, ICTC 2012											
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown					
% of Total (N=485)	88.87	1.65	0	0.21	8.87	0.41					
Block-Level Details											
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ² Data not available; ³ 2011 Census; ⁴ Source: DLHS Ill; ⁵ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

		HRG Size				Vulnerabilities						
		FSW	MSM	IDU		Male Migration, 2001 Census						
						Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)		448	96	20								
	% Total HRG	79.43	17.02	3.55		No. out-migration	70571	15989	12644	41938		
% Total Pop.	0.03	0.01	0		% of male pop.	10.65	2.41	1.91	6.33			
Program Target	NA	NA	NA		% total migration	100	22.66	17.92	59.43			
Program Coverage	-	-	-		Top 5 districts for inter-state out-migration							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA		Surat, Gujarat	Navsari, Gujarat	Bharuch, Gujarat	Banwari, Madhya Pradesh	Nalanda, Bihar			
% <25 yrs. Married	-	-	-									
		STI/RTI										
No. episodes treated	2009	2010	2011	2012								
% Syphilis positivity	925	4045	1245	2272								
	0	0	0	0	Programme Response							
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012			
FSW TIs	1	1	1	1	1	1	1	1	1			
MSM TIs	1	1	1	1	1	1	1	1	1			
IDU TIs	-	-	-	-	-	-	-	-	-			
Comp. TIs	1	1	1	1	1	1	1	1	1			
ICTCs	2	2	4	14	14	14	14	29	29			
Blood Banks	1	1	1	1	1	1	1	2	2			
STI clinics	-	-	-	-	-	-	-	1	1			
ART centres	-	-	-	-	-	-	-	1	1			
Link ART centres	-	-	-	-	-	-	-	1	1			
PLHIV Networks	-	-	1	1	1	1	1	1	1			
Red Ribbon Clubs	-	-	-	-	-	-	-	16	71			
Comm. care centres	-	-	-	-	-	-	-	1	1			
Drop-in-centres	-	-	-	-	-	-	-	1	1			
Condom outlets	-	-	-	-	-	-	-	18	26			

Nashik

Background:

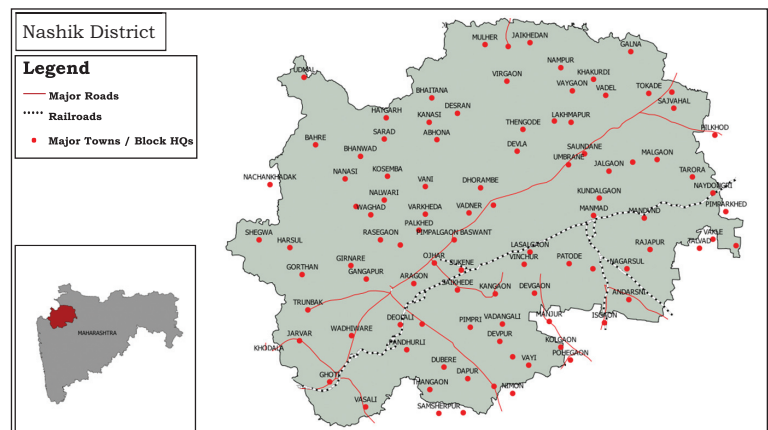
Nashik is bordered by Dhule to the north, Jalgaon to the east, Aurangabad to the southeast, Ahmadnagar to the south, Thane to the southwest, Valsad and Navsari districts of Gujarat to the west, and the Dangs district of Gujarat to the northwest. It has a population of 61.09 lakh, and a sex ratio of 931 females per 1,000 males, and a female literacy rate of 73.43% with an overall literacy rate of 80.96% (Census 2011). It is well connected via roads and railways, National Highway-3, connecting it to the rest of the districts with in the state.

HIV Epidemic Profile:

- As per 2012 HSS-ANC data, prevalence was low (0.25%) among the ANC attendees, with a decreasing trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT attendees (0.08%) and blood donors (0.22%), with a fluctuating trend for PPTCT attendees and a stable trend for Blood Bank attendees.
- According to 2012 ICTC data, HIV prevalence was low among male (1.65%) and female (2.09%) attendees, as well as among referred (1.02%) and direct walk-in (2.96%) attendees. The HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,873; 71% of total HRG) was the largest HRG in the district followed by MSM (545; 20.66% of total HRG) and IDU (220; 8.34% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 22,320 and the syphilis positivity rate among STI clinic attendees was 0.06%.
- As per 2001 Census, 11.93% of the total males were migrants. Among the total migrant males 3.61% migrated to other states and 20.67% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Valsad in Gujarat, as per Census 2001.
- According to 2012 ICTC data, HIV transmission from parent to child was at 7.28%, in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 69.6% and 28.1%, respectively.
- There were a total of two TI sites operational in the district in 2012, one for the FSWs and one for MSM.
- In 2012, a total of 101 ICTCs were functional and 1,54,069 attendees were tested for HIV in the district.

Key Recommendations:

- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population and strengthen the PPTCT program in the district.
- Continue HIV prevention strategies to maintain the HIV prevalence at low levels in the district.
- When the IBBS data will be available, analyze on FSW and other groups in the district to improve the understanding of the vulnerabilities.
- Strengthen IEC programmes for creating STI/RTI awareness in district among general population, especially women.



HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	1.75	0.63	0.38	0.38	0.13		0.25	
	NT ⁴	800	800	800	791	800		800	
PPTCT	PP	1.94	0.80	0.57	0.35	0.54		0.08	
	NT	2739	12498	26631	37094	39584	31260	68280	
Blood Bank	PP	-	-	0.25	0.25	0.20		0.33	
	NT	-	-	25822	41440	44552	42628	34326	13968
HSS-STD	PP	-	-	-	-	-		-	
	NT	-	-	-	-	-		-	
HSS-FSW	PP	18.40	9.60	7.20	9.60	8.00		-	
	NT	250	250	250	250	250		-	
HSS-MSM	PP	-	-	-	-	-		-	
	NT	-	-	-	-	-		-	
HSS-IDU	PP	-	-	-	-	-		-	
	NT	-	-	-	-	-		-	
ICTC Male	PP	15.54	13.94	8.97	6.99	3.89		1.65	
	NT	2021	4083	10508	16644	24136	28048	53006	52962
ICTC Female	PP	8.53	14.81	11.23	9.07	5.30		2.09	
	NT	2566	2214	5683	9787	13471	15702	30316	32827
ICTC Referred	PP	7.55	11.71	8.68	5.74	2.46		1.02	
	NT	1734	1494	4170	7527	14782	24532	48478	50428
ICTC Direct	PP	14.09	15.03	10.12	8.57	5.65		3.03	
	NT	2853	4803	12021	18904	22825	19218	34844	35361
Walk-in	PP	-	-	-	-	-		-	
	NT	-	-	-	-	-		-	
Total tested at ICTCs ⁵	PP	7326	18795	42822	62957	81144		83322	154069
	NT	-	-	-	-	-		-	-

PLHIV Profile, 2012					
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced
ART (9375)	51	7	48	37	18
DLN (NA)	-	-	-	-	-

Route of HIV Transmission, ICTC 2012						
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown
% of Total (N=1565)	87.28	0.58	0.77	0.19	7.28	3.90

Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Intra-state	Intra-district	Surat, Gujarat	Valsad, Gujarat	Nasari, Gujarat	Dadra & Nagar Haveli, Dadra & Nagar Haveli
Size Est. (Mapping, Year: 2008)	1873	545	220							
% Total HRG	71.00	20.66	8.34							
% Total Pop.	0.03	0.01	0							
Program Target	NA	NA	NA							
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA							
% <25 yrs	-	-	-							
% Married	-	-	-							

	Programme Response					
	2009	2010	2011	2012	2008	2012
No. episodes treated	4857	18163	16278	22320		
% Syphilis positivity	0.00	0.86	0.84	0.06		

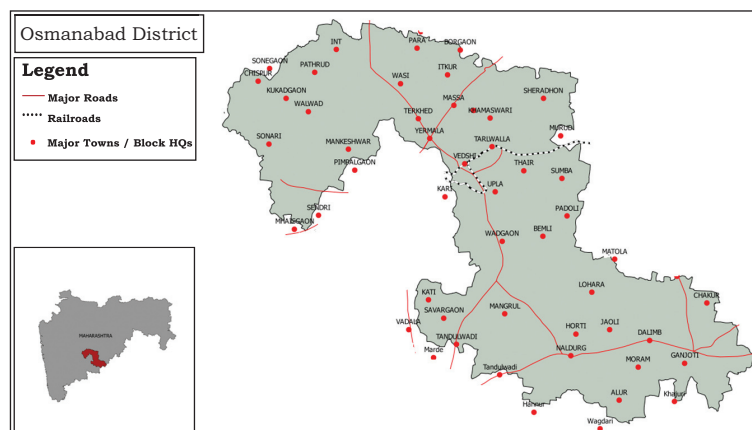
	Programme Response									
	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	1	1	1	1	1	1	1	1	1	1
MSM TIs	1	1	1	1	1	1	1	1	1	1
IDU TIs	-	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-	-
ICTCs	5	5	35	35	35	35	51	65	101	
Blood Banks	2	2	2	2	2	2	3	3	3	
STI clinics	-	-	-	-	2	2	2	2	2	
ART centres	-	-	-	-	1	1	1	1	2	
Link ART centres	-	-	-	-	-	-	4	4	4	
PLHIV Networks	-	-	-	-	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	35	35	
Comm. care centres	-	-	-	-	1	1	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	1	1	
Condom outlets	5	5	35	35	42	42	180	180	180	

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Osmanabad

Background:

Osmanabad is in the Marathwada region of Maharashtra, situated to the north of Osmanabad lies Beed, to the northeast and east is Latur, to the east and southeast is Bidar of Karnataka, to the southeast and south is Gulbarga of Karnataka, to the south and southwest is Solapur and to the northwest is Ahmednagar. It has a population of 16.60 lakh, and a sex ratio of 920 females per 1,000 males, and a female literacy rate of 66.67% with an overall literacy rate of 76.33% (Census 2011). The district is well connected via roads and railway, and National Highway 9 and 211 connect it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.63%) among the ANC attendees, with a fluctuating trend.
- Based on 2012 PPTCT and Blood Bank data, the HIV positivity was low for PPTCT attendees (0.27%), while it was moderate among Blood donors (0.89%), with a fluctuating trend among both.
- According to 2012 ICTC data, HIV positivity was low among male (2.82%) and female (2.75%) attendees. It was also low among referred (1.98%) attendees, while it was near moderate among ICTC direct walk in attendees (4.61%). A decreasing positivity trend was observed for all the ICTC attendees.
- In 2012, the number of STI/RTI episodes treated was 2,223 and the syphilis positivity rate among STI clinic attendees was 0.38%.
- As per 2001 Census, 10.32% of the total males were migrants. Among the total male migrants 1.69% migrated to other states and 64.14% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Belgaum and Gulbarga in Karnataka.
- As per 2012 ICTC data, HIV route of transmission through parent to child which accounted for 7.81% of the total HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 74.2% and 25.4%, respectively.
- In 2012, a total of 46 ICTCs were operational, which tested a total of 46,416 attendees for HIV in the district.

Key Recommendations:

- Conduct socio-demographic analysis of HSS-ANC data to understand risk factors for HIV epidemic among general population and strengthen the PPTCT program in the district.
- The parent to child HIV transmission rate was high, thus more needs to be done to understand the profile of these attendees through in-depth analysis of ICTC data.
- Strengthen outreach programme through awareness campaigns around source and transit points, like railway stations and bus stands.
- Increase STI/RTI Awareness among women in district.
- When the IBBS data will be available, analyze on FSW, MSM and other groups in the districts to improve the understanding of vulnerabilities.

Osmanabad

District Population: 1,650,311 (1.48% of Maharashtra Population); Female Literacy¹: 66.67%; ANC Utilization²: 71.9%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	1.38	1.50	0.25	0.80		0.50		0.63	
	NT ⁴	800	800	800	751		800		799	
PPTCT	PP	0.88	0.67	0.72	0.53	0.67	2.94		0.27	
	NT	2602	4783	10185	12909	15164	14225		17973	
Blood Bank	PP	-	-	0.89	0.90	0.91	0.74	0.46	0.89	
	NT	-	-	3034	2791	3535	3906	2820	1232	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	7.84	8.21	7.89	8.33	6.60	4.45	3.40	2.82	
	NT	689	1535	4105	5810	7935	10648	14534	14897	
ICTC Female	PP	7.49	15.96	16.38	13.29	9.09	5.63	4.07	2.75	
	NT	427	426	1880	2972	4631	7246	10525	13546	
ICTC Referred	PP	10.65	18.35	10.37	10.65	6.51	3.98	2.77	1.98	
	NT	526	583	2786	3792	6189	10633	16404	19766	
ICTC Direct	PP	5.08	6.31	9.03	9.52	8.50	6.32	5.40	4.61	
	NT	590	1378	3187	4990	6377	7261	8655	8677	
Total tested at ICTCs ⁵	NT	3718	6744	16170	21573	29876	32119	25059	46416	
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (4267)	45	10	87	63	22					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=743)	86.94	1.08	0.54	0.13	7.81	3.50				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

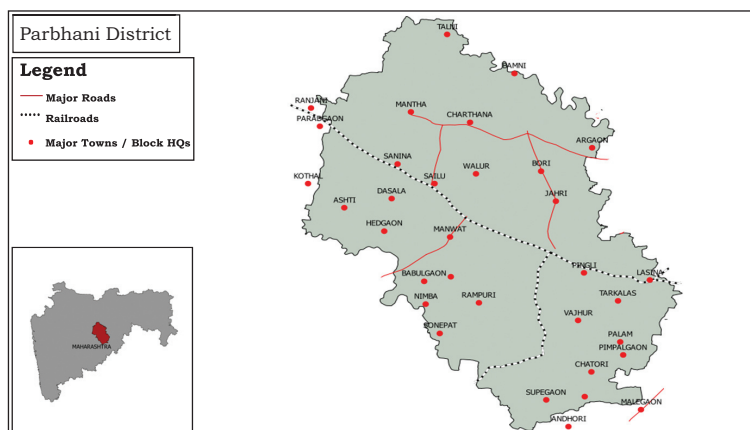
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	-	-	-	78713	1327	50485	26901			
% Total HRG	-	-	-	10.32	0.17	6.62	3.53			
% Total Pop.	-	-	-	% total migration	100	1.69	64.14	34.18		
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Pantli - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Belgaum, Karnataka	Gulbarga, Karnataka	Valsad, Gujarat				
% <25 yrs	-	-	-							
% Married	-	-	-							
	STI/RTI									
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	0.00	1.02	0.24	0.38						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	-	-	1	1	1	0	0	
MSM TIs	-	-	-	-	-	-	-	-	-	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	1	1	13	13	13	23	46	48	46	
Blood Banks	1	1	1	1	1	1	1	1	1	
STI clinics	1	1	1	1	1	1	1	1	1	
ART centres	-	-	-	-	1	1	1	1	1	
Link ART centres	-	-	-	-	-	-	3	3	4	
PLHIV Networks	1	2	2	2	2	2	2	2	2	
Red Ribbon Clubs	-	-	-	-	-	-	15	15	15	
Comm. care centres	-	-	-	-	-	1	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	1	1	
Condom outlets	-	-	13	13	100	100	150	213	215	

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Parbhani

Background:

Parbhani earlier also known as Prabhavatinagar, is one of the eight districts in the Marathwada region of Maharashtra. The district is enveloped by Hingoli in the north, by Nanded in the east, on the south is Latur and Beed is towards the west. It has a population of 18.36 lakh, and a sex ratio of 940 females per 1,000 males, and a female literacy rate of 64.27% with an overall literacy rate of 75.22% (Census 2011). Parbhani is an agrarian district. It is well connected via roads and railways, and National Highway 222 connects it to the rest of the districts with in the state.



HIV Epidemic Profile:

- As per 2010 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a decreasing trend in the last three years.
- Based on 2012 PPTCT and Blood bank data, the level of HIV positivity was low for PPTCT attendees (0.24%) and blood donors (0.32%). HIV positivity levels showed a decreasing trend among PPTCT, while a stable trend was observed for blood bank attendees.
- As per 2010 HSS data, HIV positivity was near-moderate among FSWs (4.82%) and moderate among MSM (6%). A decreasing trend was observed for FSWs, while a trend could not be determined among MSM due to lack of prior data.
- According to 2012 ICTC data, HIV prevalence was low among male (4.15%) and female (2.81%) attendees, as well as among referred (2.34%) attendees, while it was moderate for direct walk-ins (5.42%). The HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,749; 81.58% of total HRG) was the largest HRG in the district followed by MSM (395; 18.42% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 18,067.
- The top two destinations for out-of-state migration were Bagalkot and Belgaum in Karnataka.
- As per the Census 2001, 11.28% out of the total male population were migrants. Among the migrated, 56.62% migrated to other parts of the state and 41.41% migrated within the district and 2.07% migrated out to other states.
- As per 2012 ICTC data, the route of HIV transmission through parent to child accounted for 6.16% of all transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 78.3% and 35.1%, respectively.
- In 2012, a total of nine TI sites were operational in the district.
- A total of 39 ICTCs were operational in the district in 2012, which tested a total of 39,855 attendees for HIV in the district.

Key Recommendations:

- When the IBBS data will be available, analyze on FSW, MSM and other groups in the district to improve the understanding of the vulnerabilities
- The percentage of HIV transmission via parent to child was high. Therefore, there is a need to better understand the profile and dynamics of clinic attendees and their spouses, through analysis of ICTC data. PPTCT programme has to be strengthened.
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.
- Increase STI RTI awareness among women and integrate STI prevention and treatment into the PPTCT program.
- Expand coverage of HIV counseling and testing in the district to detect HIV positive cases at an early age, due to high percentage of PLHIV on ART (50%).

Parbhani

District Population: 18,35,982 (1.63% of Maharashtra Population); Female Literacy¹: 64.27%; ANC Utilization²: 69%

		HIV Levels and Trends ³									
		2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	0.50	0.88	1.13	0.53		0.25				
	NT ⁴	800	800	800	759		798				
PPTCT	PP	0.87	0.78	0.60	0.59	1.00	0.62				
	NT	1373	6048	9286	8348	12956	11851				20560
Blood Bank	PP	-	-	0.49	0.43	0.48	0.39	0.27	0.32		
	NT	-	-	1609	2310	1255	6385	6920	3807		
HSS-STD	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-FSW	PP	15.60	10.40	8.80	4.40		4.82				
	NT	250	250	250	250		249				
HSS-MSM	PP	-	-	-	-	-	6.00				
	NT	-	-	-	-	-	250				
HSS-IDU	PP	-	-	-	-	-	-				
	NT	-	-	-	-	-	-				
ICTC Male	PP	16.75	20.36	12.97	11.88	7.88	6.85	3.89	4.15		
	NT	603	1228	2954	4640	6621	7199	11097	8630		
ICTC Female	PP	9.81	22.60	13.31	15.57	9.29	6.36	3.18	2.81		
	NT	673	655	1683	2761	4315	6244	9887	10665		
ICTC Referred	PP	9.63	19.38	16.43	12.51	8.06	5.79	2.87	2.34		
	NT	727	614	1327	1934	3661	7250	13514	12602		
Walk-in	PP	17.67	21.99	11.75	13.52	8.63	7.59	4.79	5.42		
	NT	549	1269	3310	5467	7275	6193	7470	6693		
Total tested at ICTCs ⁵	NT	2649	7931	13923	15749	26263	25294	20984	39855		
PLHIV Profile, 2012											
	% On ART		% 15-24 yrs		% Ill., Prim. Edu.		% Married		% Widowed or Divorced		
ART (4417)	50	9		70		66		20			
DLN (NA)	-	-	-	-	-	-	-	-	-	-	-
Route of HIV Transmission, ICTC 2012											
% of Total (N=601)	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown					
	92.68	1.00	0	0	6.16	0.17					
Block-Level Details											
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-	-

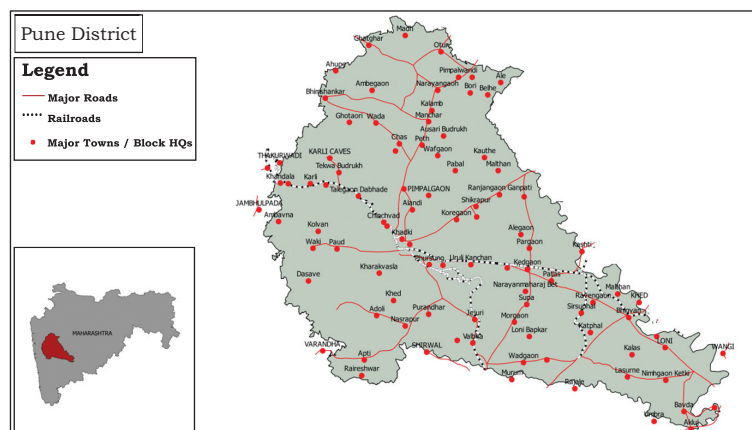
* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

		Vulnerabilities					Male Migration, 2001 Census				
		HRG Size			Program Coverage		Top 5 districts for inter-state out-migration				
		FSW	MSM	IDU			Overall	Inter-State	Intra-state	Intra-district	
Size Est. (Mapping, Year: 2008)		1749	395	-			85923	1776	48564	35583	
% Total HRG		81.58	18.42	-			% of male pop.	11.28	0.23	6.37	4.67
% Total Pop.		0.10	0.02	-			% total migration	100	2.07	56.52	41.41
Program Target		NA	NA	NA							
Typology		Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Pantli - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA			Bagalkot, Karnataka	Belgaum, Karnataka	Surat, Gujarat	Valsad, Gujarat	-
% <25 yrs.		-	-	-							
% Married		-	-	-							
		STI/RTI									
No. episodes treated		4381	11475	15220	18067						
% Syphilis positivity		0	0	0	0						
Programme Response											
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012		
FSW TIs	1	1	1	1	1	3	3	3	3		
MSM TIs	-	-	-	-	-	1	1	1	1		
IDU TIs	-	-	-	-	-	-	-	-	-		
Comp. TIs	-	-	-	-	-	5	5	5	5		
ICTCs	2	2	10	10	10	10	10	42	39		
Blood Banks	1	1	1	1	1	1	1	1	1		
STI clinics	1	1	1	1	1	1	1	1	1		
ART centres	-	-	-	-	-	1	1	1	1		
Link ART centres	-	-	-	-	-	4	4	4	4		
PLHIV Networks	-	1	1	1	1	1	1	1	1		
Red Ribbon Clubs	-	-	-	-	-	9	9	9	9		
Comm. care centres	-	-	-	-	-	1	1	1	1		
Drop-in-centres	-	-	-	-	-	-	-	1	1		
Condom outlets	-	-	-	-	-	-	-	-	-		

Pune

Background:

Pune is in the western region in Maharashtra in India. It is bordered by Thane to the northwest, Raigad to the west, Satara to the south, Solapur to the southeast, and Ahmednagar to the north and northeast. It has a population of 94.26 lakh, out of which 60.99% lives in urban region and a sex ratio of 910 females per 1,000 males, and a female literacy rate of 81.13% with an overall literacy rate of 87.19% (Census 2011). It is an industrial center, but its economy is also agriculture based. Pune has a lot of hill stations for tourist attraction. It is well connected via roads and railways, and National Highway 4, 9 and 50 connects it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, the HIV prevalence was moderate (0.67%) among the ANC attendees, with an increasing trend.
- Based on 2012 PPTCT and Blood Bank data, the HIV positivity rate was low for PPTCT (0.38%) and Blood bank (0.25%) attendees. HIV positivity rate showed an overall a stable trend for PPTCT attendees, blood bank attendees.
- As per 2010 HSS data, the HIV prevalence was moderate among the FSWs (8.20%) but showed sharp decline in 2010.
- According to 2012 ICTC data, HIV positivity was low among male (4.63%) and among female (4.46%) attendees. It was low among referred (3.91%) attendees and moderate among direct walk-ins (5.63%). HIV positivity rates showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, MSM (14,011; 54.91% of total HRG) was the largest HRG in the district followed by FSW (11,354; 44.50% of total HRG) and IDU (150; 0.59% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 19,364 and the syphilis positivity rate among STI clinic attendees was 0.10%.
- As per 2001 Census, 9.26% of the males were migrants, among them, 5.33% migrated to other states and 27.68% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Bangalore in Karnataka and Surat in Gujarat.
- As per 2012 ICTC data, HIV transmission accounted for unknown route of HIV transmission was high at 14.85% and then parent to child HIV transmission accounted for at 5.38%, of all the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 89.6% and 36.5%, respectively.
- In 2012, ten TIs were functional for FSW, MSM and IDUs in the district.
- A total of 109 ICTCs were operational in the district, which tested a total of 1,69,458 attendees for HIV in the year 2012.

Key Recommendations:

- Conduct disaggregated analysis of ICTC, PPTCT data especially age, gender and geographic distribution to get better assessment and spread of risk factors in the district.
- Carry out differential analysis of PLHA to triangulate with current evidence and suggest appropriate recommendations.
- Ensure quality of services provided to HRGs with respect to effective coverage, preventive and referral services, considering their large numbers in the district and high HIV prevalence.
- Conduct site wise and, socio-demographic analysis of ANC-HSS sites to ascertain more risk factors.
- Improve counseling at ICTCs, since the rate of unknown routes for HIV transmission was high in the district.
- It is necessary to strengthen PPTCT program coverage in the district as parent to child HIV transmission was high.
- Strengthen outreach programme through awareness campaigns for migrants with HRB around source, destination points like railway stations, industrial, construction sites bus stands etc.

Pune

District Population: 94,26,959 (8.39% of Maharashtra Population); Female Literacy¹: 81.13%; ANC Utilization²: 89%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	1.88	0.50	0.25	0.26		0.58		0.67
	NT ⁴	800	800	800	775	1200	1200		1200
PPTCT	PP	0.66	0.84	0.69	0.63	0.64	1.33		0.38
	NT	5156	17295	25626	47550	49113	45012		60264
Blood Bank	PP	-	-	0.45	0.30	0.37	0.33	0.26	0.25
	NT	-	-	89639	116981	105993	122937	100539	23016
HSS-STD	PP	17.20	-	32.20	-	-	-	-	-
	NT	250	-	205	-	-	-	-	-
HSS-FSW	PP	43.15	50.00	59.20	41.20		8.20		-
	NT	248	250	250	250	500	500		-
HSS-MSM	PP	14.80	23.60	15.20	12.80		3.60		-
	NT	250	250	250	250	250	250		-
HSS-IDU	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
ICTC Male	PP	18.37	13.60	8.94	7.42	8.78	5.70	4.45	4.63
	NT	4584	8528	18503	34806	31251	44090	61473	59361
ICTC Female	PP	19.24	15.13	7.70	8.33	10.51	6.90	5.46	4.46
	NT	2588	4938	12826	23854	20127	31285	43001	49833
ICTC Referred	PP	14.73	13.26	10.79	8.40	8.47	5.38	4.14	3.91
	NT	3869	6960	14553	28404	27466	43903	67456	68423
ICTC Direct	PP	23.31	15.12	6.40	7.22	10.60	7.33	6.18	5.63
	NT	3303	6506	16776	30256	23912	31472	37018	40771
Total tested at ICTCs ⁵	PP	12328	30761	56955	106210	110531	120387	104474	169458
	NT	-	-	-	-	-	-	-	-
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced				
ART (41166)	37	8	75	53	21				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=4067)	77.82	0.64	1.08	0.22	5.38	14.85			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

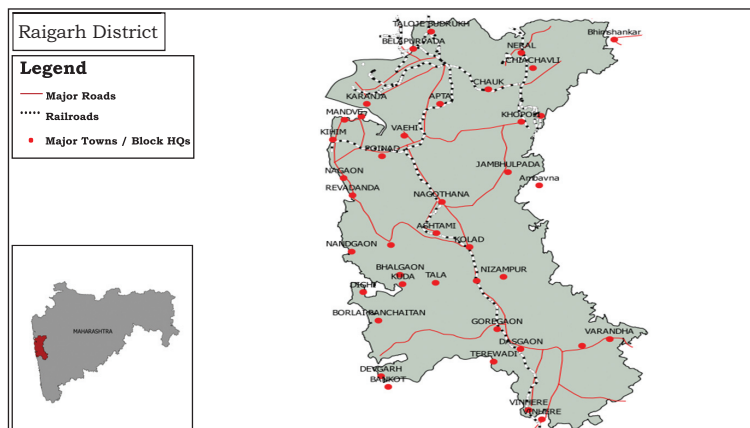
Vulnerabilities									
	HRG Size			Male Migration, 2001 Census					
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	11354	14011	150						
% Total HRG	44.50	54.91	0.59						
% Total Pop.	0.12	0.15	0						
Program Target	NA	NA	NA						
Program Coverage	-	-	-						
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA		Bangalore, Karnataka	Surat, Gujarat	South West Delhi, Delhi	Belgaum, Karnataka	Valsad, Gujarat
% <25 yrs	-	-	-						
% Married	-	-	-						
	STI/RTI								
No. episodes treated	2009	2010	2011	2012					
% Syphilis positivity	3412	18515	16195	19364					
	0	2.71	0.25	0.10					
Programme Response									
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012
FSW TIs	4	4	5	5	5	5	-	-	5
MSM TIs	-	-	1	1	1	1	-	-	4
IDU TIs	-	-	-	-	-	1	1	1	1
Comp. TIs	-	-	-	-	-	-	-	-	-
ICTCs	15	15	44	44	49	50	78	93	109
Blood Banks	-	-	6	6	6	6	5	5	5
STI clinics	-	-	-	-	3	3	3	3	3
ART centres	-	1	1	1	2	3	4	4	4
Link ART centres	-	-	-	-	1	3	5	9	13
PLHIV Networks	-	-	-	1	1	1	1	1	1
Red Ribbon Clubs	-	-	-	-	-	-	-	70	70
Comm. care centres	-	-	-	-	4	4	3	3	2
Drop-in-centres	-	-	-	-	1	1	1	1	1
Condom outlets	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Raigarh

Background:

Raigarh, located in the Konkan region, was renamed after Raigad fort, which was the former capital of the Maratha leader Shivaji Maharaj, and is located in the interior regions of the district. The district is bordered by Mumbai Harbour to the northwest, Thane to the north, Pune to the east, Ratnagiri to the south, and the Arabian Sea to the west. It has a population of 26.35 lakh, a sex ratio of 955 females per 1,000 males, and a female literacy rate of 76.79% with an overall literacy rate of 83.89% (Census 2011). The district is connected to Mumbai by Sion Panvel Expressway. The Mumbai-Pune expressway and NH4 passes through Panvel. NH 17, which starts at Panvel, traverses the whole district.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low among the ANC attendees with an overall declining trend.
- Based on 2012 PPTCT and Blood Bank data, HIV positivity was low for PPTCT attendees (0.18%) and Blood donors (0.18%). HIV positivity levels showed a decreasing trend for PPTCT attendees, while a stable trend was observed for Blood bank attendees.
- According to 2012 ICTC data, HIV positivity was low among male (2.05%) and female (1.75%) attendees, as well as among referred (1.42%) and direct walk-in (2.62%) attendees. HIV positivity levels showed an overall decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1011; 93.18% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated among clinic attendees was 7,711 and the syphilis positivity was 0.12%.
- As per 2001 Census, 12% of the total males were migrants. Among the migrated males 2.63% migrated to other states and 38.60% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat in Gujarat and Vishakapatnam in Andhra Pradesh.
- As per ICTC 2012 data, parent to child HIV transmission accounted for 5.66% of all HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 69.1% and 34.8%, respectively.
- In 2012, two TI sites were operational in the district, and both were for FSWs.

Key Recommendations:

- Continue of HIV prevention strategies to maintain HIV prevalence at low levels in the district.
- Strengthen PPTCT program coverage in the district as parent to child HIV transmission was high.
- When the IBBS data will be available, analyze on FSW, MSM and other groups in the districts to improve the understanding of vulnerabilities. Focus on getting a clearer picture on the size and profile of clients of FSWs, such as migrants and truckers, as FSW was the largest HRG in the district.
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.
- Expand coverage of HIV counseling and testing in the district to detect HIV positive cases at an early stage, since the percentage of PLHIV on ART was high (94%).

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴ 0.88 NT ⁴ 800	0.87 801	0.25 800	0.26 776		0.38 800		0	
PPTCT	PP 1.46 NT 3767	0.86 5242	0.53 12005	0.34 15140		-		0.18 19544	
Blood Bank	PP - NT -	-	*	0.25 4255	0.02 4570	0.05 4390	0.12 3251	0.18 6642	
HSS-STD	PP - NT -	-	-	-	-	-	-	-	
HSS-FSW	PP 16.40 NT 250	-	-	2.80 250		2.00 250		-	
HSS-MSM	PP - NT -	-	-	-	-	-	-	-	
HSS-IDU	PP - NT -	-	-	-	-	-	-	-	
ICTC Male	PP 21.64 NT 573	10.76 2342	6.24 6426	4.27 8882	3.89 10934	0.24 5769	2.46 14252	2.05 19863	
ICTC Female	PP 24.17 NT 331	14.16 1144	9.91 2635	5.12 7067	3.84 9623	0.24 2968	2.30 11181	1.75 15742	
ICTC Referred	PP 17.70 NT 226	13.76 756	10.89 2993	5.50 7328	4.30 10301	0.07 5393	1.87 16660	1.42 20748	
ICTC Direct	PP 24.19 NT 678	11.36 2730	5.54 6068	3.92 8621	3.43 10256	0.51 3344	3.37 8773	2.62 14857	
Walk-in	NT -	2730	6068	8621	10256	3344	8773	14857	
Total tested at ICTCs ⁵	NT 4671	8728	21066	31089	5562	8737	25433	55149	
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced				
ART (176)	94	5	88	62	23				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=548)	92.34	0	0	0.18	5.66	1.82			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

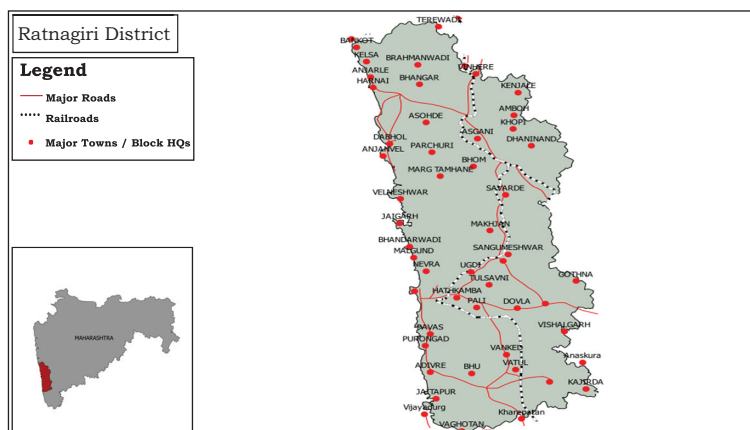
Vulnerabilities										
	HRG Size				Male Migration, 2001 Census					
	FSW	MSM	IDU		Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	1011	62	12		No. out-migration	134030	3523	51740	78767	
% Total HRG	93.18	5.71	1.11		% of male pop.	12.00	0.32	4.63	7.05	
% Total Pop.	0.04	0	0		% total migration	100	2.63	38.60	58.77	
Program Target	NA	NA	NA		Top 5 districts for inter-state out-migration					
Program Coverage	Home based - NA;	Kothi - NA;	Daily Injectors- NA;		Surat, Gujarat	Visakhapatnam, Andhra Pradesh	Vadodara, Gujarat	Valsad, Gujarat	Daman, Diu	
Typology	Brothel based- NA;	Pantri - NA;	Non daily Injectors- NA							
% <25 yrs	-	-	-							
% Married	-	-	-							
	STI/RTI									
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	-	7990	10323	7711						
	-	0	0	0.12						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	1	1	1	2	2	2	2	
MSM TIs	-	-	-	-	-	-	-	-	-	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	2	2	2	19	19	30	38	37	44	
Blood Banks	1	1	1	1	1	1	3	3	3	
STI clinics	1	1	1	1	1	1	1	1	1	
ART centres	-	-	-	-	-	1	1	1	2	
Link ART centres	-	-	-	-	-	-	-	-	-	
PLHIV Networks	-	-	-	-	-	-	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	3	3	3	
Comm. care centres	-	-	-	-	1	1	1	1	1	
Drop-in-centres	-	-	-	-	-	1	1	1	1	
Condom outlets	-	-	36	36	72	72	304	304	304	

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Ratnagiri

Background:

Ratnagiri district is one of the six districts of the Konkan region of Maharashtra, bordered by Arabian Sea to the west, Sindhudurg to the south, Raigad to the north and Satara, Sangli and Kolhapur to the east. It has a population of 16.12 lakh, a sex ratio of 1,123 females per 1,000 males, and a female literacy rate of 74.55% with an overall literacy rate of 82.43% (Census 2011). Rice and coconut are the main crops produced in Ratnagiri. The district is well connected via roads and railways, and National Highway 17 and 204 connects it to the rest of the districts with in the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.50%) among the ANC attendees, with a fluctuating trend.
- Based on the 2012 PPTCT and Blood Bank data, the level of HIV positivity was low for PPTCT attendees (0.21%) and Blood donors (0.13%). HIV positivity levels showed a for both the attendees.
- According to 2012 ICTC data, HIV prevalence was low among male (1.85%) and female (1.44%) attendees. It was also low among referred (1.07%) attendees and direct walk-ins (2.90%). A decreasing trend was observed for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (186; 86.92% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 2,456 and the syphilis positivity rate among STI clinic attendees was 0.28%.
- As per 2001 Census, 18.57% of the males were migrants. Among the migrated males, 1.90% migrated to other states and 55.48% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Surat and Walsad in Gujarat.
- As per 2012 ICTC data, parent to child HIV transmission accounted for 5.82%, of the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 69.5% and 27.3%, respectively.
- As per 2012 data, there were 21 ICTCs in the district, and a total of 42,862 attendees tested for HIV.

Key Recommendations:

- Although there was a low level of HIV epidemic in the district, vulnerability factors in transmission of HIV needs to be analysed from ICTC and STI data.
- When the IBBS data will be available, analyze on FSW and other groups in the district to improve the understanding of the vulnerabilities.
- Strengthen outreach activities with STI/RTI prevention messages for migrants at source and destination sites considering high rate of migration.
- Strengthen PPTCT program in the district, since the HIV transmission from parent to child was high.
- Generate information on typology of HRG population to better understand district epidemiological profile. Increase STI-RTI awareness among women.

Ratnagiri

District Population: 16,12,672 (1.43% of Maharashtra Population); Female Literacy¹: 74.55%; ANC Utilization²: 83.3%

		HIV Levels and Trends ³									
		2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	1.00	0.25	0.25	0.40		0.25		0.50		
	NT ⁴	800	800	800	756		790		800		
PPTCT	PP	0.42	0.80	0.45	0.39	0.29	0.17		0.21		
	NT	2152	4395	8487	7715	11035	10383		15920		
Blood Bank	PP	-	-	0.13	0.11	0.06	0.16	0.14	0.13		
	NT	-	-	2946	4374	4745	4884	3601	2380		
HSS-STD	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-FSW	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-MSM	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-IDU	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
ICTC Male	PP	15.83	11.45	7.63	6.93	3.64	3.17	2.11	1.85		
	NT	600	1729	4918	5890	7996	9244	12519	12872		
ICTC Female	PP	19.14	18.91	11.75	9.01	3.37	2.57	1.77	1.44		
	NT	350	661	2451	3907	6523	8899	12761	14070		
ICTC Referred	PP	23.42	15.43	12.11	10.80	4.66	2.66	1.45	1.07		
	NT	269	901	3105	4343	6637	10920	16471	18643		
ICTC Direct	PP	14.54	12.36	6.75	5.34	2.56	3.20	2.85	2.90		
	NT	681	1489	4268	5454	7882	7223	8809	8299		
Total tested at ICTCs ⁵	PP	3102	6785	15856	17765	28522	28526	25280	42862		
	NT	-	-	-	-	-	-	-	-		
PLHIV Profile, 2012											
		% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced					
ART (3688)		49	6	83	56	25					
DLN (NA)		-	-	-	-	-					
Route of HIV Transmission, ICTC 2012											
		Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=601)		90.52	0.00	0.17	0.17	5.82	3.33				
Block-Level Details											
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

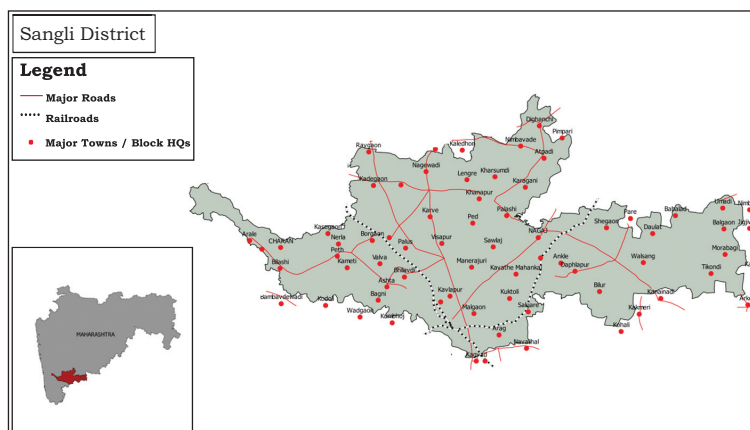
		HRG Size				Vulnerabilities						
		FSW	MSM	IDU	Male Migration, 2001 Census							
		Size Est. (Mapping, Year: 2008)	186	28	-	Overall	Inter-State	Intra-state	Intra-district			
% Total HRG		86.92	13.08	-								
% Total Pop.		0.01	0	-								
Program Target		NA	NA	NA								
Program Coverage		-	-	-								
Typology		Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Panthi - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Surat, Gujarat	Valsad, Gujarat	Daman, Daman & Diu	North Goa, Goa	South Goa, Goa			
% <25 yrs		-	-	-								
% Married		-	-	-								
		STI/RTI										
		2009	2010	2011	2012							
No. episodes treated		248	1527	1908	2456							
% Syphilis positivity		0	0	0.69	0.28							
Programme Response												
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012			
FSW TIs	-	-	-	-	-	-	-	-	-			
MSM TIs	-	-	-	-	-	-	-	-	-			
IDU TIs	-	-	-	-	-	-	-	-	-			
Comp. TIs	-	-	-	-	-	-	-	-	-			
ICTCs	3	3	11	14	14	15	48	48	21			
Blood Banks	2	2	2	2	2	2	2	2	2			
STI clinics	-	-	-	-	-	-	-	-	-			
ART centres	-	-	-	-	-	-	-	-	-			
Link ART centres	-	-	-	-	-	-	-	3	4			
PLHIV Networks	-	-	-	-	-	-	-	1	1			
Red Ribbon Clubs	-	-	-	-	-	-	-	-	21			
Comm. care centres	-	-	-	-	-	1	1	1	1			
Drop-in-centres	-	-	-	-	-	-	-	1	1			
Condom outlets	-	-	-	-	-	-	1	1	1			

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Sangli

Background:

Sangli district is located in the western part of Maharashtra. It is bound by Satara and Solapur districts to the north, Bijapur district, Karnataka to the east, Kolhapur district and Belgaum, Karnataka districts to the south, and Ratnagiri district to the west. It has a population of 28.20 lakh, a sex ratio of 964 females per 1,000 males; female literacy rate of 74.66% and an overall literacy rate of 82.62% (Census 2011). Agriculture is the chief source of income in the district. Groundnut, jowar, sugarcane, soyabean and turmeric are the major food crops produced in Sangli. There are numerous places of interests in Sangli. Sangli district is well-connected by an extensive rail network with the major cities and towns. National Highway, NH-4, passes through the district.



HIV Epidemic Profile:

- Based on 2012 HSS-ANC, HIV positivity was low at 0.38% among the ANC attendees, with a decreasing trend.
- According to 2012 PPTCT data, the level of HIV positivity was low (0.38%) among the PPTCT attendees, with a decreasing trend.
- According to 2012 Blood Bank data, the level of HIV positivity was low (0.27%) among the Blood Bank attendees, with a decreasing trend.
- In 2012, HIV prevalence among ICTC attendees was near-moderate among male (4.91%) and moderate among female (6.03%) attendees. HIV prevalence was low among referred (3.81%) attendees but moderate among direct walk-in (9%) attendees. An overall declining trend was observed among all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (3,793; 78.86% of the total HRG) was the largest HRG in the district followed by MSM (1,017; 21.14% of the total HRG).
- In 2012, 23,369 STI/RTI episodes were treated and the syphilis positivity rate among STI clinic attendees was 0.29%.
- As per the 2001 Census, 12.39% of the male population were migrants; among them 7.92% migrated to other states and 38.88% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Belgaum and Bijapur, Karnataka.
- In 2012, of the 19,144 PLHIV registered at the Anti-Retroviral Therapy (ART) center, 32% were on ART, 4% were 15-24 years of age, 54% were illiterate or only had a primary school education, 34% were married.
- According to DLHS-III data, the HIV awareness rate and STI/RTI awareness rate among women was 85.1% and 34.1%, respectively.
- In 2012, two FSW TI and one MSMTI were operational in the district.

Key Recommendations:

- There is a need for an increase in the number of targeted interventions (TI) sites in the district, the current number of TI sites is not enough to deal with the large number of HRGs in the area.
- HIV Positivity at ICTC suggests continuing transmission among the attendees along with risky behavior. So there is a need to establish a mechanism to understand the dynamics of HIV transmission among HRG and migrant population.
- Since the only HRG was FSW, better assessment of the size and profile of client population including migrants and truckers, will help in better understanding of district vulnerabilities.
- Considering high rate of migration to high HIV prevalent districts, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	2.75	2.00	2.25	1.46		0.63		0.38	
	NT ⁴	800	800	800	754		798		795	
PPTCT	PP	4.40	2.35	1.35	1.11	0.76	0.75		0.38	
	NT	1319	7835	12386	13158	18672	20108		19372	
Blood Bank	PP	-	-	0.62	0.57	0.54	0.43	0.31	0.27	
	NT	-	-	26388	33322	29934	26284	20908	3334	
HSS-STD	PP	25.20	28.40	30.00	14.05					
	NT	250	250	250	242					
HSS-FSW	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	25.54	31.41	24.37	15.05	10.69	8.49	6.57	4.91	
	NT	1253	3613	8567	11851	12428	16798	18979	21408	
ICTC Female	PP	12.55	38.91	23.31	16.00	11.23	8.47	8.04	6.03	
	NT	1602	2886	6323	8130	9929	14651	14159	17142	
ICTC Referred	PP	13.76	30.03	24.35	12.52	8.97	6.30	5.30	3.81	
	NT	1591	3616	6763	9640	12014	20069	22477	26644	
Walk-in	PP	23.89	40.65	23.56	18.15	13.21	12.32	11.20	9.00	
	NT	1264	2883	8127	10341	10343	11380	10661	11906	
Total tested at ICTCs ⁵	NT	4174	14334	27276	33139	46609	51557	33138	57872	

PLHIV Profile, 2012						
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced	
ART (19144)	32	4	54	34	19	
DLN (NA)	-	-	-	-	-	

Route of HIV Transmission, ICTC 2012						
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown
% of Total (N=2347)	91.10	0.13	0.17	0.04	4.69	3.88

Block-Level Details						
No. HRG-FSW	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

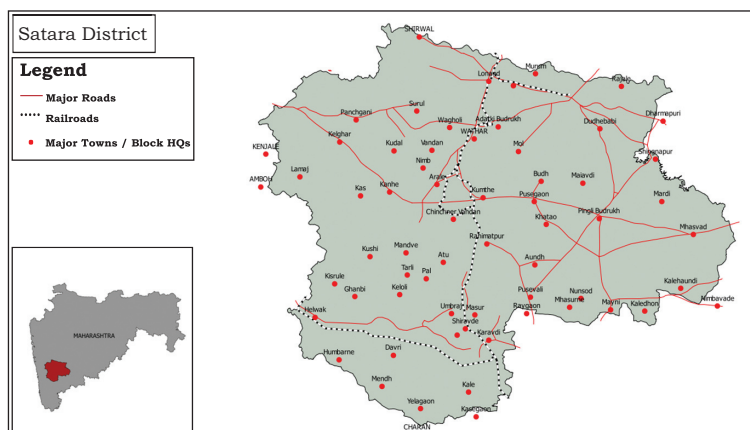
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	3793	1017	-	163397	12940	63529	86928			
% Total HRG	78.86	21.14	-	12.39	0.98	4.82	6.59			
% Total Pop.	0.13	0.04	-	100	7.92	38.88	53.20			
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Pantli - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Belgaum, Karnataka	Biapur, Karnataka	Bagalkot, Karnataka	South Goa, Goa	North Goa, Goa		
% <25 yrs	-	-	-							
% Married	-	-	-							
STI/RTI										
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	412	14723	12192	23369						
	0	1.75	1.53	0.29						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	2	2	2	2	2	2	2	2
MSM TIs	-	-	1	1	1	1	1	1	1	1
IDU TIs	-	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-	-
ICTCs	4	7	8	20	20	20	43	59	62	
Blood Banks	11	11	11	11	11	11	11	11	11	
STI clinics	-	-	-	-	-	2	2	2	2	
ART centres	1	1	1	1	1	1	2	2	2	
Link ART centres	-	-	-	-	-	4	4	6	6	
PLHIV Networks	1	1	1	1	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-	
Comm. care centres	-	-	-	-	2	2	2	1	1	
Drop-in-centres	1	1	1	1	1	1	1	1	1	
Condom outlets	-	-	-	-	30	30	55	55	55	

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Satara

Background:

Satara comes under Pune administrative division along with Pune, Sangli, Solapur and Kolhapur. Pune borders it to the north, Raigad to the North-West, Solapur to the east, Sangli to the south, and Ratnagiri to the west. It has a population of 30.03 lakh, a sex ratio of 986 females per 1,000 males, and a female literacy rate of 76.29% with an overall literacy rate of 84.2% (Census 2011). Satara district is predominantly agricultural. It is well connected via roads and railways, and National Highway 4, 47 and 80 connects it to the rest of the districts with in the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a stable trend in the last three recordings.
- Based on 2012 PPTCT and blood bank data, the level of HIV positivity was low for PPTCT (0.20%) and low among blood donors (0.24%). HIV positivity levels showed a decreasing trend both PPTCT and blood bank.
- According to 2012 ICTC data, HIV prevalence was moderate among male (6.71%) and female (6%) attendees. It was moderate among referred (7.54%) while low in direct walk-ins (3.56%). HIV positivity levels showed stable to decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,380; 79.77% of total HRG) was the largest HRG in the district followed by MSM (350; 20.23% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 7,923 and the syphilis positivity rate among STI clinic attendees was 0.12%.
- As per 2001 Census, 17.59% of the total males were migrants. Among the migrated males, 1.59% migrated to other states and 44.35% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Belgaum in Karnataka and Valsad in Gujarat.
- According to the 2012 ICTC data, parent to child HIV transmission accounted for 5.73% of the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 81% and 38.5%, respectively.
- In 2012, a total of 52,032 attendees were tested for HIV at the 95 ICTCs in the district.

Key Recommendations:

- Strengthen targeted interventions sites in the district to provide the referral and preventive services to HRGs in the area.
- Continue of HIV prevention strategies to maintain HIV prevalence at low levels.
- Focus on getting a clearer picture on the size and profile of clients of FSWs, such as migrants and truckers, as FSW was the largest HRG in the district.
- The parent to child HIV transmission rate was high, thus there is a need to strengthen the PPTCT program in the district.
- Strengthen outreach programmes through awareness campaigns for HRGs; also around truck halting points and highways in the district.
- Generate information on typology of HRG population to better understand district epidemiological profile.

Satara

District Population: 30,03,922 (2.67% of Maharashtra Population); Female Literacy¹: 76.29%; ANC Utilization²: 92.6%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	1.88	1.50	1.63	0.14		0.13		0.25	
	NT ⁴	800	800	800	740		799		799	
PPTCT	PP	2.25	1.34	0.95	0.49	0.43	0.51		0.20	
	NT	2794	7075	13874	17937	18953	19676		20010	
Blood Bank	PP	-	-	0.51	0.39	0.55	0.66	0.36	0.24	
	NT	-	-	15059	15170	19185	19044	14866	18271	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	19.76	12.15	11.29	7.38	6.17	5.14	4.48	6.71	
	NT	1316	2189	7315	15861	12960	16213	17853	17153	
ICTC Female	PP	16.82	15.03	12.96	11.17	9.33	6.34	4.99	6.00	
	NT	1213	1517	4366	9843	8018	10951	14533	14869	
ICTC Referred	PP	15.89	14.74	17.43	11.17	9.37	6.97	5.69	7.54	
	NT	1391	1642	4091	11458	11185	14630	19051	22697	
ICTC Direct	PP	21.35	12.21	8.95	6.95	5.11	4.06	3.31	3.56	
	NT	1138	2064	7590	14296	9793	12534	13335	9325	
Walk-in	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
Total tested at ICTCs ⁵	PP	5323	10781	25555	43641	43173	46840	32386	52032	
	NT	-	-	-	-	-	-	-	-	
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (10325)	49	7	65	42	21					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=2095)	91.36	1.53	0.33	0.29	5.73	0.76				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

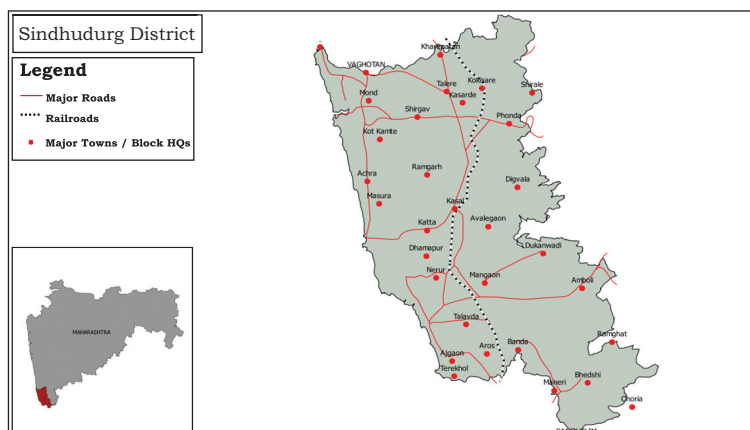
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	1380	350	-	246610	3926	109361	133323			
% Total HRG	79.77	20.23	-	17.59	0.28	7.80	9.51			
% Total Pop.	0.05	0.01	-	100	1.59	44.35	54.06			
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	-	-	-							
Typology	Home based - NA;	Kothi - NA;	Daily Injectors- NA;	Belgaum, Karnataka	Valsad, Gujarat	Daman, Daman & Diu	Surat, Gujarat	Ah-madabad, Gujarat		
	Street based - NA	Double decker- NA	Non daily Injectors- NA							
% <25 yrs	-	-	-							
% Married	-	-	-							
	STI/RTI									
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	8405	3490	3077	7923						
	0	0.36	0.22	0.12						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	-	-	-	-	-	-	-	-
MSM TIs	-	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	1	1	1	1	1	1	1	1
ICTCs	3	3	22	22	24	25	30	78	95	
Blood Banks	7	7	7	7	7	7	7	6	7	
STI clinics	1	1	1	1	1	1	1	1	1	
ART centres	-	-	-	-	-	-	-	-	-	
Link ART centres	-	-	-	-	-	-	-	-	-	
PLHIV Networks	1	1	1	1	1	1	1	2	2	
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-	
Comm. care centres	1	1	1	1	1	1	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	-	-	
Condom outlets	-	-	-	-	-	-	-	254	259	

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Sindhudurg

Background:

Sindhudurg is an administrative district in the state of Maharashtra, which was carved out of the erstwhile Ratnagiri district. The district is surrounded by Ratnagiri in the north, Goa in the south, Kolhapur in the east and the Arabian Sea in the west. It has a population of 8.48 lakh, a sex ratio of 1,037 females per 1,000 males, and a female literacy rate of 79.73% with an overall literacy rate of 86.54% (Census 2011). The economy of the district depends upon agriculture. Apart from access by airways, Sindhudurg district is also well-connected to the major towns and cities like Mumbai and Goa by road and rail. There are 7 railway stations in the district and the famous Konkan Railway passes through Sindhudurg. National Highway, NH-17 also passes through the district.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.63%) among the ANC attendees, with a flat trend at low levels till 2010, but a rise was observed in 2012.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was low among ANC attendees (0.33%) and Blood donors (0.13%). HIV positivity levels showed a fluctuating trend for PPTCT, while a stable trend was observed among blood bank attendees.
- According to 2012 ICTC data, HIV prevalence was low among male (0.93%) and female (1.36%) attendees. It was also low among referred (1.24%) and direct walk-in (0.89%) attendees. A decreasing trend was observed for all the ICTC attendees.
- According to 2008 HRG size mapping data, there were 218 FSWs in the district.
- In 2012, the number of STI/RTI episodes treated was 2,411.
- As per 2001 Census, 16.69% of the total males were migrants. Among the migrated males, 4.59% migrated to other states and 51.99% migrated to other districts within the state.
- The top three destinations for out-of-state migration were North Goa, South Goa and Belgaum in Karnataka.
- As per 2012 ICTC data, parent to child HIV transmission accounted for 9.09%, of all the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 73.9% and 40%, respectively.
- In 2012, a total of two TI sites were operational in the district.
- A total of 24 ICTCs were functional in the district, which tested a total of 40,898 attendees for HIV in the year 2012.

Key Recommendations:

- Though HIV prevalence has declined among ICTC attendees, district needs continued attention to decrease and limit the spread of the infection further.
- The parent to child HIV transmission rate was high; therefore PPTCT program has to be strengthened.
- Conduct disaggregated analysis of PPTCT data to assess risk factors in the district.
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.
- Generate information on typology of HRG population to better understand district epidemiological profile.
- Availability of ART or DLN data will help in understanding the district vulnerabilities.

Sindhudurg

District Population: 8,48,868 (0.75% of Maharashtra Population); Female Literacy¹: 79.73%; ANC Utilization²: 92.3%

		HIV Levels and Trends ³									
		2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	0.25	0.13	0.13	0.13		0.13		0.63		
	NT ⁴	800	800	800	784		799		800		
PPTCT	PP	*	0.33	0.20	0.16	0.27	0.93		0.33		
	NT	*	3057	6884	7908	8603	7213		10367		
Blood Bank	PP	-	-	0.34	0.00	0.02	0.04	0.09	0.13		
	NT	-	-	2303	1816	4706	2659	4231	5335		
HSS-STD	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-FSW	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-MSM	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
HSS-IDU	PP	-	-	-	-	-	-	-	-		
	NT	-	-	-	-	-	-	-	-		
ICTC Male	PP	*	5.95	3.59	2.29	1.49	1.07	0.97	0.93		
	NT	*	1009	3849	5645	5910	5970	8561	20415		
ICTC Female	PP	*	17.92	8.35	5.72	2.40	2.03	1.65	1.36		
	NT	*	240	1245	1817	2421	2813	3627	10116		
ICTC Referred	PP	*	15.79	6.15	3.48	2.05	2.06	1.23	1.24		
	NT	*	247	1545	2271	2726	3293	5514	16418		
ICTC Direct	PP	*	6.39	4.23	2.97	1.61	0.97	1.12	0.89		
	NT	*	1002	3549	5191	5605	5490	6674	14113		
Total tested at ICTCs ⁵	PP	*	4306	11978	15178	18713	15996	12188	40898		
	NT	*	846	4306	11978	15178	18713	15996	12188	40898	
PLHIV Profile, 2012											
	% On ART		% 15-24 yrs		% Ill., Prim. Edu.		% Married		% Widowed or Divorced		
ART (NA)	-	-	-	-	-	-	-	-	-	-	-
DLN (NA)	-	-	-	-	-	-	-	-	-	-	-
Route of HIV Transmission, ICTC 2012											
	Hetero-sexual		Homo-sexual		Blood Transfusion		Needle/ Syringe		Parent to Child		Unknown
% of Total (N=231)	88.74		0.87		0.43		0		9.09		0.87
Block-Level Details											
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-	-

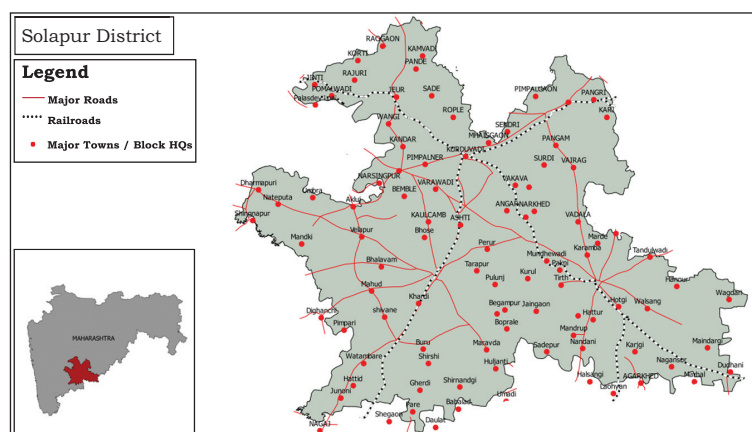
* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

		Vulnerabilities					Male Migration, 2001 Census						
		HRG Size		Program Coverage			Overall		Inter-State		Intra-state		Intra-district
		FSW	MSM	IDU	Program Target	Program Coverage							
Size Est. (Mapping, Year: 2008)		218	-	-	NA	NA							
% Total HRG		100	-	-	NA	NA							
% Total Pop.		0.03	-	-	NA	NA							
Top 5 districts for inter-state out-migration													
% out-migration		69248	3177	36000	30071								
% of male pop.		16.69	0.77	8.68	7.25								
% total migration		100	4.59	51.99	43.43								
Typology													
		Home based - NA;	Kothi - NA;	Daily Injectors- NA;	Brothel based- NA;	Pantli - NA;	Non daily Injectors- NA	North Goa	South Goa	Belgaum, Karnataka	Daman, Diu		
% <25 yrs		-	-	-	-	-	-						
% Married		-	-	-	-	-	-						
Programme Response													
		STI/RTI		Programme Response									
No. episodes treated		2009	2010	2011	2012								
% Syphilis positivity		117	1751	2361	2411								
No. FSW TIs		0	0	0	0								
No. MSM TIs		-	-	-	-								
No. IDU TIs		-	-	-	-								
Comp. TIs		-	-	-	-								
ICTCs		1	3	12	12	12	12	21	21	21	21	24	
Blood Banks		-	-	-	-	-	-	0	2	2	2	2	
STI clinics		-	-	-	-	-	-	1	1	1	1	1	
ART centres		-	-	-	-	-	-	-	-	-	-	-	
Link ART centres		-	-	-	-	-	-	1	1	1	1	1	
PLHIV Networks		-	-	1	1	1	1	1	1	1	1	1	
Red Ribbon Clubs		-	-	-	-	-	-	-	-	-	-	-	
Comm. care centres		-	-	-	-	-	-	-	-	-	-	-	
Drop-in-centres		-	-	-	-	-	-	-	-	-	-	-	
Condom outlets		-	-	-	-	-	-	-	-	-	-	-	

Solapur

Background:

Solapur is located on the south east edge of Maharashtra and lies entirely in the Bhima and Seena basins. It is surrounded by Ahmednagar and Osmanabad districts in the north, Osmanabad and Gulbarga districts (Karnataka State) in the east, Sangli and Bijapur districts (Karnataka State) in the south and Pune, and Satara in the west. It has a population of 43.15 lakh, a sex ratio of 932 females per 1,000 males, and a female literacy rate of 68.55% with an overall literacy rate of 77.72% (Census 2011). The district is well connected via roads and railways, and National Highway 9 and 13 connects it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.63%) among the ANC attendees, with a fluctuating trend in the moderate to high positivity bracket.
- Based on 2012 PPTCT and Blood Bank data, HIV positivity was low for PPTCT attendees (0.42%), while moderate among Blood donors (0.51%). HIV positivity levels showed a decreasing trend for PPTCT attendees and a fluctuating trend among blood bank attendees.
- As per 2010 HSS data, HIV positivity was moderate among FSWs (5.20%).
- According to 2012 ICTC data, HIV prevalence was low among male (4.09%) and female (3.78%) attendees. It was low among referred (2.50%) attendees, but moderate among direct walk-ins (6.25%). An overall declining trend was observed among all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (4,167; 79.39% of total HRG) was the largest HRG in the district followed by MSM (1,037; 19.76% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 23,369 and the syphilis positivity rate among STI clinic attendees was 0.29%.
- As per 2001 Census, 12.12% of the total males were migrants. Among the migrated males, 3.43% migrated to other states and 44.28% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Bijapur and Belgaum in Karnataka.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 81.8% and 50.7%, respectively.
- As per 2012 ICTC data, HIV transmission through parent to child route was high at 6.27% in the district.
- In 2012, three TIs for FSWs and one for MSM were functional in the district.
- In 2012, a total of 92 ICTCs were functional in the district, which tested a total of 86,866 attendees for HIV.

Key Recommendations:

- Strengthen targeted intervention sites in the district to provide the referral and preventive services to HRGs in the area.
- Strengthen PPTCT program in the district and analyse disaggregated PPTCT data to understand the profile of ANC attendees.
- Assess the size and profile of FSW's client populations, including migrants and truckers, to improve the understanding of district vulnerabilities, since the largest HRG was FSW and positivity was moderate among them was moderate.
- Increase STI/RTI awareness among women in the district.
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.

Solapur

District Population: 43,15,527 (3.84% of Maharashtra Population); Female Literacy¹: 68.55%; ANC Utilization²: 86.5%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴ 1.75 NT ⁴ 800	1.00 800	1.00 800	1.60 752		1.13 797		0.63 793		
PPTCT	PP 1.05 NT 5040	1.86 8883	0.88 17984	0.72 27871	0.62 27991	0.29 28521		0.42 26734		
Blood Bank	PP - NT -	- -	0.60 52520	0.79 60088	0.47 59796	0.49 65016		0.65 58527	0.51 36581	
HSS-STD	PP - NT -	- -	- -	- -	- -	- -		- -		
HSS-FSW	PP - NT -	- -	- -	6.00 250		5.20 250		- -		
HSS-MSM	PP - NT -	- -	- -	- -		- -		- -		
HSS-IDU	PP - NT -	- -	- -	- -		- -		- -		
ICTC Male	PP 24.34 NT 1060	13.54 2083	22.33 5209	20.69 8189	10.20 13995	6.91 20801		5.39 23592	4.09 31087	
ICTC Female	PP 22.81 NT 846	16.81 1487	17.12 4223	19.61 7515	9.50 13395	6.62 17918		4.56 23805	3.78 29045	
ICTC Referred	PP 20.56 NT 1148	12.32 2337	16.16 4406	15.45 6143	9.39 12284	5.05 20434		3.39 28414	2.50 37018	
ICTC Direct	PP 28.36 NT 758	19.79 1233	23.36 5026	23.21 9561	10.24 15106	8.70 18285		7.35 18983	6.25 23114	
Walk-in	NT -	-	-	-	-	-		-	-	
Total tested at ICTCs ⁵	NT 6946	12453	27416	43575	60647	67240		47397	86866	
PLHIV Profile, 2012										
ART (13874)	% On ART 48	% 15-24 yrs 13	% Ill., Prim. Edu. 59	% Married 39	% Widowed or Divorced 15					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
% of Total (N=2314)	Hetero-sexual 91.40	Homo-sexual 0.61	Blood Transfusion 0.13	Needle/ Syringe 0	Parent to Child 6.27	Unknown 1.60				
Block-Level Details										
No. HRG- FSW	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-
No. HRG- IDU	-	-	-	-	-	-	-	-	-	-
% Pos: ICTC 2009	Aurad 0.29	Balki 0.5	Basavakalyana 0.71	Bidar 0.26	Humnabad 0.41	-	-	-	-	-
% Pos: PPTCT	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

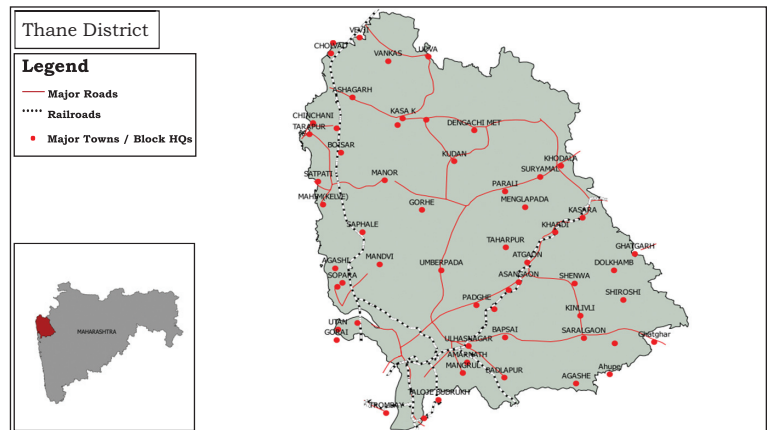
Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	4167	1037	45	241173	8271	106791	126111			
% Total HRG	79.39	19.76	0.86	% of male pop. migration	12.12	0.42	5.36	6.34		
% Total Pop.	0.10	0.02	0	% total migration	100	3.43	44.28	52.29		
Program Target	NA	NA	NA	Top 5 districts for inter-state out-migration						
Program Coverage	Home based - NA;	Kothi - NA;	Daily Injectors- NA;							
Typology	Brothel based- NA;	Pantri - NA;	Non daily Injectors- NA							
	Street based - NA	Double decker- NA								
% <25 yrs	-	-	-							
% Married	-	-	-							
STI/RTI										
No. episodes treated	2009 412	2010 14723	2011 12192	2012 23369						
% Syphilis positivity	0	1.75	1.53	0.29						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	1	1	1	1	1	1	3	
MSM TIs	-	-	-	-	-	-	-	2	1	
IDU TIs	-	-	-	-	-	-	-	-	-	
Comp. TIs	-	-	-	-	-	-	-	-	-	
ICTCs	4	6	21	21	21	21	66	84	92	
Blood Banks	-	-	-	-	-	-	4	4	5	
STI clinics	-	-	-	-	-	1	1	1	1	
ART centres	-	-	-	-	-	1	2	2	2	
Link ART centres	-	-	-	-	-	-	-	4	5	
PLHIV Networks	-	-	-	1	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	28	28	
Comm. care centres	-	-	-	-	-	-	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	1	1	
Condom outlets	-	-	-	-	-	-	-	-	-	

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Thane

Background:

The name 'Thane' is derived from the ancient city 'Shrithanaka' which was ruled by the Shilahara kings. The British took over Thane from the Peshwa in the year 1817 and it became part of north Konkan. The district is bordered by Pune and Ahmadnagar on the east, Nashik on the east and northeast, Valsad district of Gujarat and Union Territory of Dadra and Nagar Haveli on the north. It is bordered by Mumbai City and Mumbai Suburban on the southwest and Raigad on the south. Thane has a population of 1.10 crore, a sex ratio of 880 females per 1,000 males, and a female literacy rate of 80.78% with an overall literacy rate of 86.18% (Census 2011). Majority of the population of the district is engaged in agriculture and allied activities and the district is known as industrial hub where in-migration is substantial. The district is well connected via roads and railways, National Highway 3 and 8 connecting it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.50%) among the ANC attendees, with a fluctuating trend.
- Based on 2012 PPTCT and Blood Bank data, the HIV positivity rate was low for PPTCT (0.23%) and Blood bank (0.36%) attendees. HIV positivity rate showed a decreasing trend for PPTCT but a stable trend was seen in the last three recordings for Blood Bank attendees.
- As per 2010 HSS data, the level of HIV positivity was moderate among FSWs (5.20%) and MSM (5.20%). A decreasing trend was observed for FSWs with sharp decline in 2010. A trend could not be determined for MSM due to lack of data.
- According to 2012 ICTC data, HIV positivity rate was low among male (4.18%) and female (3.87%) attendees, as well as among referred (3.77%) and direct walk-in (4.50%) attendees. HIV positivity rate showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (16,874; 68.27% of total HRG) was the largest HRG in the district followed by MSM (7,441; 30.11% of total HRG) and IDU (400; 1.62% of total HRG).
- In 2012, syphilis positivity rate among STI clinic attendees was 1.56%.
- As per 2001 Census, 5.37% of the males were migrants, among them 5.72% migrated to other states and 15.57% migrated to other districts within the state and 78.71% migrated within the district.
- The top two destinations for out-of-state migration were Valsad in Gujarat and Theni in Tamil Nadu.
- As per 2012 ICTC data, parent to child HIV transmission accounted for 5.66%, of all the HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 71.1% and 17.8%, respectively.
- In 2012, a total of ten TI sites were functional in the district.

Key Recommendations:

- Though HIV prevalence has declined from high to moderate levels among ICTC attendees, district needs continued attention to decrease and limit the spread of the infection further.
- Since the largest HRG was FSW, assessment of the size, typology and profile of client population, including MSMs, migrants and truckers, will help in understanding better district vulnerabilities.
- Carryout disaggregated analysis of HSS-MSM & FSW to further understand the profile of HRGs risk in the district.
- Due to the high rate of parent to child HIV transmissions as well as homosexual route strengthening and ensuring quality of services provided should be ensured.
- Due to large numbers of migrants flowing in, more focused migrant specific interventions including services at source, transit and destination with linking may be useful to track HIV spread.

Thane

District Population: 1,10,54,131 (984% of Maharashtra Population); Female Literacy¹: 80.78%; ANC Utilization²: 84.7%

		HIV Levels and Trends ³									
		2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	1.38	0.88	0.88	0.65		0.38		0.50		
	NT ⁴	800	800	800	774		800		795		
PPTCT	PP	2.14	1.10	0.85	0.70	0.48	0.37		0.23		
	NT	4291	24284	50819	62678	63677	54322		75611		
Blood Bank	PP	-	-	*	0.54	0.34	0.34	0.43	0.36		
	NT	-	-	*	39538	47948	71433	47584	3304		
HSS-STD	PP	8.00	6.00	7.20	11.69		-		-		
	NT	250	250	250	248		-		-		
HSS-FSW	PP	25.20	28.40	32.40	-	-	5.20		-		
	NT	250	250	250	-	-	250		-		
HSS-MSM	PP	-	-	-	-	-	5.20		-		
	NT	-	-	-	-	-	250		-		
HSS-IDU	PP	-	-	-	-	-	-		-		
	NT	-	-	-	-	-	-		-		
ICTC Male	PP	15.46	12.62	7.57	7.88	7.02	4.98	4.35	4.18		
	NT	3369	7808	22199	31392	32390	46914	54617	52127		
ICTC Female	PP	9.02	12.95	8.07	9.69	7.71	4.98	4.90	3.87		
	NT	3692	3714	10621	16361	18838	33307	31237	39666		
ICTC Referred	PP	8.43	10.37	7.95	7.84	7.27	4.94	4.35	3.77		
	NT	4973	6808	17617	24374	30695	43859	54945	56631		
Walk-in	PP	20.83	16.12	7.35	9.19	7.28	5.03	4.90	4.50		
	NT	2088	4714	15205	23379	20533	36362	30909	35162		
Total tested at ICTCs ⁵	NT	11352	35806	83639	110671	132771	134543	85854	167404		
PLHIV Profile, 2012											
	% On ART	45	8		83		56		18		
ART (25413)											
DLN (NA)											
Route of HIV Transmission, ICTC 2012											
	Hetero-sexual	1.34	0.41		0.19		5.66		1.66		
% of Total (N=3198)											
Block-Level Details											
No. HRG-FSW	-	-	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

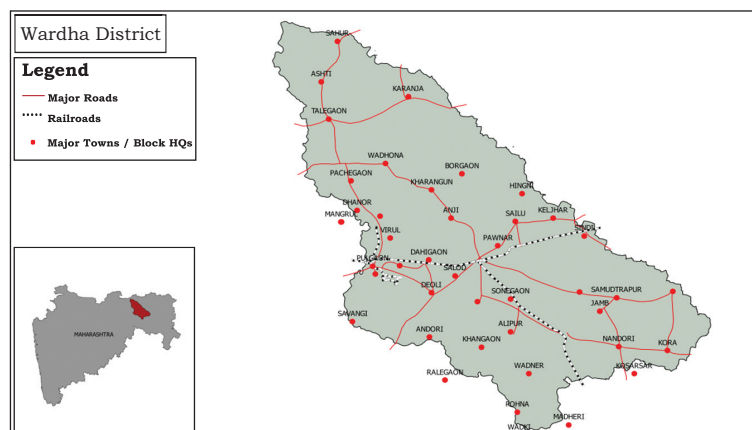
Vulnerabilities												
		HRG Size				Male Migration, 2001 Census						
		FSW	MSM	IDU	Overall		Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)		16874	7441	400	No. out-migration		235199	13454	36614	185131		
% Total HRG		68.27	30.11	1.62	% of male pop.		5.37	0.31	0.84	4.23		
% Total Pop.		0.15	0.07	0.00	% total migration		100	5.72	15.57	78.71		
Program Target		NA	NA	NA	Top 5 districts for inter-state out-migration							
Program Coverage		-	-	-								
Typology		Home based - NA;	Kothi - NA;	Daily Injectors- NA;	Valsad, Gujarat		Theri, Tamil Nadu		Dadra & Nagar Haveli, Dadra & Nagar Haveli		Surat, Gujarat	
		Street based - NA	Double decker- NA	Non daily Injectors- NA							Daman, Daman & Diu	
% <25 yrs.		-	-	-								
% Married		-	-	-								
STI/RTI												
No. episodes treated		2009	2010	2011	2012							
% Syphilis positivity		0	0.06	0.15	1.56							
Programme Response												
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012			
FSW TIs	6	6	6	6	6	6	6	7	7			
MSM TIs	-	-	1	1	1	3	5	4	2			
IDU TIs	-	-	-	-	-	1	1	1	1			
Comp. TIs	-	-	-	-	-	-	-	-	-			
ICTCs	7	9	25	36	36	49	59	83	122			
Blood Banks	-	-	-	-	-	5	5	5	5			
STI clinics	-	-	-	-	-	2	3	3	3			
ART centres	-	-	-	-	1	2	2	3	4			
Link ART centres	-	-	-	-	-	-	6	6	6			
PLHIV Networks	1	1	1	1	1	1	1	1	1			
Red Ribbon Clubs	-	-	-	-	-	-	-	75	86			
Comm. care centres	-	-	-	-	-	-	-	-	1			
Drop-in-centres	1	1	1	1	1	1	1	1	1			
Condom outlets	75	124	170	219	368	527	549	673	590			

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Wardha

Background:

Wardha, a part of Nagpur division, is situated in the north eastern part of Maharashtra. The district is bordered to the north and west by the Amravati and by the Yavatmal to the south. In the east it is bordered by Nagpur and by Chandrapur in the south east. It has a population of 12.96 lakh, a sex ratio of 946 females per 1,000 males, and a female literacy rate of 81.89% and an overall literacy rate of 87.22% (Census 2011). The district has 507 Gram Panchayats, 1,387 villages and 6 Municipal towns. Recently this district has been in news because of a number of suicides that have been committed by the farmers owing to the agricultural loans they could not repay, with the major reasons being bad crops, droughts and lack of irrigation facilities in the region. The district is well connected via roads and railway, National Highway 6 and 7 connecting it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was low (0.25%) among the ANC attendees, with a flat trend, though a rise was observed in 2008.
- Based on 2012 PPTCT and Blood Bank data, the HIV positivity rate was low among PPTCT attendees (0.12%) and Blood donors (0.16%). HIV positivity levels showed a decreasing trend for PPTCT attendees while a fluctuating trend for Blood bank attendees.
- According to 2012 ICTC data, HIV positivity rate was low among male (1.59%) and female (1.97%) attendees, as well as among referred (2.16%) attendees and direct walk-ins (1.21%). The HIV positivity rates showed a declining trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (894; 95.41% of total HRG) was the largest HRG in the district.
- In 2009, the number of STI/RTI episodes treated was 45,776 and the syphilis positivity rate among STI clinic attendees was 7.20%.
- As per 2001 Census, 12.34% of the males were migrants, among them 2.37% migrated to other states and 39.30% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Chhindwara in Madhya Pradesh and Raipur in Chhattisgarh.
- As per 2012 ICTC data, parent to child HIV transmission accounted for 6.39%, of all the HIV transmission routes in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 81.8% and 37.5%, respectively.
- In 2012, one TI site was functional for FSWs, in the district.
- As per programme response 2012 data, 34 ICTCs were functional in the district, which tested a total of 47,344 attendees for HIV.

Key Recommendations:

- Although there was a low level of HIV epidemic in the district, vulnerability factors in transmission of HIV needs to be analysed from ICTC, blood bank and STI data.
- Intensify outreach activities with HIV prevention messages for risk groups (FSW, MSM) including truckers.
- Generate information on typology, profile of HRG population to better understand district epidemiological profile.
- FSW sentinel site may be started to monitor the trend of HIV/ STI prevalence and impact of interventions.
- When the data will be available, analyze IBBS data on FSW and other groups in the district to improve the understanding of vulnerabilities.
- Increase STI/RTI awareness among women and integrate STI prevention and treatment into the PPTCT programme.

Mardha

District Population: 12,96,157 (1.15% of Maharashtra Population); Female Literacy¹: 81.89%; ANC Utilization²: 88.6%

HIV Levels and Trends ³										
	2005	2006	2007	2008	2009	2010	2011	2012		
HSS-ANC	PP ⁴	0.38	0.25	0.25	0.89		0.38		0.25	
	NT ⁴	800	800	800	787		799		800	
PPTCT	PP	0.40	0.62	0.39	0.35	0.30	0.24		0.12	
	NT	8078	11863	19590	17636	17324	16493		21059	
Blood Bank	PP	-	-	*	0.59	0.64	0.53	0.65	0.16	
	NT	-	-	*	8279	9121	11232	9437	1863	
HSS-STD	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-FSW	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-MSM	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
HSS-IDU	PP	-	-	-	-	-	-	-	-	
	NT	-	-	-	-	-	-	-	-	
ICTC Male	PP	9.49	7.32	3.28	2.67	2.84	2.65	2.16	1.59	
	NT	474	1338	6824	10447	10484	11891	12859	16392	
ICTC Female	PP	5.63	8.84	4.55	3.23	3.37	2.44	2.27	1.97	
	NT	480	656	2526	5350	5221	6693	7191	9893	
ICTC Referred	PP	6.81	8.35	4.82	3.58	3.76	3.22	2.78	2.16	
	NT	587	671	3816	5952	7759	9038	10508	14408	
ICTC Direct	PP	8.72	7.56	2.80	2.43	2.29	1.96	1.56	1.21	
	NT	367	1323	5538	9845	7946	9546	9542	11877	
Total tested at ICTCs ⁵	PP	9032	13857	28940	33433	37403	35077	20050	47344	
	NT	-	-	-	-	-	-	-	-	
PLHIV Profile, 2012										
	% On ART	% 15-24 yrs	% Ill, Prim. Edu.	% Married	% Widowed or Divorced					
ART (2588)	34	10	24	17	6					
DLN (NA)	-	-	-	-	-					
Route of HIV Transmission, ICTC 2012										
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown				
% of Total (N=407)	89.43	0.25	0.25	0	6.39	3.69				
Block-Level Details										
No. HRG-FSW	-	-	-	-	-	-				
No. HRG-MSM	-	-	-	-	-	-				
No. HRG-IDU	-	-	-	-	-	-				
% Pos. ICTC	-	-	-	-	-	-				
% Pos. PPTCT	-	-	-	-	-	-				

* Inadequate sample size; ¹ Data not available; ² 2011 Census; ³ Source: DLHS III; ⁴ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁵ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Vulnerabilities										
	HRG Size			Male Migration, 2001 Census						
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district			
Size Est. (Mapping, Year: 2008)	894	43	-							
% Total HRG	95.41	4.59	-							
% Total Pop.	0.07	0	-							
Program Target	NA	NA	NA							
Program Coverage	-	-	-							
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Pantli - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Chhindwara, Madhya Pradesh	Raipur, Chhatis-garn	Surat, Gujarat				
% <25 yrs	-	-	-							
% Married	-	-	-							
	STI/RTI									
No. episodes treated	2009	2010	2011	2012						
% Syphilis positivity	977	4043	8404	6449						
	0	0.31	0.24	0.03						
Programme Response										
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012	
FSW TIs	-	-	-	-	1	1	1	1	1	1
MSM TIs	-	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-	-
ICTCs	3	3	12	12	12	28	41	41	34	
Blood Banks	1	1	1	1	1	1	1	1	1	
STI clinics	-	-	-	-	1	2	2	2	2	
ART centres	-	-	-	-	1	1	1	1	1	
Link ART centres	-	-	-	-	1	1	1	1	1	
PLHIV Networks	-	-	-	-	1	1	1	1	1	
Red Ribbon Clubs	-	-	-	-	-	-	-	9	9	
Comm. care centres	-	-	-	-	-	1	1	1	1	
Drop-in-centres	-	-	-	-	-	-	-	1	1	
Condom outlets	3	3	12	12	12	12	12	12	12	

* Inadequate sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁶ General clients & pregnant women.

Washim

Background:

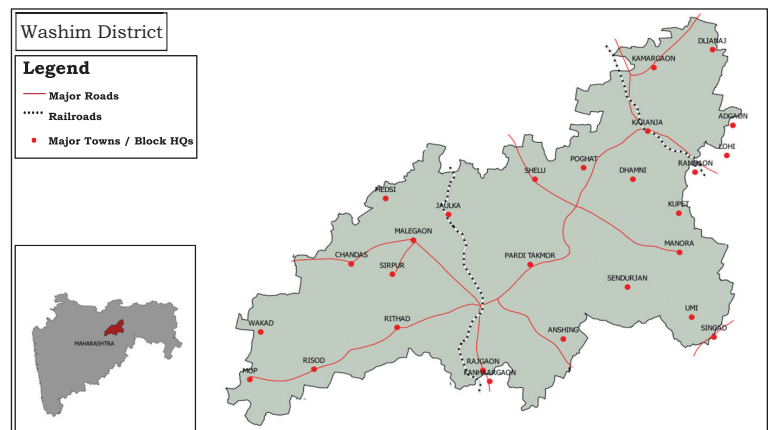
Washim is a relatively a newly formed district that was created on 1st July 1998, sharing border with Akola to the north, Hingoli to the south, Yavatmal to the east. It has a population of 11.96 lakh, a sex ratio of 926 females per 1,000 males; the district has a female literacy rate of 72.26% with an overall literacy rate of 81.70% (Census 2011). Agriculture is the primary industry in this region. The district is well connected via roads and railway, and National Highway 6 connects it to the rest of the districts with in the state.

HIV Epidemic Profile:

- As per 2012 HSS-ANC data, HIV prevalence was moderate (0.50%) among the ANC attendees, with a stable trend till 2010, but a slightly increase was observed in 2012.
- Based on 2012 PPTCT and 2011 Blood Bank data, HIV positivity rate was low for PPTCT attendees (0.46%) and near moderate among Blood donors (0.44%). HIV positivity rates showed a fluctuating trend for PPTCT attendees, while a stable trend was observed among blood bank attendees.
- According to 2012 ICTC data, HIV prevalence was low among male (2.26%) and female (1.60%) attendees, as well as among referred (1.79%) and direct walk-in (2.29%) clients. HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, FSW (1,043; 96.84% of total HRG) was the largest HRG in the district.
- In 2012, the number of STI/RTI episodes treated was 3,415.
- As per 2001 Census, 8.03% of males were migrants, among them 1.70% migrated to other states and 50.06% migrated to other districts with in the state.
- The top destination for out-of-state migration was Surat in Gujarat.
- As per 2012 ICTC data, HIV transmission through parent to child accounted for 6.06% of the total HIV transmissions in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 60.9% and 10.9%, respectively.
- A total of 17 ICTCs were functional, which tested 24,604 attendees for HIV in the district in the year 2012.

Key Recommendations:

- Considering the persistence of significant numbers of infections through mother to child transmission, strengthen PPTCT program in the district.
- Start sentinel surveillance among FSW in the district.
- Focus on getting a clearer picture on the size and profile of clients of FSWs, such as migrants and truckers, as FSW was the largest HRG in the district. Also, generate information on typology of HRG population to better understand the district epidemiological profile.
- Continue HIV prevention strategies to maintain HIV prevalence at low levels in the district.
- Strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.



HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴	0.38	0.13	0.38	0.38	0.38		0.50	
	NT ⁴	800	800	800	795	795		799	
PPTCT	PP	*	3.53	0.72	0.29	1.20	0.24	0.46	
	NT	*	2806	3590	6247	8078	8331	13936	
Blood Bank	PP	-	-	*	*	0.31	0.36	0.44	*
	NT	-	-	*	*	2911	5304	4985	*
HSS-STD	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-FSW	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-MSM	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
HSS-IDU	PP	-	-	-	-	-	-	-	-
	NT	-	-	-	-	-	-	-	-
ICTC Male	PP	11.32	6.12	6.02	3.62	3.54	2.95	2.50	2.26
	NT	592	1030	2942	4942	6392	6160	6720	5981
ICTC Female	PP	4.45	10.29	7.91	6.70	6.73	4.14	2.99	1.60
	NT	292	340	1049	1762	2124	2800	3742	4687
ICTC Referred	PP	9.76	6.71	7.40	4.99	5.61	3.43	2.60	1.79
	NT	410	656	1797	3024	3457	5187	6533	6875
Walk-in	PP	8.44	7.56	5.79	3.97	3.46	3.18	2.80	2.29
	NT	474	714	2194	3680	5059	3773	3929	3793
Total tested at ICTCs ⁵	NT	1489	4176	7581	14125	17603	17291	10462	24604
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced				
ART (1255)	47	7	89	68	17				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=198)	92.42	0	1.52	0	6.06	0			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

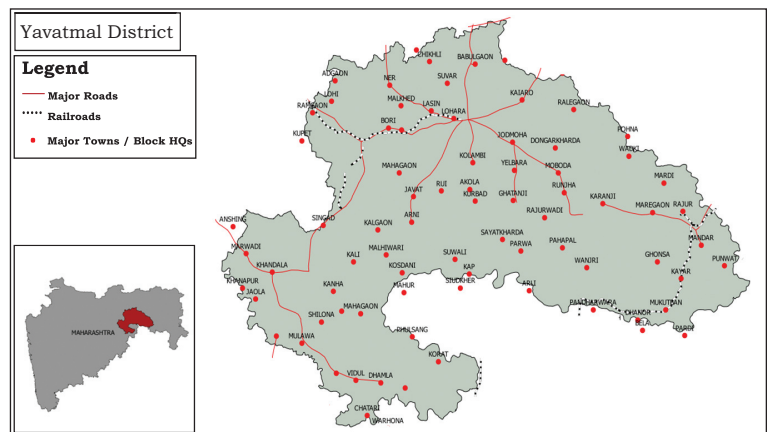
Vulnerabilities									
	HRG Size			Male Migration, 2001 Census					
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	1043	34	-						
% Total HRG	96.84	3.16	-	No. out-migration	42210	716	21131	20363	
% Total Pop.	0.09	0	-	% of male pop.	8.03	0.14	4.02	3.87	
Program Target	NA	NA	NA	% total migration	100	1.70	50.06	48.24	
Program Coverage	-	-	-	Top 5 districts for inter-state out-migration					
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Pantli - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Surat, Gujarat					
% <25 yrs	-	-	-						
% Married	-	-	-						
STI/RTI									
No. episodes treated	2009	2010	2011	2012					
% Syphilis positivity	0	1.03	0	0					
Programme Response									
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012
FSW TIs	-	-	-	-	1	1	1	1	-
MSM TIs	-	-	-	-	-	-	-	-	-
IDU TIs	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-
ICTCs	2	2	9	9	9	9	15	23	17
Blood Banks	-	-	-	-	-	-	-	-	-
STI clinics	-	-	-	-	-	1	1	1	1
ART centres	-	-	-	-	-	-	-	-	-
Link ART centres	-	-	-	-	-	-	4	4	4
PLHIV Networks	1	1	1	1	1	1	1	1	1
Red Ribbon Clubs	-	-	-	-	-	-	-	-	-
Comm. care centres	-	-	-	-	-	-	1	1	1
Drop-in-centres	-	-	-	-	-	-	-	-	-
Condom outlets	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Yavatmal

Background:

Yavatmal is located in the region of Vidarbha, in the east-central part of Maharashtra. It has a population of 27.75 lakh and a sex ratio of 947 females per 1,000 males; the district has a female literacy rate of 72.41% and an overall literacy rate of 80.70% (Census 2011). In 2006, the Ministry of Panchayati Raj named Yavatmal one of the country's 250 most backward districts. It is one of the twelve districts in Maharashtra currently receiving funds from the Backward Regions Grant Fund Programme (BRGF). The district is well connected via roads and railway, and National Highway 7 connects it to the rest of the districts within the state.



HIV Epidemic Profile:

- As per 2010 HSS-ANC data, HIV prevalence was low (0.38%) among the ANC attendee, with an overall decreasing trend.
- Based on 2012 PPTCT and Blood Bank data, the level of HIV positivity was moderate for ANC attendees (0.60%) and low among Blood donors (0.36%). HIV positivity levels showed a fluctuating trend for PPTCT and decreasing trend for blood bank attendees.
- As per 2010 HSS data, HIV prevalence was low among FSWs (2.41%).
- According to 2012 ICTC data, HIV positivity rate was low among male (3.23%) and female (3.06%) attendees, as well as among referred (2.71%) and direct walk-ins (4.10%) attendees. HIV positivity levels showed a decreasing trend for all the ICTC attendees.
- According to 2008 HRG size mapping data, MSM (370; 51.75% of total HRG) was the largest HRG in the district followed by FSW (345; 48.25% of total HRG).
- In 2012, the number of STI/RTI episodes treated was 13,897.
- As per 2001 Census, 12.55% of the males were migrants, among them 1.52% migrated to other states and 31.40% migrated to other districts within the state.
- The top two destinations for out-of-state migration were Adilabad in Andhra Pradesh and Surat in Gujarat.
- As per 2012 ICTC data, HIV transmission through parent to child accounted for 8.05%, of all the HIV transmission routes in the district.
- According to DLHS-III data, the HIV and STI/RTI awareness rate among women was 70.7% and 26.5%, respectively.
- In 2012, a total of two TI sites were operational in the district.
- A total of 75 ICTCs were functional in the district, which tested 75,398 attendees for HIV in the year 2012.

Key Recommendations:

- Carryout disaggregated analysis of ANC attendees in HSS to identify risk factors responsible for the high HIV epidemic among general population (e.g wives of migrant workers).
- Conduct disaggregated analysis of PPTCT to assess risk factors in the district.
- Although there was a high level of HIV epidemic in the district, vulnerability factors in transmission of HIV needs to be analysed from ICTC/ ART and STI data.
- It is necessary to strengthen PPTCT program coverage in the district as parent to child HIV transmission was high.
- Considering high rate of migration, strengthen outreach programme through awareness campaigns around source and transit points like railway stations and bus stands.
- Generate information on typology of HRG population to better understand district epidemiological profile.
- When the data will be available, analyze IBBS data on FSW, MSM and other groups in the district to improve the understanding of vulnerabilities.

Yavatmal

District Population: 27,75,457 (2.47% of Maharashtra Population); Female Literacy¹: 72.41%; ANC Utilization²: 71.5%

HIV Levels and Trends ³									
	2005	2006	2007	2008	2009	2010	2011	2012	
HSS-ANC	PP ⁴ 1.25 NT ⁴ 800	1.38 800	0.75 800	1.56 770		1.00 800		0.38 799	
PPTCT	PP 0.36 NT 3325	0.79 6585	0.82 13578	0.58 20336	0.46 27742	0.36 27037		0.60 32750	
Blood Bank	PP - NT -	- -	0.87 9607	0.86 6353	0.46 8316	0.56 12589	0.50 11977	0.36 5313	
HSS-STD	PP - NT -	- -	- -	- -	- -	- -	- -	- -	
HSS-FSW	PP - NT -	- -	- -	14.40 250		2.41 249		- -	
HSS-MSM	PP - NT -	- -	- -	- -	- -	- -	- -	- -	
HSS-IDU	PP - NT -	- -	- -	- -	- -	- -	- -	- -	
ICTC Male	PP 16.13 NT 843	6.49 1372	11.92 7409	7.58 16990	5.88 16908	4.41 19348	3.59 23627	3.23 24892	
ICTC Female	PP 11.67 NT 634	8.03 697	14.15 3761	41.05 10710	5.78 10454	4.53 12285	3.47 14772	3.06 17756	
ICTC Referred	PP 18.18 NT 506	13.78 595	16.13 5327	7.67 16409	5.75 17466	3.92 21851	3.22 24229	2.71 28979	
ICTC Direct	PP 12.15 NT 971	4.27 1474	9.52 5843	7.14 11291	5.99 9896	5.64 9782	4.09 14170	4.10 13669	
Walk-in	NT 971	1474	5843	11291	9896	9782	14170	13669	
Total tested at ICTCs ⁵	NT 4802	8654	24748	48036	58388	58670	38399	75398	
PLHIV Profile, 2012									
	% On ART	% 15-24 yrs	% Ill., Prim. Edu.	% Married	% Widowed or Divorced				
ART (8994)	35	9	8	5	1				
DLN (NA)	-	-	-	-	-				
Route of HIV Transmission, ICTC 2012									
	Hetero-sexual	Homo-sexual	Blood Transfusion	Needle/ Syringe	Parent to Child	Unknown			
% of Total (N=1031)	90.30	1.16	0.10	0	8.05	0.39			
Block-Level Details									
No. HRG-FSW	-	-	-	-	-	-	-	-	-
No. HRG-MSM	-	-	-	-	-	-	-	-	-
No. HRG-IDU	-	-	-	-	-	-	-	-	-
% Pos. ICTC	-	-	-	-	-	-	-	-	-
% Pos. PPTCT	-	-	-	-	-	-	-	-	-

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

Vulnerabilities									
	HRG Size			Male Migration, 2001 Census					
	FSW	MSM	IDU	Overall	Inter-State	Intra-state	Intra-district		
Size Est. (Mapping, Year: 2008)	345	370	-						
% Total HRG	48.25	51.75	-	No. out-migration	159056	2422	49948	106686	
% Total Pop.	0.01	0.01	-	% of male pop.	12.55	0.19	3.94	8.42	
Program Target	NA	NA	NA	% total migration	100	1.52	31.40	67.07	
Program Coverage	-	-	-	Top 5 districts for inter-state out-migration					
Typology	Home based - NA; Brothel based - NA; Street based - NA	Kothi - NA; Pantli - NA; Double decker - NA	Daily Injectors - NA; Non daily Injectors - NA	Adilabad, Andhra Pradesh Surat, Gujarat					
% <25 yrs	-	-	-						
% Married	-	-	-						
	STI/RTI								
No. episodes treated	2009 1413	2010 5571	2011 9627	2012 13897					
% Syphilis positivity	2.80	0	0	0					
Programme Response									
No.	2004	2005	2006	2007	2008	2009	2010	2011	2012
FSW TIs	-	1	1	1	1	1	1	1	1
MSM TIs	-	1	1	1	1	1	1	1	1
IDU TIs	-	-	-	-	-	-	-	-	-
Comp. TIs	-	-	-	-	-	-	-	-	-
ICTCs	2	2	17	19	19	24	24	72	75
Blood Banks	-	-	-	-	-	-	-	-	-
STI clinics	-	-	-	-	-	-	-	-	-
ART centres	-	-	1	1	1	1	1	1	1
Link ART centres	-	-	-	-	-	5	5	5	5
PLHIV Networks	-	-	1	1	1	1	2	2	2
Red Ribbon Clubs	-	-	-	-	-	-	-	73	97
Comm. care centres	-	-	-	-	-	1	1	1	1
Drop-in-centres	-	-	-	-	-	1	1	1	1
Condom outlets	2	2	92	94	96	96	96	380	380

* Inadequate sample size; - Data not available; ¹ 2011 Census; ² Source: DLHS III; ³ Data presented only for years where sample size is valid (HSS-ANC ≥ 300, HSS-HRG/STD ≥ 187, ICTC ≥ 600, PPTCT ≥ 900 and BB ≥ 900); ⁴ PP = percent positive; NT = number tested; ⁵ General clients & pregnant women.

The National AIDS Control Programme has a strong focus on district level planning, implementation and monitoring of interventions for prevention and control of HIV. The Programme is generating a rich evidence base on HIV/AIDS through a robust and expanded HIV Sentinel Surveillance system, monthly reporting from programme units, mapping and size estimations, behavioural surveys as well as several studies, research projects and evaluations.

In this context of increased availability of data and the requirement of decentralized planning at the district level, a project titled "Epidemiological Profiling of HIV/AIDS Situation at District and Sub-district Level using Data Triangulation" was undertaken by the National AIDS Control Organisation in 25 states (539 districts). The objective of this exercise was to develop district HIV/AIDS epidemic profiles, by consolidating all the available information for a district at one place and drawing meaningful inferences using Data Triangulation approaches.

This technical document is an outcome of the data triangulation process and consists of a snapshot on the district background, and on the HIV epidemic profile of each district based on the available updated information, thereby giving an overview of the HIV epidemic scenario in each of the districts of the State.

This document would be useful for the HIV programme managers and policy makers at all levels to help in decision making, as well as for researchers and academicians as a quick reference guide to the HIV/AIDS situation in the districts.



National AIDS Control Organisation

India's voice against AIDS

Ministry of Health & Family Welfare, Government of India

6th & 9th Floors, Chandralok Building, 36, Janpath, New Delhi - 110001

www.naco.gov.in