

Consolidated Progress Report

From September 2013-December 2014

Submitted to

Technical Support Unit(MPSACS)

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Background and Introduction:-

Under NACP-III, the Link Worker Scheme (LWS) is launched to saturate the reach of the HIV related services to the high risk group vulnerable population based in the rural areas. It has been Estimated on the base of HSS 2007, that 57 percent of the HIV positive persons in India were living in rural areas (2007). This reinforced the requirement of an intensive rural-based intervention (Fig 4.1) for reaching the marginalized groups which remaining covered even after the expansion of urban based prevention programs. In order to achieve the NACP-III goal of halting and reversing the epidemic, the Link Worker Scheme was formulated for the rural areas of 187 highly vulnerable districts of the country. This short term scheme aims at capacitating the rural community and equipping them with HIV related knowledge to combat the epidemic. At present, the scheme is being implemented in 126 districts with support from GFATM, UNDP, UNICEF and USAID.

A comparison of urban-rural data reveals that rural areas account for 59% of the total infection. According to the national HIV sentinel surveillance, 2006, HIV prevalence among antenatal clinic Attendees were 0.6%, and there was no marked difference in the urban-rural prevalence rate¹. However, in many states, rural areas either have a higher HIV prevalence rate than their urban Counterparts' or at the very least are at par with the prevalence rate in urban areas. There is growing evidence that HIV is no longer restricted to urban areas. Mau is among the List "A" in the context of HIV prevalence.

As per the NACO Link Worker program, the Organization **Center for Advanced Research and Development , Distt.- Ujjain(M.P.)**, with the support of **MPSACS, Bhopal** is Implementing **Link workers scheme** for enhancing AIDS Knowledge, Skills and services amongst High Risk Groups, Youth and Adults in the **villages of District- Ujjain, from March 1st /2013. Link workers scheme** is aimed at reducing the vulnerability of the most at risk adolescents, especially vulnerable adolescents and high risk groups in the rural areas as well as mitigating the impact of HIV on those who are already living with the virus.

Rational and Target Group:-

-  Rural-based Sex Work.
-  High Economic Differentials and Mobility.
-  Gender and Youth.
-  Migrants and Truckers with spouse.
-  People Living with HIV and AIDS (PLHA).
-  Community Based Workers.

Intervention Areas:-

State- Madhya Pradesh

District- Ujjain

Blocks- 6

Villages- 100

Key Supporters:-

- 🚫 National AIDS Control Organization, New Delhi.
- 🚫 Madhya Pradesh State AIDS Control Society, Bhopal.
- 🚫 Technical Support Unit ,Bhopal

Objective of LWS:-

- 🚫 Reach out to HRGs and vulnerable men and women in rural areas with information, knowledge,
- 🚫 Skills on STI/HIV prevention and risk reduction.
- 🚫 Increasing the availability and use of condoms among HRGs and other vulnerable men and women.
- 🚫 Establishing referral and follow up linkages for various services including treatment for STIs,
- 🚫 Testing and treatment for TB, ICTC/PPTCT services, HIV care and support services including ART.
- 🚫 Creating an enabling environment for PLHA and their families, reducing stigma and discrimination.
- 🚫 Against them through interactions with existing community structures/groups, i.e. Village Health Committees (VHSC), Village Health and Nutrition Day (VHND) Self Help Groups (SHG) and Panchayati Raj Institutions (PRI).

Silent Features:-




- 🚫 To use the evidence-based approach and scientific tools such as social mapping to identify rural areas with greater risk of contracting HIV
- 🚫 individuals/groups within the villages in need of information and services will be identified through detailed situation need assessment
- 🚫 To generate demand for various HIV/AIDS related services and strengthen access to existing services. The scheme itself will not create any service delivery points.
- 🚫 The scheme is a short-term time-bound intervention aimed at enhancing community participation, building a sense of ownership and stake in it to enable the scheme to sustain beyond the program.

Human Resource:-

1. DRP- Program- 01
2. M&E- 01
3. Supervisors- 04
4. Link workers- 40

Activities Implemented in this period:-

- 🚫 Line-listing of HRG, Bridge & Vulnerable Population OVC & PLHIV.
- 🚫 Participate in District Monthly TB HIV Review Meeting.
- 🚫 Monthly Local Body Meeting
- 🚫 Weekly Review Meeting with Supervisors Monthly Review Meeting with Link Workers.

-  Celebrate World AIDS Day at Block & District .
-  Co-ordination Meeting With ICTC & T.I
-  Celebrate National Youth Day Week With All T.I Staff .

Line-listing of HRG and other Target Groups:-

We have Identified & line-listed **345 FSW, 153 MSM, 15 IDUs, 1884 Truckers, 1330 Migrants, 3755 Vulnerable Population, 208 PLHIV, 133 OVC**. Link Workers are regularly meeting them and aware to HIV /AIDS and other health issues. Process of Line-listing of HRG and other target groups are regularly going on.

S.No.	Category	Total Number Identified	Cumulative contacted
1	FSW	345	345
2	MSM	153	153
3	IDU's	15	15
4	Truckers	1884	1884
5	Migrant	1330	1330
6	Vulnerable Male	1375	1375
7	Vulnerable Female	814	814
8	PLHIV Male	130	130
9	PLHIV Female	78	78

Review Meeting With MPSACS (Bhopal) :-

We have participated in Review Meeting With MPSACS Bhopal .In this Meeting Discuss about Re SNA & Identify 50 New Villages .Orientation to DRP's & M&E . Review On MPR April 2014 to December 2014 .Link Worker & Supervisor New Reporting Formates & Documents.

HIV, STI & TB referral and testing:-

In this period, we have **tested 2540 people** for HIV testing. They were 211 HRG, 819 Bridge Population & 1218 Vulnerable populations and 292 ANC covered in these testing.1881 people referred & treated for STI services. They were 157 HRG, 384 Bridge Population & 640 Vulnerable community and 31 people referred & treated in DMC centre for DOTS and 18 people got TB sputum positive.

Advocacy Meeting with health department:-

In this period, we have organised an advocacy meeting with ICTC Counsellor Civil Hospital and ICTC Counsellor & L.T Madhav Nagar Hospital Ujjain .In this meeting we Discuss about HIV Testing .He cooperate us.

Review Meetings with Supervisor & Link Workers:-

During this period, we have been conducted **32** meetings with Supervisors and 16 meetings with Link worker. During the meetings, we have discussed according to their suggested target and work schedule and reviewed their achievements. In this month, we have specially been focused on capacity building of link workers and supervisors through short duration training and orientation how to check the status of behavioural practices among FSWs, Truckers, Migrants and vulnerable group

members, how to access enhanced knowledge and skill of HRGS, Truckers, Migrants and Vulnerable group members on modes of transmission and how to evaluate scheme impact in Link Worker Scheme Villages and interaction with FSWs, Migrants, Long distance drivers and vulnerable men and women, ASHA, ANM, AWW, Village Sarpanch and other village level existing stake holders, how to make linkage with village level functionaries, PRI members and service providers, how to organize village level community meetings and how it would be incorporated village level existing issues particular focusing on HIV/AIDS. During this month monthly review meeting has been conducted at district level. During the review meeting each link worker and supervisor presented their progress and also shared their problems, which they have been faced during the implementation of planned activities. DRP (Program) & DRP (Training) reviewed work and progress of each link workers as well as supervisors during the meetings and suggested them how to ensure program quality.

Target Completed

S.No	Activity	Total Activity done
1	Condom Depot	100
2	Volunteer	1000
3	Village Information Centre	100
4	RRC	67
5	Village Functionary Meeting	244

Future Activities Plan:-

1. Increasing referral to ICTC and STI Clinic.
2. Increasing referral to TB & ANC Services.
3. Increasing line-listing of HRG, Bridge population & Vulnerable Population.
4. Participate in District TB-HIV Review Meeting at District Tuberculosis Centre.
5. Centre.
6. Line-listing of HRG, Bridge Population & Vulnerable Youths .
7. Training & Capacity building to Volunteers.
8. Organizing Weekly Review Meetings with Supervisors & Monthly Review
9. Meeting with Link Workers.
10. Organizing Mid-Media Activities.
11. Organizing Link Worker Module- 2 Training.
12. 10.Re SNA & Identify new 50 Villages.

Report Prepared by–

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Celebration of Youth Day Week Activity



Celebration of World AIDS DAY

