



STAC

(SAARC Tuberculosis and HIV/AIDS Centre)
Newsletter

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In this issue

Page No.

Editorial

Brief News:

- Regional Consultation Meeting on HIV and Universal Health Coverage (UHC)
- Regional partners meeting on Adolescents
- Observation of STAC from High Level Dignitaries from Embassy of India, Kathmandu
- Participation in IAS 2015, Vancouver, Canada
- Resignation of Epidemiologist, STAC

News from India

- Innovative Intensified TB case finding and appropriate treatment a high burden ART centre in India

News from Afghanistan

- HIV and AIDS Coordination Committee of Afghanistan
- HIV & AIDS Workshop held for the Ministry of Refugees and Returnees
- NACP program review workshop conducted
- SAARC efforts to combat HIV and AIDS in the Region



Regional Workshop on Development of Framework on addressing HIV/AIDS in the context of Universal Health Coverage (UHC)
WHO/SEARO, New Delhi, India, 1-3 June 2015



(High level dignitaries from Embassy of India in Kathmandu at SAARC TB and HIV/AIDS Centre, Thimi, Bhaktapur, Nepal)

STAC Newsletter is a regular publication of SAARC TB and HIV/AIDS Centre, it includes reports of activities, decisions of important meetings of the Centre, news of important activities of National TB and HIV/AIDS Control Programmes of SAARC Member States and recent information on TB and HIV/AIDS.

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Editorial

Ending the AIDS Epidemic among Adolescents in SAARC Region

Adolescence is the period when many people begin to explore their sexuality; as a result, access to sexual and reproductive health information and services becomes increasingly important. Despite the well-known need for protection from HIV infections and other reproductive health risks, their age and their social and economic status limit adolescent access to information and services in many settings. Adolescence is typically a period of experimentation, new experiences, and vulnerability. Some adolescents may experiment with injecting drugs, sexuality, and sexual orientation (men may begin to have unprotected sex with other men), and some are exploited sexually. Comprehensive data are essential to shaping accurate HIV-related messages and services before risky behaviors are formed and become entrenched.

Since 2000, various global declarations and commitments with specific goals and targets have been made and set by world leaders and governments to respond to the HIV and AIDS epidemic.

More recently, for the countdown to 2015, the UN Secretary General's High-Level Advisory Panel on the Post Millennium Development Goals Agenda released recommendations for post-2015. The report emphasizes equity, empowerment, and engagement of adolescents and youth and strengthening of data as core drivers of transformation in the next development agenda. Although these global commitments, goals, and targets are relevant for adolescents, the implications and accountabilities are rarely specific to this age group. In addition, adolescent-specific data are limited, which present a serious impediment to measuring and monitoring progress.

While major advances have been made in almost every area of the response to HIV, progress for adolescents is falling behind, leaders in the global response to end the AIDS epidemic have said. AIDS has become the second leading cause of death among adolescents globally. Just one in four children and adolescents under the age of 15 has access to life-saving antiretroviral treatment. Deaths are declining in all age groups, except among 10–19 year olds. New HIV infections among adolescents are not declining as quickly as among other age groups. Adolescent girls are most affected. Adolescents aged 15–19 accounted for 15 per cent of all new HIV infections in Asia and the Pacific in 2013. Around 130,000 estimated number of adolescents (aged 10–19) living with HIV in SAARC Region, Percentage that has not fallen over the past five years even as adult infection rates have continued to drop. Ambitious targets to end the AIDS epidemic by 2030 have been set by global community but will not be achieved if AIDS related deaths among adolescents continue unabated. This alarming trend underscores the urgent need to ensure that adolescents are reached with HIV testing high impact treatment and combination prevention intervention towards new infection in SAARC region. Without a new initiative for these groups we cannot meet our target for 2030.

The new initiative 'All In' focuses on four key action areas: engaging, mobilizing and empowering adolescents as leaders and actors of social change; improving data collection to better inform programming; encouraging innovative approaches to reach adolescents with essential HIV services adapted to their needs; and placing adolescent HIV firmly on political agendas to spur concrete action and mobilize resources.

This new initiative can bring a positive change in the region and will certainly help in bringing down the menace of HIV in the SAARC Region.

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Brief News

Regional Consultation Meeting on HIV and Universal Health Coverage (UHC), WHO Regional Office for South East Asia, New Delhi, India

Recognizing the need for a framework to address the HIV epidemic in the context of universal health coverage and post-2015 sustainable development agenda, the World Health Organization (WHO) Regional Office for South-East Asia convened a workshop for Member States in New Delhi from 1-3 June 2015.

The key objectives of the meeting were to discuss the contribution of the HIV response to UHC and the opportunities to use the UHC framework in strengthening the HIV response that will set the course for

ending the HIV epidemic in the South-East Asia region by 2030

Dr. Sharat Chandra Verma, Director, SAARC TB and HIV/AIDS Centre, Nepal participated in a consultation meeting organized by WHO/SEARO, New Delhi from 1st to 3rd June 2015. Hence, SAARC TB and HIV/AIDS Centre is WHO collaborating centre for control of TB by strengthening the TB control training and research.

The meeting was participated by the different partner agencies of WHO

along with the National HIV Programme Managers and National Health Planning or UHC focal points from all 11 Member States. In addition, an expert representing the PLHIV communities and their contribution to the HIV response from Bangladesh, India, Indonesia, Nepal, Myanmar and Thailand were also invited. The meeting developed regional framework for ending AIDS in the context of UHC in the WHO South-East Asia Region.

Regional partners meeting on Adolescents



Dr. G. K. Bhatta, Research Officer, SAARC TB and HIV/AIDS Centre participated in the Regional partners' Meeting on HIV and AIDS Among Young Key Affected Populations in South Asia held in Dhaka, Bangladesh from 11th to 13th May, 2015 organized by UNICEF Regional Office for South Asia. The objective of the meeting was to bring together national counterparts, key stakeholders and UN colleagues to take forward the ALL IN Agenda and catalyze efforts around ending the AIDS epidemic among adolescents in South Asia.

The three day meeting was designed to be participatory and interactive. This was achieved by including a range of facilitation methods over the course of the meeting including plenary sessions, group work, presentations and facilitated discussions. Around 50 participants attended this three day meeting, representing Bangladesh, Bhutan, India, Maldives, Nepal and Pakistan along with the representatives from SAARC, civil society, youth and UN agencies.

Observation of STAC from High Level Dignitaries from Embassy of India, Kathmandu

A team of Senior Diplomats, Mr. Vinay Kumar, Deputy Chief of Mission and Mr. Gyanveer Singh, SS (EC), from the Embassy of the Republic of India in Kathmandu, visited SAARC TB and HIV/AIDS Centre on 13th July 2015 and observed the functioning and infrastructure of the Centre. Dr. Sharat Chandra Verma, Director, STAC briefed the vision, mission, progress and the future programme of the Centre.

Participation in IAS 2015, Vancouver, Canada



Dr. S. C. Verma, Director, STAC talking about HIV/AIDS programme in SAARC Region with the international expert)

Dr. Sharat Chandra Verma, Director, STAC participated in the 8th IAS Conference on HIV Pathogenesis, Treatment and Prevention at the Vancouver Convention Centre held from 19th to 22nd July 2015 in Vancouver, British Columbia, Canada. Dr. Verma shared with the international HIV/AIDS experts attending the conference, the experiences and challenges revealed during the implementation of the HIV and AIDS programme in the SAARC Region.

Resignation of Epidemiologist

Dr. Gajananda Prakash Bhandari, Epidemiologist (Professional), SAARC TB and HIV/AIDS Centre, Nepal forwarded his resignation from his post to be effective from 1st Sept. 2015. The Centre thanked him for his contributions to the centre and also wished him a great success in his coming days.

News from India

Innovative Intensified TB case finding and appropriate treatment at high burden ART centres in India – A NACO-Central TB Division – WHO India project

'Innovative Intensified TB case finding and appropriate treatment at high burden ART centres in India' project to support the three I's for HIV/TB (Intensified case finding, Isoniazid preventive therapy (IPT), and Infection control) to reduce the burden of TB among people living with HIV was launched by Hon. Union Health Minister, Ministry of Health and Family Welfare, Government of India and Hon. Secretary Health, Ministry of Health and Family Welfare, Government of India on World TB day 2015.

This National AIDS Control Organisation-Central TB Division – WHO India project is using Cartridge Based Nucleic Acid Amplification Test

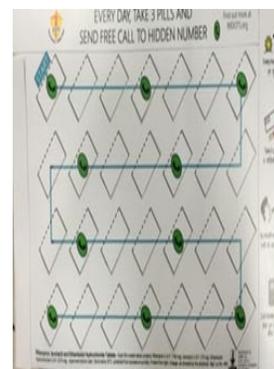
(CBNAAT), which will diagnose TB and Rifampicin resistance in 90 minutes time. CBNAAT is used as primary diagnostic tool established in Designated Microscopic Centres located near to selected 30 ART centres in five states (Andhra Pradesh, Telangana, Karnataka, Maharashtra & Tamil Nadu). This will help in early rapid diagnosis of TB and Rif Resistance among People living with HIV. Patient diagnosed with Tuberculosis will be linked to first line anti TB drugs daily regimen for TB patients diagnosed in these centers. Project components also include Airborne Infection Control at HIV care settings and Isoniazid Preventive Therapy.

Salient features of the project include:

- Single window service delivery for TB & HIV
- Intensified case finding using CBNAAT
- TB & HIV patients receive daily anti-TB therapy drugs in Fixed Dose Combination
- Innovative drug intake tracking mechanism using missed call at a toll free number on the strip is used under this project.
- Better management of side effects- Pharmacovigilance
- Isoniazid Preventive Therapy
- Air Borne Infection control at HIV care settings



Innovative drug intake tracking mechanism (99DOTS) using missed call at a toll free number on the strip is used under this project



HIV and AIDS Coordination Committee of Afghanistan

The HIV and AIDS Coordination Committee of



Afghanistan (HACCA) meeting was held on June 24, 2015, at Dr. Sohaila Sediq Conference Hall. A total of 46 individuals from many relevant agencies including the line ministries, donors, UN agencies, civil society, private sector and implementing partners participated at the meeting.

Following the recitation of verses from the Holy Quran, His Excellency Dr. Ahmad Jan Naeem, Deputy Minister for Policy and Planning of the Ministry of Public Health, welcomed the participants to the meeting. He acknowledged their active participation, likewise, he highlighted, the recent new Inter-Ministerial mechanism for high level making decision which is chaired by H.E. Chief Executive Officer of Government Islamic Republic of Afghanistan (GIROA). Each six-month were the HIV and AIDS related issues will be incorporated as agenda for further discussion and solution at inter-ministerial meetings.

During the meeting, Mr. Abdul Jalil Samit administrator deputy of Kabul Police, Mr. Abdul Salam Kohi representative of private sector and Dr. Sobh Rang representative of Independent Human Rights Commission expressed their commitment and cooperation with National AIDS Control Program as important and useful members of the HIV and AIDS Coordinating Committee for Afghanistan (HACCA).

HIV&AIDS Workshop Held for the Ministry of Refugees and Returnees

Ministry of Returnees and Refugees is one of the key sectors for HIV prevention, care and support. The

displaced people are vulnerable to HIV, therefore, on June 17, 2015, National AIDS Control Program and HACCA Secretariat held an HIV and AIDS awareness workshop for the MoRR. The objectives of the workshop were to:

- Enhance and raise awareness of on HIV prevention
- Strengthen the coordination between the Ministry of



Refugees and Returnees Ministry of Public health and the Ministry of RR

- Reduce HIV related stigma and discrimination
- Advocate with MoRR to mainstream HIV and AIDS related issues into Ministry policies and strategies

In this workshop, a total of 45 individuals of different departments of MoRR participated. The Deputy Minister of returnees and refugees, Fazal Ahamad Azami, welcomed the participants and stated, "The displacing and trafficking of people would be a predisposing factor for HIV risk and vulnerability, especially, for those who travel inside and outside the country", and he highlighted, "HIV and AIDS is a multi-sectorial issue, all sectors have to be fully committed and supportive for the prevention of HIV at county level and the Ministry of Returnees and Refugees as active member will strongly care for this particular issue and will be committed to ensuring Afghanistan remain a low prevalence in the country.

NACP Program Review Workshop Conducted

The NACP Program Review Workshop was held on September 07-08, 2015 at Planning and Policy meeting hall, Ministry of Public Health. Around 50 participants from HIV projects partner NGOs, National AIDS Control Program, and the MoPH attended the workshop. The objectives of which were to:

- Review NACP progress and achievements.

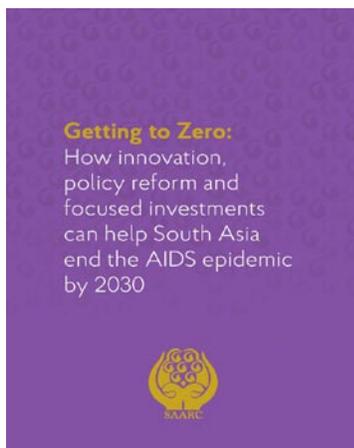
- Discuss the existing challenges and find the appropriate solutions to overcoming those issues.
- Improve the quality of HIV and AIDS services.

Dr. Feda Mohammad Paikan, National AIDS Control Program Manager of MoPH, officially opened the workshop, and declared that the objective of the MoPH is to provide quality HIV and AIDS preventative services in the country, he said, "The recent HIV positive cases among Male with high risk behaviour (MHRB) are critical challenges, which special attention should be given. The key action items emerging from workshop included:



- HIV stakeholder's coordination should be strengthened at national and provincial level
- National AIDS Control Program has planned to initiate HBV vaccines for around 5000 eligible PWIDs and other risk groups.
- The overall Hospitals have to provide the health services to the people who living with HIV.
- People living with HIV support group meetings have to be maintained regularly.

SAARC efforts to combat HIV and AIDS in the Region



SAARC with collaboration of UNAIDS, UNDP, other UN agencies and stakeholders has scaled up the AIDS responses over the last 10 years and have made remarkable progress across South Asia in line with SAARC Regional Strategy on HIV and AIDS.

This document aims to halt and reverse the spread and impact of HIV and AIDS, to commit leaders to lead the fight against HIV and AIDS

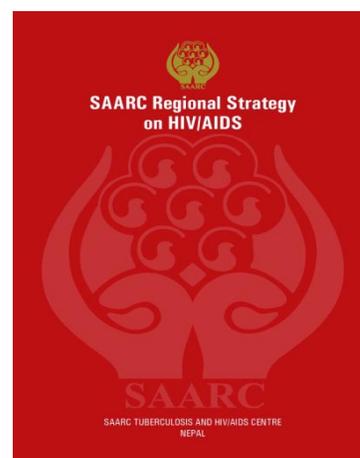
and to provide PLHIV access to affordable treatment and care to enjoy a dignified life.

The SAARC leaders deserve congratulation for their visionary recognition of HIV and AIDS as a major threat to the region's economic transformation. They demonstrated commitment during the Twelfth SAARC Summit (Islamabad, 4 – 6 January 2004) to reduce the spread of the epidemic in the region through the declaration to enable access to affordable prevention and treatment services to combat HIV and AIDS, TB and other infectious diseases by strengthening the SAARC TB Centre to SAARC TB and HIV/AIDS Centre.

The vision for SAARC is an "AIDS free generation in the SAARC region." The goal is to "Promote high quality, high impact responses in the region towards achieving the 'Three Zeroes': Zero new HIV

infections, Zero discriminations, and Zero AIDS-related deaths.

SAARC Regional Strategy on HIV and AIDS



The key commitment of the SAARC Strategy on HIV and AIDS is to urgently scale-up responses towards achieving the goal of universal access to comprehensive prevention, treatment, care and support. Though there have been significant improvements, these

have not been uniform across all countries and there are pockets where HIV prevalence is on the increase. The current strategy is an effort to strengthen the regional responses based on lesson learnt from the outcomes of previous strategy.

This strategy is grounded on the principles of equity, human rights and social determinants of health. The strategy welcomes the leadership and commitment shown in every aspect of the HIV and AIDS response by SAARC Member States, PLHIV, key affected populations, development partners, political and community leaders, civil society organizations, academics, health professionals, the private sector and the media.

[STAC Activities on TB and HIV/AIDS 2014](#)



The Annual Report 2014 gives the important information on the efforts of the STAC in the prevention and control of HIV and AIDS in the region.

SAARC Regional Training on Leadership and Strategic Management for TB & HIV/AIDS Control was organized to enhance the existing understanding, knowledge & skills on leadership & strategic management among the Programme Managers of National HIV and AIDS Control Programmes. This activity imparts the skills for the best execution for the implementation of the HIV and AIDS Control Programme in the country.

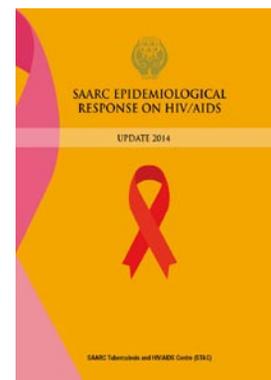
SAARC Regional Meeting of the Programme Managers of National HIV/AIDS Control Programmes of Member States with objectives to discuss/share the achievements, experiences, innovation and challenges in HIV and AIDS Control Programmes in the SAARC Member States provides an open platform for the discussion, overview and formulation of the recommendations to address relevant issues in time.

Under the country level programme; sensitization, advocacy and social mobilization on HIV/AIDS, SAARC Goodwill Ambassadors for HIV and AIDS are playing important role for control and prevention of HIV and AIDS in the region. In this regard, Shree Ajay Devgan, involved in National Youth Day programme jointly organized by SAARC Department of AIDS Control, Government of India in Mumbai.

[SAARC Epidemiological Information on HIV and AIDS](#)

Report on Epidemiological Information on HIV and AIDS

provides the information on HIV/AIDS epidemic in the region. HIV and AIDS can be curtailed with



increased and concerted effort of the Member States. The SAARC region requires accurate and reliable data on the magnitude and trends of HIV infection along with the behaviors fuelling its spread. Member states with high burden of disease have made considerable efforts to improve their biological and behavioral surveillance system to generate evidences.

The SAARC TB & HIV/AIDS Centre has been coordinating and supporting the National AIDS Control Program of the Member States in this regard. The centre has been disseminating updated data and information to the Member States in the HIV/AIDS in the region as its core function. The STAC also strives hard in assisting the member states in achieving the strategy of zero new HIV infections, zero, discrimination, and zero AIDS-related deaths.