

Mid Term Review of NACP-III

The National AIDS Control program in India was initiated in 1992. The current phase of the program, NACP-III aims to halt and reverse the AIDS epidemic by (1) achieving behavior change by scaling up prevention of new infections in high risk groups and general population; and (2) increased care, support and treatment of people living with HIV.

The program focuses on the following activities: prevention of new infections by saturation coverage (>80%) of high risk groups through 2100 targeted interventions targeting one million female sex workers, 1.15 million men having sex with men, 190,000 injecting drug users, 3 million long distance truckers and 8.9 million migrant workers, expanding care, support and treatment opportunities for people affected by HIV reaching 380,000 PLHIV with psychosocial support services, providing antiretroviral treatment to 340,000 people including 40,000 children offering opportunities infection treatment to 330,000 persons and TB treatment to 2.8 million persons, strengthening capacity at district, state and national levels, and strategic information management through a Strategic Information Management Unit at national and state level.

The programme will reach mid term of its implementation this year and it has been proposed to carry out a mid term review to reflect, reassess and discuss the progress achieved and challenges encountered.

Evaluating the effectiveness of the NACP-III is challenging as there are many determinants of spread of HIV beyond Government commitments, implementation strategies and inputs from various donors. Figure 1 presents a schematic diagram of the channel through which technical and financial assistance from donors affects outputs, behavioral outcomes, and epidemiological impacts at the country level.

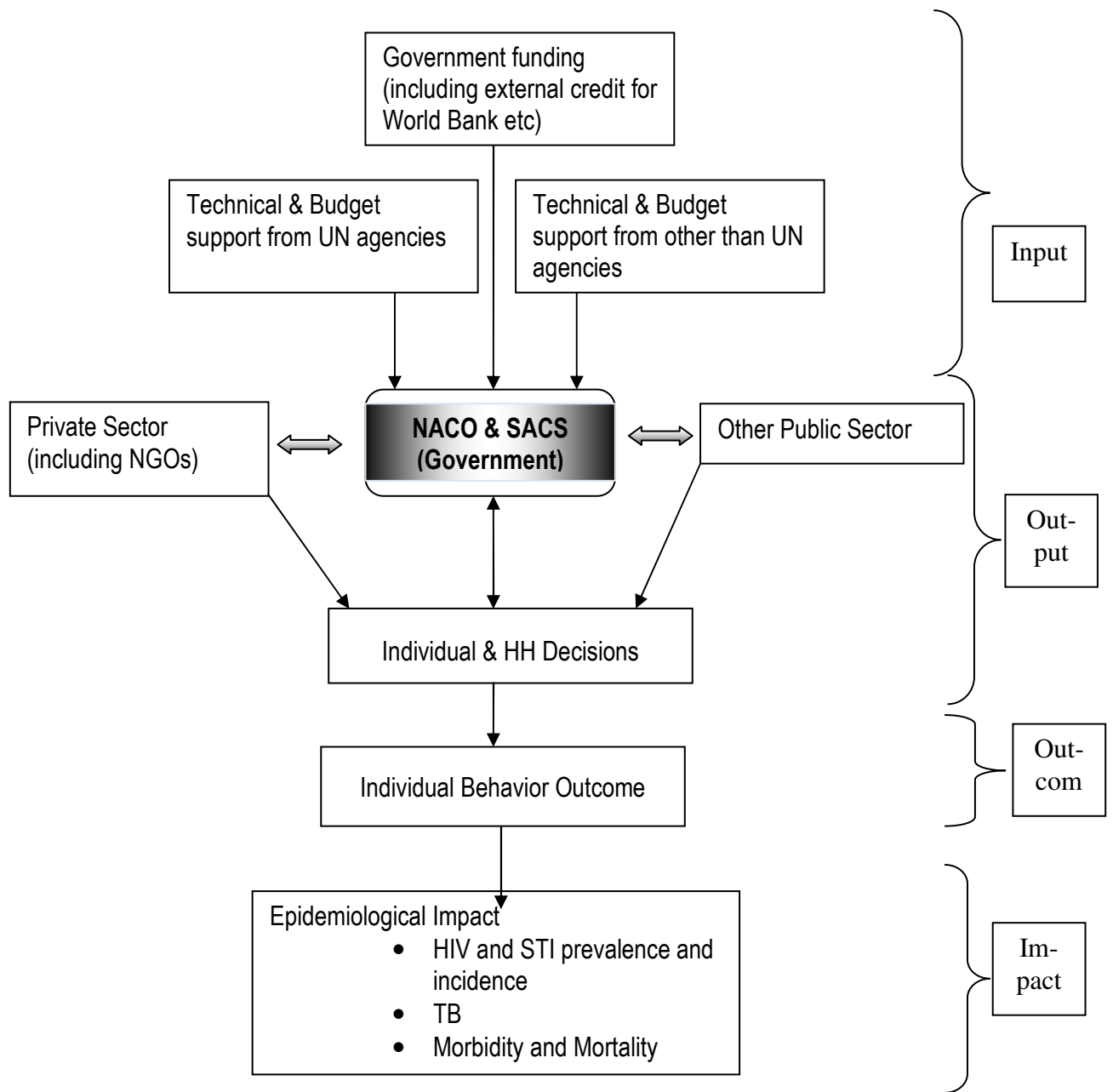


Fig.1: Conceptual framework for Mid Term Review of NACP-III

Objectives

MTR of the NACP-III will assess the overall national response to HIV and AIDS. The review will identify whether mid course corrections in the design of NACP-III need to be made in the light of the experience and information in the first three years of implementation.

Specific objective of MTR is as follows:

1. to assess overall progress made in relation to target, coverage, access and quality/intensity of the interventions with in-depth analysis of TI, STI/STD services, PPTCT, Social inclusion and equity, IEC.
2. to assess important processes for implementing the NACP-III such as an institutional management processes, efficiency and workload, technical needs assessment and innovations in delivery of services.
3. to examine the challenges faced in the implementation of NACP-III and recommend actions to address them.

Evaluation Design

The mid-term review is being carried out at central as well as state level. State level review is being done on a sample basis representing geographic regions of the country and prevalence rates of HIV infection.

The sources of information will be captured from routine monitoring data managed via the Computerized Information Management System (CIMS), HIV Sentinel Surveillance (HSS), Behavioral Surveillance (BSS), Integrated Biological and Behavioral Assessment (IBBA) and other surveys.

Annual Service Quality Assessments (SQA) and other Special Studies (SS) will be undertaken to measure achievements at the outcome and impact level. In addition desk review, consultations with civil society etc will also be made.

The MTR Steering Committee consists of members from NACO, BMGF, UNAIDS, WHO, UNICEF, USAID, GFATM, UNDP, World Bank etc is constituted to plan, execute and oversee the MTR. The committee meets periodically under the chairpersonship of Secretary, Department of AIDS Control to oversee the progress of the MTR.

Major observations and recommendations of the MTR will be released soon.

Key activities included in the MTR of NACP-III

1. Impact assessment of targeted interventions for preventions of HIV.
2. Epidemiological Profiling of HIV/AIDS Situation at district/sub-district level using Data triangulation.
3. Assess the coverage, efficiency and quality of STD/STI services. Agencies to do an internal review to assess if the processes are on track.
4. Review the organizational capacity of NACO and SACS including efficiency, work load and cost.
5. Review unit costing of different components of NACP-III.
6. Update and analyse donor financial commitments and identify gaps.
7. Conduct a snapshot of Behavioural Sentinel Surveillance.
8. Innovations in programme implementation.
9. District level estimates for HRG based on mapping and program data in 17 states of India.
10. Assess how social inclusion and equity issues are being addressed in the programme.
11. Assess quality of IEC strategy.
12. Assess the access and utilization of PPTCT services as per the National package.
13. Factors Affecting Enrollment of PLHAs at ART Centers in India.
14. Assessment of Link ART centers in India.