



*DoD HIV/AIDS Prevention Program
Status Report
May 2003 to September 2004*

India



BACKGROUND

Introduction/General Information

The population of India is estimated at 1.1 billion people, with an average life expectancy estimate of 64 years. Hindi is the official language, with literacy estimated at 60%, unevenly distributed between men and women. India's economy encompasses village farming, agriculture, handicrafts, a wide range of modern industries, and a multitude of support services. The average annual per capita income is \$2,900.

Country HIV/AIDS Statistics and Risk Factors

The HIV/AIDS prevalence rate in India is estimated at 0.8% of the general population, and 3.97 million people are estimated to be living with AIDS. Data on HIV/AIDS prevalence rate in the military are unavailable.

Military HIV/AIDS Information

The military forces in India are composed of Army, Navy (including naval air arm), Air Force, Coast Guard, various security or paramilitary forces (including Border Security Force, Assam Rifles, National Security Guards, Indo-Tibetan Border Police, Special Frontier Force, Central Reserve Police Force, Central Industrial Security Force, Railway Protection Force, and Defense Security Corps). The size of the forces is under review. Estimates of the HIV infection rate among India's military is unavailable.

PROPOSED PROGRAM

In October 2003, the Center of Excellence in Disaster Management and Humanitarian Assistance (COE) submitted a plan entitled *HIV/AIDS Prevention Education and Training Program for the Indian Military*. Key elements of the plan include:

- Establish the structure of collaboration and responsibilities for DHAPP and the country team,
- Strengthen communications between military and civilian medical leadership,
- Secure cost estimates for medical equipment and supplies to support HIV screening in the Indian military,
- Build capacity of the Indian Armed Forces Medical Services (AFMS) in HIV counseling and testing, diagnostics, and epidemiology,
- Meet with AFMS to discuss existing laboratory capabilities,
- Outfit at least 10 counseling and testing (CT) centers,
- Support HIV screening within the Indian military, and
- Organize and plan a series of HIV/AIDS prevention workshops in 2004.

PROGRAM RESPONSE

Military-to-Military

United States Pacific Command (USPACOM) and COE representatives in collaboration with DHAPP staff convened discussions and a site assessment with

AFMS in February 2004. As a result of these discussions, methods for procuring supplies and laboratory equipment for the AFMS HIV/AIDS program were identified with the support of the Defense Attaché Office (DAO) at the US Embassy in New Delhi. Terms of Reference for bi-lateral US-India HIV/AIDS Program coordination were prepared and submitted to the American Embassy Defense Attaché and Indian Ministry of Defense (MOD) for review and approval.

A joint HIV/AIDS Policy Workshop at the Armed Forces Medical College in Pune was also held in September 2004. A senior IAFMS official asked that the first 2 days of this workshop be devoted to HIV/AIDS policy issues geared toward senior military officers, followed by 2-3 days of continuing medical education for Indian military and medical officers. Further workshops are planned for fiscal year 2005.

Contractor-Based Assistance

None during this reporting period.

Clinical Provider Training

None during this reporting period.

Interoperability

None during this reporting period.

PROGRAM IMPACT

Master Trainers and Peer Educators

None during this reporting period.

Number of Troops Trained

None during this reporting period.

Potential Number of Troops Affected

None during this reporting period.

Counseling and Testing (CT)

None during this reporting period.

Laboratory Capability/Infrastructure

None during this reporting period.

Mass Awareness

None during this reporting period.