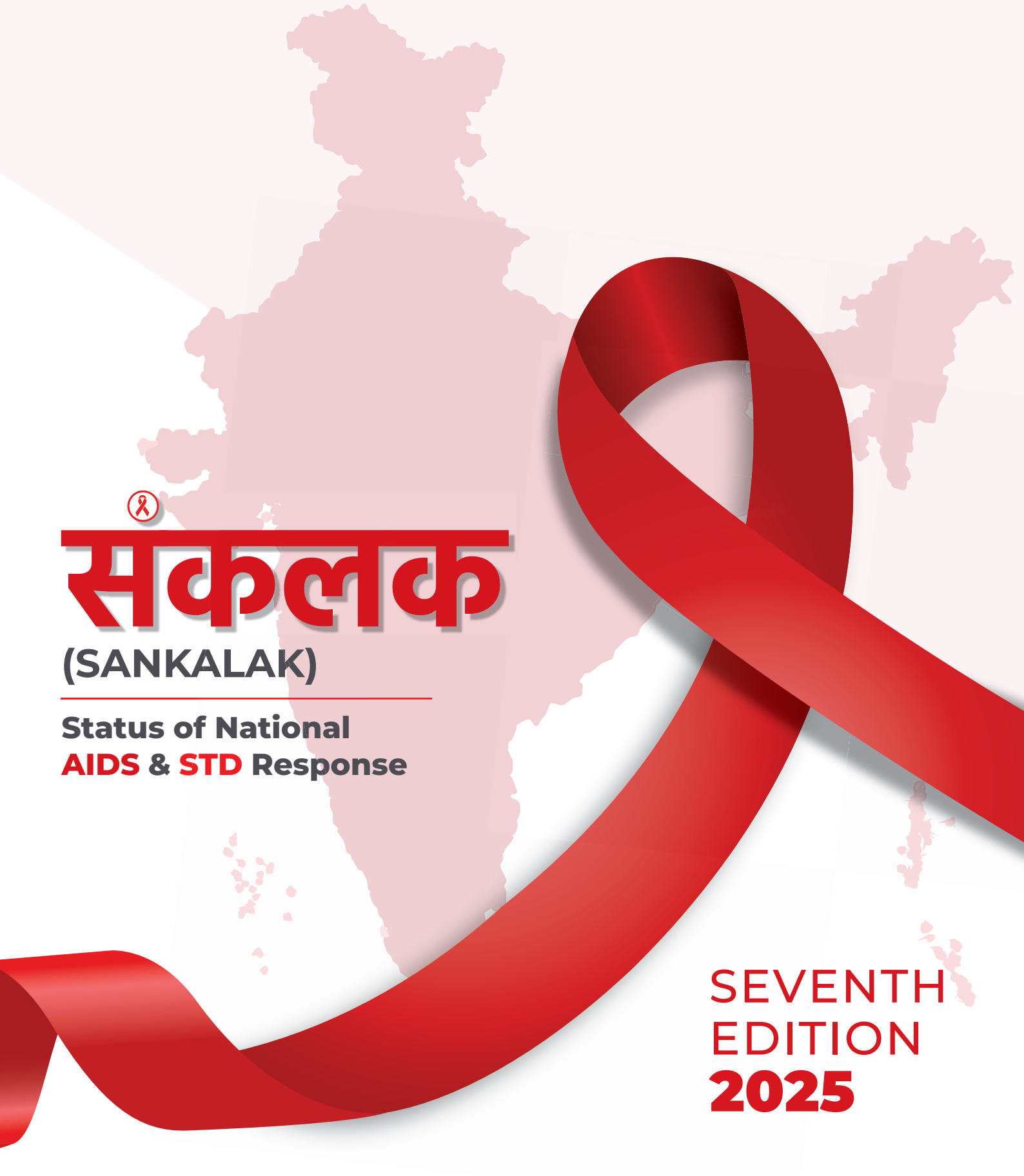
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संकलक
(SANKALAK)

Status of National AIDS & STD Response

SEVENTH EDITION
2025

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Azadi Ka Amrit Mahotsav

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सत्यमेव जयते

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Foreword

The Government of India is implementing Phase V of the National AIDS and STD Control Programme (NACP-V) as a fully funded Central Sector Scheme from 1st April 2025 to 31st March 2026. 'Sankalak', the flagship annual publication under NACP, presents a comprehensive overview of the programme's multifaceted efforts across prevention, detection, treatment initiation, retention, viral suppression, and elimination. The current edition, seventh in the series, highlights significant progress made under NACP-V.

Attainment of 95-95-95 targets is a key objective under NACP ensuring that 95% of people living with HIV (PLHIV) know their status, 95% of those diagnosed are on anti-retroviral treatment (ART), and 95% of those on treatment achieve viral suppression. These milestones are critical to reducing new HIV infections and AIDS-related mortality by 90%, a key benchmark on the path to ending AIDS as a public health threat by 2030.

NACP-V has made significant progress on the 95-95-95 target over four years of its implementation. The three indicators have improved from 70.7%–82.5%–84.9% in 2020–21 to 83.9%–86.6%–97.6% in 2024–25 reflecting gains of 13.2 percentage points in the first 95, 4.1 points in the second, and 12.7 points in the third. In comparison, global progress on these targets during the same period increased by 7, 5, and 4 percentage points respectively, underscoring the impact and effectiveness of NACP-V. These achievements are the result of sustained and strategic efforts under NACP, including dynamic social media outreach, integrated IEC campaigns, youth-driven Red Run events, Integrated Health Campaigns, Index Testing initiatives, and the comprehensive Integrated STI, HIV, TB, and Hepatitis (ISHTH) campaign.

The progress achieved under NACP-V is commendable, yet there is no room for complacency. The seventh edition of Sankalak offers actionable evidence to further strengthen India's response to HIV and STDs. I urge all stakeholders to harness this knowledge repository to accelerate the nation's commitment toward Sustainable Development Goal 3.3 of ending the AIDS epidemic as a public health threat by 2030.

(V. HEKALI ZHIMOMI)

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अपनी एचआईवी अवस्था जानें, निकटतम सरकारी अस्पताल में मुफ्त सलाह व जाँच पाएँ
Know you HIV status, go to the nearest Government Hospital for free Voluntary Counselling and Testing

आज़ादी का अमृत महोत्सव

सत्यमेव जयते

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Preface

'Sankalak: Status of the National HIV and STD Response' is the flagship report of India's National AIDS and STD Control Programme (NACP). The present edition, the seventh in the series, reflects the progress made by the NACP during the FY 2024-25.

In 2024-25, prevention efforts were intensified through the nationwide IEC Campaign (2024–25) and prevention projects, reaching over 2.20 crore people and covering 1.58 crore people from high-risk and bridge populations group, including those in prisons and closed settings. Early detection strategies, including integrated health campaigns and index testing, expanded HIV testing services to 4.13 crore at-risk individuals, while 6.6 lakh contacts of PLHIV were tested with a positivity yield of 4.1%. Significant strides were made in eliminating vertical transmission, with nearly 2.5 crore pregnant women tested for HIV and 2.3 crore for syphilis. Equally noteworthy are the gains in treatment: 18.6 lakh PLHIV are now on lifelong ART, with initiation rates at 97%. Together, these achievements underscore India's unwavering commitment to ending the HIV/AIDS epidemic as a public health threat by 2030.

As in previous editions, Sankalak is organized into two distinct sections. The narrative section, comprising 14 chapters, outlines the magnitude and trends of the epidemic and details the responses across the continuum of prevention, detection, treatment, retention, and suppression, all within the enabling framework of the HIV and AIDS (Prevention & Control) Act, 2017. Complementing this, the factsheet presents data for India and each State/UT, aligned with the themes of the narrative chapters. Wherever possible, the data has been disaggregated by gender, reflecting the guiding principles of NACP Phase-V for a gender-sensitive response.

'Sankalak' is recognised by all stakeholder as the primary evidence source on India's HIV and STD epidemic and response status. With this seventh edition, NACO carry forward the tradition—offering not just data, but a call to collective action. I am confident that the evidence will be used by all Stakeholders to finetune the interventions ensuring an inclusive and compassionate response toward ending of AIDS as a public health threat by 2030.

(Bharti Sahai)

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Message

Evidence-based policymaking and program implementation have been central to India's national AIDS response since its inception. Achieving the goal of ending AIDS as a public health threat by 2030 requires sustained and strengthened efforts grounded in data. 'Sankalak: Status of National AIDS and STD Response', the annual publication of the National AIDS and STD Control Programme (NACP), serves as a critical evidence base, empowering stakeholders to enhance the efficiency and effectiveness of the response.

The seventh edition of 'Sankalak' presents the status of the epidemic and response for 2024–25. As previously, this edition is designed to guide readers through a clear and logical progression—from the history of the epidemic to its current context and the diverse responses it has generated. It comprises 14 chapters, including two new additions that highlight efforts under the Sampoorna Suraksha Strategy and the programme monitoring systems of NACP. The narrative section is complemented by detailed State/UT-specific factsheets to provide a comprehensive picture to the user.

'Sankalak: Status of National AIDS and STD Response' is not only a report but also a testament to India's unwavering commitment to achieving the 2030 SDG target of ending the HIV/AIDS epidemic as a public health threat, thereby ensuring a healthier future for all. I am confident that this publication will serve as a vital resource for stakeholders in advancing the national HIV and STD response. I welcome perspectives, insights, and suggestions that can further strengthen and enrich future editions.

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Acknowledgement

The National AIDS and STD Control Programme (NACP)-Phase V is currently in its fifth year of implementation. Since the commencement of Phase V in 2021-22, the program has maintained its trajectory of success. The present edition of 'Sankalak: Status of National AIDS and STD Response', seventh in the series, provides a comprehensive data-driven report on the advancements achieved under NACP in FY 2024-25. The encouragement, engagement, and participation of all NACO officials have been instrumental in the development and publication of this edition. We extend our sincere gratitude to everyone for their valuable contributions.

The development and publication of 'Sankalak' have been fully institutionalized by NACO under the leadership and guidance of Ms. V. Hekali Zhimomi (Additional Secretary & Director General, NACO) and Ms. Bharati Sahai (Director, NACO). We sincerely thank the leadership of NACO for their continued mentorship and support in the development of this edition. NACO's leadership support was complemented by guidance from programme division on data and narratives.

The guidance and mentorship of Dr Tanzin Dikid (DDG and Head-Strategic Information) for advancing the Strategic Information initiatives is acknowledged with deep gratitude.

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Finally, we extend our sincere gratitude to all Project Directors of SACS. We acknowledge the valuable contributions of peer educators, outreach workers, counsellors, nurses, laboratory technicians, and medical officers at NACP's facilities for their efforts in generating substantial evidence documented in the seventh edition of 'Sankalak'.

Sunny

(Dr Sunny Swarnkar)

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ABBREVIATIONS

AAP	Annual Action Plan
AEP	Adolescent Education Programme
AIDS	Acquired Immunodeficiency Syndrome
AIIMS	All India Institute of Medical Science
ANC	Anti-Natal Care
ANI	Andaman & Nicobar Islands
ANM	Auxiliary Nurse Midwifery
ARD	Anorectal Discharge
ART	Antiretroviral Therapy
ARTCs	Antiretroviral Therapy Centers
ARV	Antiretroviral Prophylaxis
ATF	Addiction Treatment Facilities
ATT	Anti-Tuberculosis Treatment
BPG	Benzathine Penicillin G
CARGs	Community-based ART refill groups
CBOs	Community Based Organisation
CD4	Cluster of Differentiation 4
CHCs	Community Health Centers
CLHIV	Children Living with HIV
CoE	Centre of Excellence
COVID-19	Coronavirus Disease of 2019
CPT	Cotrimoxazole Preventive Therapy
CSC	Care and Support Centre
CST	Care Support and Treatment
CTD	Central TB Division
DACS	District AIDS Control Society
DAPCU	District AIDS Prevention and Control Unit
DDAP	Drug De-Addiction Program
DIC	Drop-in Centre
DISHA	District Integrated Strategy for HIV and AIDS
DNH & DD	Dadra Nagar Haveli and Daman Diu

DSRC	Designated STI/RTI Centers
DTCs	Drug Treatment Clinics
EGASP	Enhanced Gonococcal Antimicrobial Surveillance Programme
EID	Early Infant Diagnosis
EMTCT	Elimination of Mother to Child Transmission
EQA	External Quality Assessment
ESRTs	Experience Sharing, Review and Trainings
EVTHS	Elimination of Vertical Transmission of HIV and Syphilis
FICTCs	Facility Integrated Counselling and Testing Centres
FSW	Female Sex Workers
FY	Financial Year
GAM	Global AIDS Monitoring
GLP	Good Laboratory Practice
GUD – H	Genital Ulcer Disease – Herpetic
GUD – NH	Genital Ulcer Disease – Non-Herpetic
H/TG	Hijra/Transgenders
HCTS	HIV Counselling and Testing Services
HCV	Hepatitis C Virus
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
HIV-1	Human Immunodeficiency Virus-1
HIV-2	Human Immunodeficiency Virus-2
HMIS	Health Management Information System
HRGs	High-Risk Groups
IB	Inguinal Bubo
ICMR	Indian Council of Medical Research
ICTC	Integrated Counselling and Testing Centre
IEC	Information Education and Communication
ILC	Inter-Laboratory Comparison
IMR	Incidence Mortality Ratio
IPC	Interpersonal Communication Counselling
IPR	Incidence Prevalence Ratio
IPT	Isoniazid Preventive Therapy
ISO	International Organisation for Standardisation
ITS	Index Testing Services
JWG	Joint Working Group
KKs	Kshamta Kendras
KPs	Key Populations

LAC	Link ART Centre
LAP	Lower Abdominal Pain
LFA	Legislative Forum on AIDS
LFU	Lost to follow-up
LTBI	Latent TB Infection
LWS	Link Worker Schemes
M&E	Monitoring and Evaluation
MD	Managing Director
MMD	Multi-Month Dispensing
MoHFW	Ministry of Health and Family Welfare
MoSJE	Ministry of Social Justice and Empowerment
MoUs	Memorandum of Understanding
MPR	Monthly Progress Report
MSM	Men who have Sex with Men
MTB	Mycobacterium tuberculosis
MTCT	Mother to Child Transmission
NACO	National AIDS Control Organisation
NACP	National AIDS and STD Control Programme
NAPDDR	National Action Plan for Drug Demand Reduction
NCDs	Non-Communicable Diseases
NCERT	National Council of Educational Research and Training
NDDTC	National Drug Dependence Treatment Centre
NDLS	National Distance Learning System
NEDL	National Essential Diagnostics List
NGOs	Non-Governmental Organizations
NHAK	Naga Hospital Authority-Kohima
NHM	National Health Mission
NIMHANS	National Institute of Mental Health and Neuro Sciences
NIRBI	National Institute for Research in Bacterial Infections
NIRT	National Institute for Research in Tuberculosis
NITRD	National Institute of TB and Respiratory Diseases
NITVAR	National Institute of Translational Virology and AIDS Research
NMC	National Medical Commission
NMHP	National Mental Health Program
NORMS	National Online Reporting and Monitoring System
NPCDCS	National Program for Non-Communicable Diseases
NRLs	National Reference Laboratories

NTEP	National Tuberculosis Elimination Programme
OIs	Opportunistic Infection
OOMF	Output Outcome Monitoring Framework
ORWs	Outreach Workers
OSCs	One Stop Centres
OST	Opioid Substitution Therapy
OSTC	Opioid Substitution Therapy Centers
OVP	Other Vulnerable Population
P&OCS	Prison and Other Closed Settings
PCR	Polymerase Chain Reaction
PHCs	Primary Health Centers
PIP	Programme Implementation Plan
PITC	Provider-Initiated Testing and Counselling
PLHIV	People Living with HIV
p-MPSE	Programme Mapping and Population Size Estimations
PMSMA	Pradhan Mantri Surakshit Matritva Abhiyan
PMTCT	Prevention of Mother to Child Transmission
PPP	Public Private Partnership
PPTCT	Prevention of Parent-to-Child Transmission
PSACS	Punjab State AIDS Control Society
PSS	Painful Scrotal Swelling
PT	Proficiency Testing
PW	Pregnant Women
PWID	People Who Inject Drugs
PWLHIV	Pregnant Women Living with HIV
QMS	Quality Management Services
RCH	Reproductive and Child Health
RDT	Rapid Diagnostic Test
RMNCAH+	Reproductive Maternal New-born Child Adolescent Health Plus
RMNCAH+N	Reproductive Maternal New-born Child Adolescent Health Plus Nutrition
RPR	Rapid Plasma Reagin
RRC	Red Ribbon Club
RSL	Regional STI Laboratories
RT	Re-Testing
SACS	State AIDS Control Society
SBCC	Social and Behaviour Change Communication
SCA	State AIDS Council

SCs	Sub-Centers
SDGs	Sustainable Development Goals
SDNS	Secondary Distribution of Needle and Syringes
SNCU	Special New-born Care Unit
SNS	Social Network Strategy
SOCH	Strengthening Overall Care for HIV beneficiaries
SPD	State Prison Department
SPSR	Sri Potti Sriramulu Nellore District
SRLs	State Reference Laboratories
SSKs	Sampoorna Suraksha Kendras
SSL	State STI Laboratories
SSS	Sampoorna Suraksha Strategy
STD	Sexually Transmitted Diseases
STI/RTI	Sexually Transmitted Infection/ Reproductive Tract Infection
TAT	Turnaround Time
TB	Tuberculosis
TI	Targeted Intervention
TNA-PCR	Total Nucleic Acid- Polymerase Chain Reaction
TPHA	Treponema Pallidum Hemagglutination Assay
TS/TG	Transexual/Transgender
TWG	Technical Working Group
UB	Uncertainty Bound
UD	Urethral Discharge
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNODC	United Nations Office on Drugs and Crime
UTs	Union Territories
VCD	Vaginal/Cervical discharge
VDRL	Venereal Disease Research Laboratory test
VHSND	Village Health, Sanitation, and Nutrition Day
VL	Viral load
WBFPT	Whole Blood Finger Prick Test
WCD	Women and Child Development
WHO	World Health Organisation
WLHIV	Women Living with HIV

EXECUTIVE SUMMARY



EXECUTIVE SUMMARY



Background

1. The Government of India is currently implementing National AIDS & STD Control Programme-Phase V (NACP-V) as a fully funded Central Sector Scheme for the period from 1 April 2021 to 31 March 2026. The programme aims to reduce annual new HIV infections and AIDS-related deaths by 80% compared to the 2010 baseline. Key goals also include ensuring universal access to high-quality STI services for vulnerable and at-risk populations, achieving the dual elimination of vertical transmission of HIV and syphilis, and eliminating HIV/AIDS-related stigma.

2. 'Sankalak – Status of National AIDS & STD Response' is the annual publication of the NACP) presenting progress toward the 2030 goal of ending AIDS as a public health threat. It provides comprehensive programmatic and epidemiological data at both national and State/UT levels. The current seventh edition documents the national and State/UT-wise progress up to 2023-24.

Epidemic Status

3. HIV epidemic in India continues to be low with adult HIV prevalence of 0.20% [Uncertainty Bound (UB): 0.17–0.24] in 2024. While overall prevalence is low, India has 25.61 lakh (UB: 21.89-30.67) people living with HIV (PLHIV), the second largest PLHIV size globally. The annual HIV incidence rate continues to be very low at 0.05 per 1000 uninfected population.

4. India continues to have a concentrated HIV epidemic nationally, with significantly higher prevalence among key and vulnerable populations compared to the overall adult population. In 2024, people who inject drugs (PWID) had the highest sero-prevalence at 8.79%, followed by Hijra/Transgender (H/TG) persons at 2.84%, and men who have sex with men (MSM) at 2.12%.

5. In 2024–25, 73% of newly detected HIV-positive persons reported acquiring the infection through heterosexual transmission. Injecting drug use accounted for 11.5% of reported transmissions. Another 5.4% of cases were attributed to homosexual/bisexual transmission, while 3.5% were due to vertical transmission.

Progress on 95-95-95

6. Attainment of the 95-95-95 targets (95% of PLHIV should be aware of their status, 95% of those aware of their status should be receiving treatment, and 95% of those on treatment should have achieved viral suppression) are critical target under NACP. Achieving these coverage milestones is essential outcome requirement for attainment of SDG 3.3 of ending AIDS as a public health threat by 2030.

7. NACP-V has made significant progress on the 95s target over four years of its implementation. The progress on these targets have increased from 70.7%-82.5%-84.9% in 2020-21 to 83.9%-86.6%-97.6% in 2024-25. Newer initiatives of Integrated Health Campaigns, Index Testing Campaigns and Integrated IEC Campaigns have been fundamental to drive the progress on 95s in NACP-V.

Prevention of New Infections

8. Prevention of new HIV infections is the primary goal under NACP. The programme made significant advancement on the goal through a dynamic multimedia approach promoting positive health behaviours, focus on 'at-risk'

clients through Sampoorna Suraksha Strategy (SSS), and targeted interventions for high-risk group and bridge population through prevention projects. The programme continued to leverage social media for awareness, dialogue, and community mobilisation and reached out to 6 million people on Facebook, 7 million on Instagram, and recorded over 1 lakh impressions per month on X. The National Toll-Free AIDS Helpline 1097 recorded 4,32,474 calls in 2024-25 providing round the-clock assistance in 16 languages. The Intensified IEC Campaign, implemented nationwide, reached over 22 million people across the country.

9. The number of Sampoorna Suraksha Kendra (SSK) under SSS increased from 150 in March 2024 to 250 in March 2025 across 27 States/ UT. These SSKs provided cyclical prevention services, including repeat HIV testing, syphilis and hepatitis screening, STI/RTI management, and partner services to 2.01 lakh 'At-risk' HIV-negative clients.

10. NACP continued to provide services to the high-risk group and bridge populations group of FSW, MSM, PWID, H/TG people, inmates in prisons and other closed settings, migrants and transport workers through prevention projects of Targeted Interventions Projects (TI), Link Worker Schemes (LWS), Opioid Substitution Therapy (OST) centres, and interventions in Prison and Other Closed Settings (P& OCS). In total, around 1.58 crore persons were covered in 2024-25 through various prevention projects under programme including through interventions in prisons and OCS.

11. Sustained efforts under the NACP have led to a continued decline in annual new HIV infections in India. Between 2010 and 2024, new infections decreased by 48.7%, compared to a global decline of 40% over the same period.

Promoting universal access to quality STI/RTI services to at-risk and vulnerable populations

12. Sexually transmitted infections (STI) pose a significant challenge to sexual health and reproductive health of an individual. STIs also increase the risk of HIV infection. Given the context, NACP-V aims to ensure universal access to quality STI/RTI services for at-risk and vulnerable populations in the country. In 2024-25, around 1.12 crore STI/RTI episodes were managed in NACP.

13. Syphilis sero-positivity among clients visiting at Designated STI/RTI Centres (DSRC) was 0.94% in 2024-25. Syphilis-seropositivity was noted at 0.60%, 0.70%, and 0.94% for the years 2021-22, 2022-23, and 2023-24 respectively. Total 44 lakh HIV screening was done at DSRC with a reactivity of 0.29%.

Augmenting early HIV detections

14. NACP-V has promoted strategic shift toward high-yield HIV testing modalities like Index Testing (offering HIV testing to spouses, biological children, and partners of people living with HIV) to augment early case detections. Mobile and bike-based outreach activities aimed at bridging service gaps in hard-to-reach and underserved populations has further strengthen the efforts for early case detections.

15. Overall, 4.13 crore HIV tests among at-risk clients was done in 2024-25 with an overall Sero-positivity of 0.40%. Of the total HIV tests conducted, 43% were at screening sites, though with a lower reactivity of 0.19%. At ICTCs, provider-initiated testing accounted for 43% of all tests with a positivity of 0.57%, while walk-in clients represented 14% of tests but contributed the highest positivity at 1.1%. This underscores the importance of self-risk perception and need for promoting the self- risk assessment promoting the early detections.

16. A total of 12.1 lakh PLHIV were offered Index Testing Services, of whom 10.8 lakh accepted the same. Overall, 6.6 lakh contacts (spouses/ partners and children) were tested, yielding a positivity of 4.1% nationally.

Augment early initiation and retention on lifelong ART

17. Augmenting early initiation and sustained retention on lifelong antiretroviral therapy (ART) remains key to reducing AIDS-related

mortality. NACP has strategically prioritized these interventions, significantly transforming the landscape of HIV care, support, and treatment services across India. Over the years, NACP has established a robust and expansive network of ART centres, increasing from 25 centres in March 2005 to 800 centres by March 2025.

18. As a result of strategic scale-up, number of on-ART PLHIV at NACP facilities increased from 0.07 lakh in March 2025 to 17.54 lakh in March 2025. Besides, 1.06 lakh PLHIV are estimated to be on-ART in private sector. Overall, there were 18.60 lakh on-ART PLHIV in March 2025 in India.

19. At national level, ART initiation in FY 2024–25 remained high at 97%. The 12-month retention among newly registered PLHIV was at 94% in 2024-25. Models like Multi- Month Dispensing (MMD), Linkage ART Clinics (LAC), and Community ART Refill Groups (CARG) has been expanded under NACP Phase V to bring services closer to PLHIV, ease the burden on ART centres, and enhance treatment adherence.

20. As a result of concerted efforts under programme, the AIDS-related mortality reduced by 81.40% between 2010 and 2024 in India. Globally, AIDS-related mortalities have declined by 54% in the same reference period.

Elimination of Vertical Transmission of HIV and Syphilis (EVTHS)

21. Government of India has intensified efforts towards elimination of vertical transmission of HIV and Syphilis as one of the five high level goals of NACP. As a result, testing of pregnant women for HIV and syphilis increased from 76% and 54% respectively in 2020-21 to 84% and 77% in 2024-25. ART coverage among HIV-positive mothers against the estimated need was as high as 94%. Eighty-six percent of the diagnosed syphilis positive women received treatment.

22. NACP-V has made significant progress on attainment of eliminating vertical transmission of HIV. The overall transmission rate reduced to 10.25% (UB:6.74-16.77) in 2024-25, down from more than 25% in 2020-21 underlining significant gains.

Elimination of HIV/AIDS-related Stigma and Discrimination

23. The Government of India has enacted the HIV and AIDS (Prevention & Control) Act, 2017 to address the challenges associated with HIV and AIDS. The legislation is designed to prevent the spread of HIV, protect the rights of those affected and ensure dignity and equal access to services. It prohibits stigma and discrimination against people living with HIV/AIDS while also safeguarding the rights of healthcare providers.

24. As on March 2025, 29 States/UT have notified the Rules with respect to HIV and AIDS (Prevention & Control) Act, 2017. Ombudsmen are in place in 34 States/UT while 33 States/UT have deputed/ designated Complaints Officer.

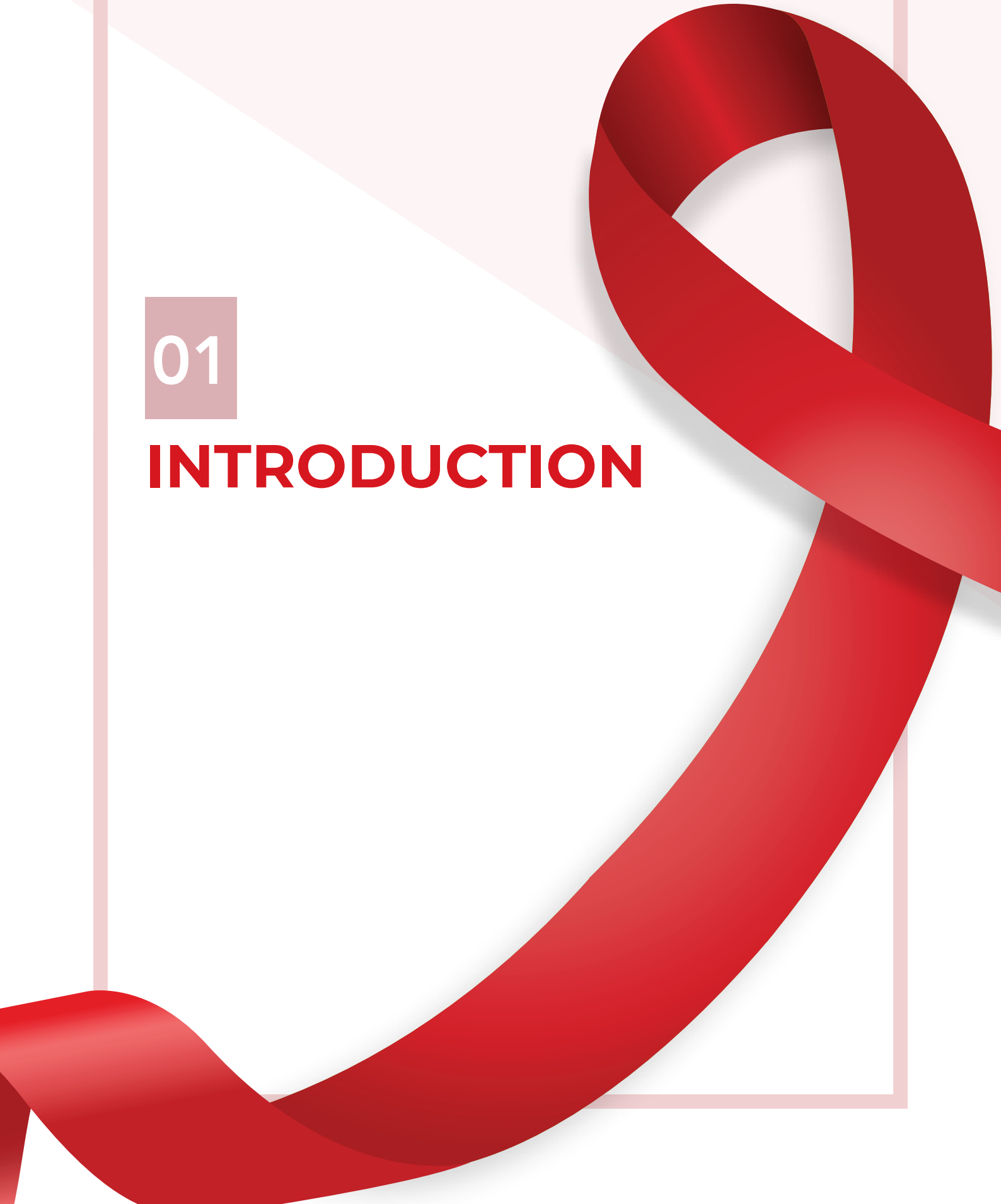
Laboratory Services

25. Quality laboratory services are integral to NACP with millions of tests being performed annually for HIV diagnosis as well as treatment monitoring. This is ensured through effective quality management systems (QMS) and adherence to international standards. Both of State Reference Laboratories and Integrated Counselling and Testing Centres (ICTC) showed a concordance result of 99.6% in panel testing for HIV serology.

26. HIV-1 Viral load testing is a key service under programme to enables the monitoring of treatment effectiveness, detection of treatment failure, and the need to switch to second-line ART drugs thus, reducing drug resistance mutations and improving clinical outcomes. Overall, 15.98 lakh viral load testing was done in 2024-25, significantly higher than the 10.33 lakh tests done in 2021-22.

01

INTRODUCTION



INTRODUCTION

1.1. Background

Over the past 34 years, India's response to the HIV/AIDS epidemic has been characterized by dedicated efforts through phase wise manner, strategic interventions, and unwavering resilience. During the journey, the utilization of data-driven reports has become an indispensable tool for monitoring and enhancing the effectiveness of the response.

'Sankalak: Status of National AIDS and STD Response' is a comprehensive document to provide a clear, data-driven overview of India's current position in combating HIV/AIDS and STIs guiding future strategies. The first edition was published in December 2017 comprising the annual data for the FY 2016-17 on key performance indicators under the different components of NACP (IEC, Prevention, Care and Support, VL testing and suppression). Since then, six editions have been released as annual flagship publications of the National AIDS Control Programme (NACP), coinciding with World AIDS Day (December 1st). All these six publications serve as crucial evidence tools as well as aide-memoire for policymakers, program managers, healthcare providers, researchers and other stakeholders, offering detailed analyses of the current status of the HIV/AIDS response. The current edition, the seventh in the series, aims to update progress of the NACP through the year 2024-25.

1.2. Organization of the report

This report, as in previous rounds, is structured to present a clear and logical progression of the epidemic's history, its present context, and the multifaceted responses it has elicited. The current publication comprises 14 chapters and State/UTs factsheet on epidemic status and key performance indicators (figure 1.1).

The Chapter two provides an overview of the HIV/AIDS epidemic at national, State, and district levels, covering past trends and future projections. Chapter 3 explores into national and State/UT-level progress on the 95-95-95 indicators for the reference period. It also details national treatment cascade progress using PLHIV size estimates as the denominator for all indicators and includes global progress for reference.

Chapter 4 provides the progress in the Information, Education, and Communication (IEC) component, including the operation of the 1097 national helpline, RRCs, AEP and the implementation of the HIV and AIDS (Prevention and Control) Act of 2017. Chapter 5 details the progress on Sampoorna Sureksha Strategy through SSKs for at- risk negative population, spouse/partners of PLHIVs, and follow-up of HRGs. Chapter 6 probes on the preventative measures taken by NACP to reduce new infections among high-risk groups and bridge populations through targeted intervention (TI) projects, link worker schemes (LWS), and initiatives within the prison &OCS system.

While Chapter 7 summarises, the progress made in the management of sexually transmitted infections (STIs)/Reproductive Tract Infections (RTIs), Chapter 8 specifics the early detection of HIV and progress made under HIV Counselling and Testing Services for individuals other than Pregnant and breastfeeding mother. The care, support and treatment services for PLHIVs are covered in Chapter 9, whereas the management of HIV-TB co-morbidities among PLHIVs is summarized in Chapter 10, and this chapter builds upon the detailed data on HIV-TB co-infections documented under NACP and offers insights into the prevention, early detection, and subsequent treatment of TB/HIV, as well as the management of special cases involving TB/HIV.

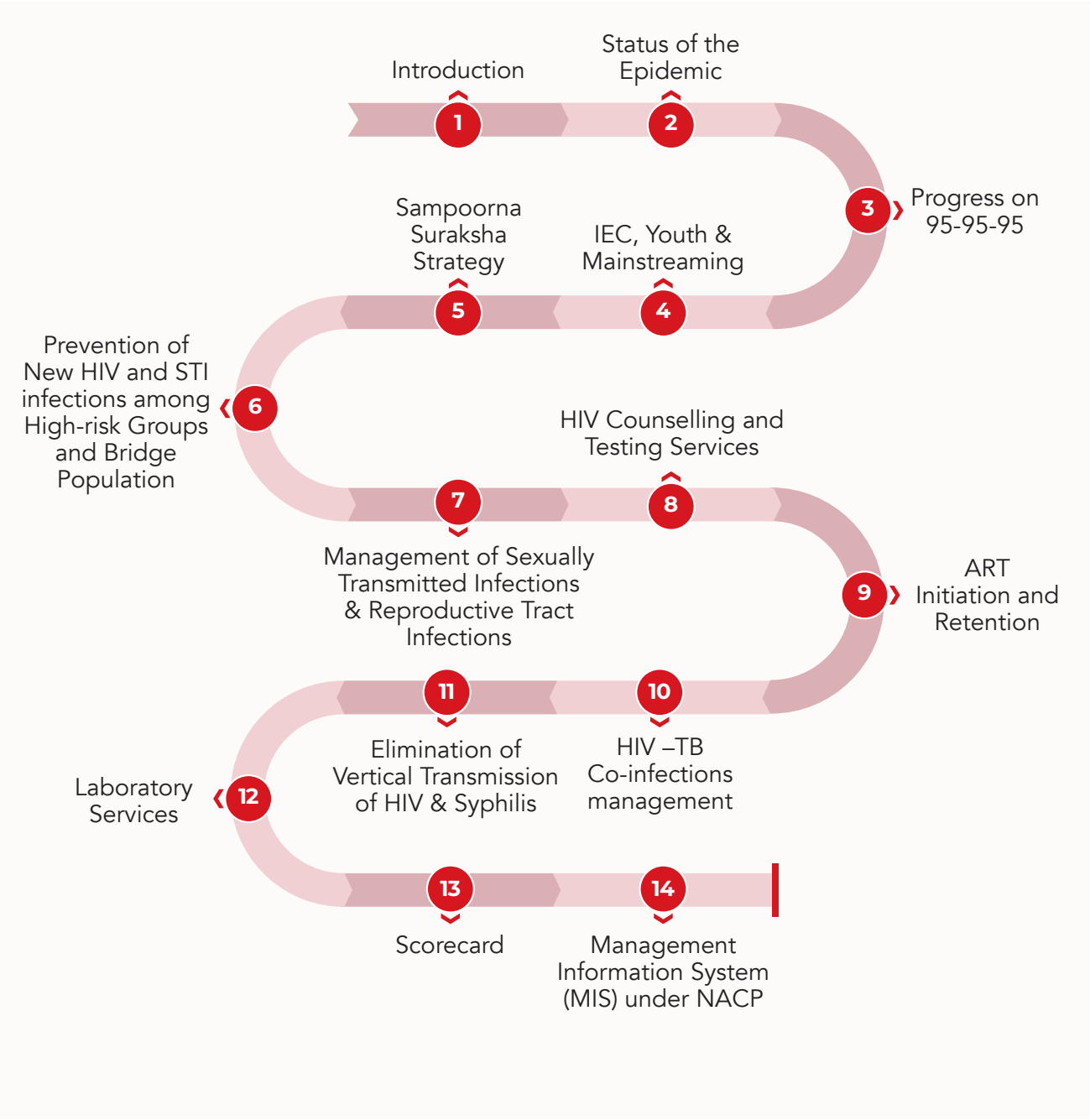
Chapter 11 exclusively focusses the HCTS provided to the Pregnant and breastfeeding mother through NACP and the progress achieved in eliminating vertical transmission of HIV and Syphilis (EVTHS).

Chapter 12 offers a comprehensive overview of the laboratory services, including viral load testing and external quality assessment. Chapter 13 provides the score sheet depicted with colour code for each State/UT, evaluating their performance in the implementation of NACP across all components. The Chapter 14 briefly explains the MIS under NACP w.r.t to importance of SOCH and HMIS under NACP.

Subsequently, data on HIV epidemic level and response in 2024-25 is presented for India and by State/UT. The importance of this factsheet as a ready reckoner cannot be overstated.

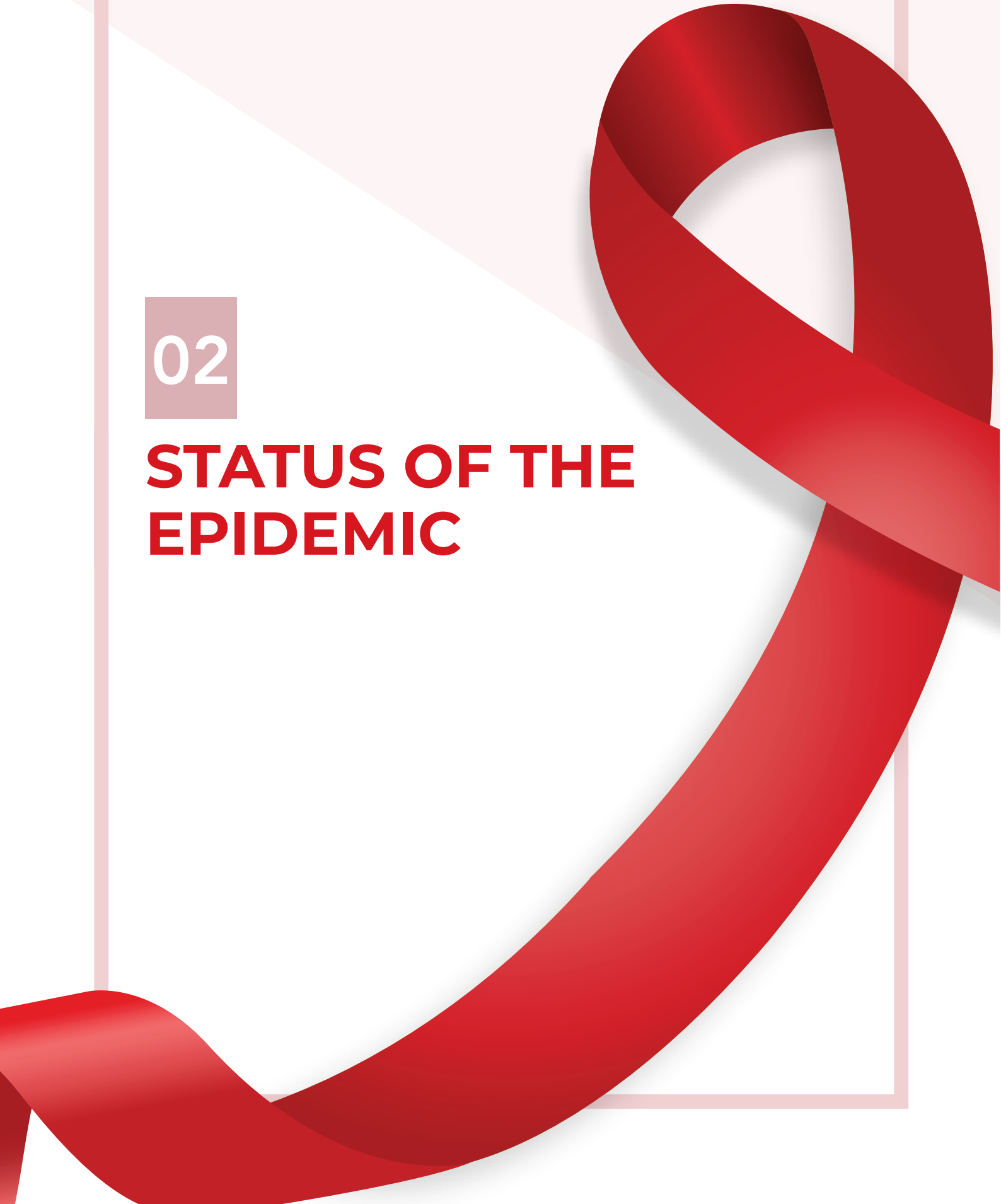
"Sankalak: Status of National AIDS and STD Response" is not merely a report; it is a testament to India's unwavering commitment to achieving the 2030 SDG goal of ending the HIV/AIDS epidemic as a public health threat, thereby ensuring a healthier and brighter future for all.

Figure 1.1 Organisation of the Chapters



02

STATUS OF THE EPIDEMIC



STATUS OF THE EPIDEMIC

2.1. Background

India's HIV epidemic has evolved over the past four decades into a complex and heterogeneous public health challenge, evident through diverse patterns in magnitude and trajectory of the HIV epidemic across geographies and populations groups. This epidemiological diversity underscores the need for sustained vigilance and rigorous implementation. This chapter presents a comprehensive overview of the current state of the HIV/AIDS epidemic in India and across state/UTs. It describes the levels and trends in key epidemiological indicators quantifying the impact of programme interventions and highlight geographic areas and population groups that require further focus. As Country advances toward the goal of ending AIDS as a public health threat by 2030, these epidemiological updates are critical for guiding strategic action accelerating the progress.

2.2. Overview

Global and national scenario

India's epidemic presents a distinct profile within the global HIV/AIDS epidemic landscape reflected in low national prevalence and high absolute burden but with significant sub-national variations. In 2024, global adult HIV prevalence was estimated at 0.70% [Uncertainty Bound (UB): 0.60–0.80], whereas India's national adult prevalence was estimated at 0.20% (UB: 0.17–0.24) (table 1)[1,2]. India's national HIV prevalence is comparable to the regional average for Asia and the Pacific (0.20%, UB: 0.20–0.30) but remains lower than that of several countries in the region. Papua New Guinea (1.50%, UB: 1.30%-1.70%), Thailand (1.00%, UB: 0.80%-1.20%), Fiji (1.00%, UB: 0.80%-1.60%), Myanmar (0.90%, UB: 0.70%-1.10%) and Cambodia (0.50%, UB: 0.40%-0.60%) were estimated to have much higher prevalence rates than India's national average.

Despite the lower prevalence, an estimated 25.61 lakh (UB: 21.89-30.67) people were living with HIV (PLHIV) in India in 2024, contributing 6.3% of the global HIV burden of 4.08 crore (UB:3.70-4.56) and 37.1% of 69 lakh (UB:62-78) PLHIV in Asia-Pacific Region. In 2024, India's PLHIV size was second only to South Africa (78 lakh, UB:72-85) on account of its population size.

Table 2.1. Overview of HIV epidemic: Global, Asia and the Pacific and India, 2024

Indicator	Global	Asia and the Pacific	India
Adult (15-49) prevalence	0.70% (UB:0.60-0.80)	0.20% (UB:0.20-0.30)	0.20% (UB:0.17-0.24)
People living with HIV	4.08 crore (UB:3.70-4.56)	69 lakh (UB:62-78)	25.61 lakh (UB: 21.89-30.67)
HIV incidence per 1000 uninfected population	0.16 (UB:0.13 - 0.21)	<0.1 (UB:<0.1 - <0.1)	0.05 (UB:0.03-0.08)
Annual new infections	13 lakh (UB:10.00-17.00)	3.00 lakh (UB:2.60 - 3.70)	64.47 thousand (UB:42.96-105.11)
Change in annual new infections since 2010	-40.00%	-17.00%	-48.69%
Annual AIDS-related deaths	6.30 lakh (UB: 4.90-8.20)	1.50 lakh (UB:1.10-2.00)	32.16 thousand (UB: 21.47-49.95)
Change in annual AIDS-related deaths since 2010	-54.00%	-53.00%	-81.42%

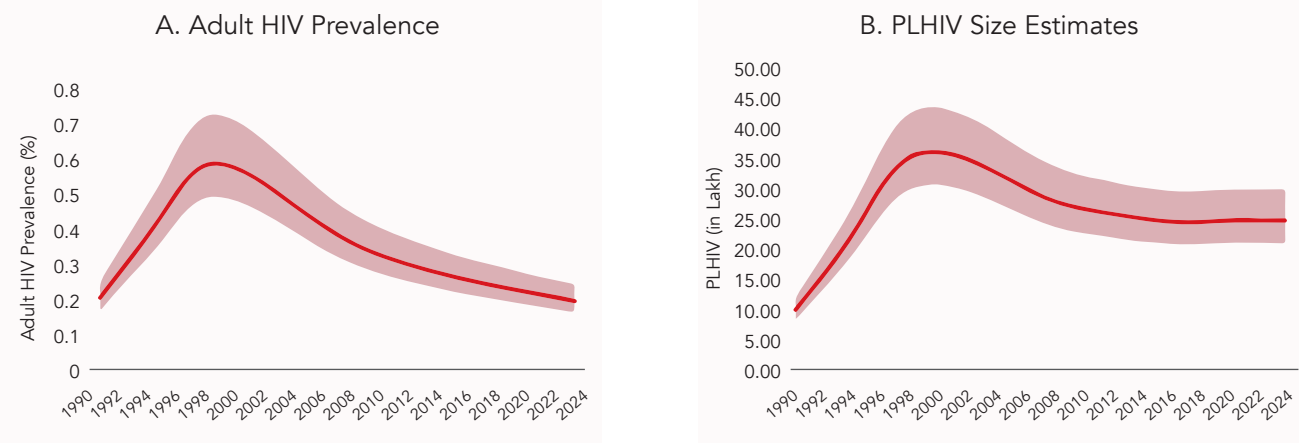
[1] UNAIDS 2025 estimates

[2] India HIV Estimates 2025

2.3. National-level trend

HIV/AIDS epidemic in India peaked during 1997-1998 at around 0.58%-0.59% and then started to decline (figure 2.2). The adult prevalence declined to around 0.44% in 2005, 0.33% in 2010, 0.27% in 2015 and 0.23% in 2020. The PLHIV size peaked at 39 lakh and then declined to around 32 lakh in 2005 and to around 27 lakh in 2010.

Figure 2.1. Level and trend of adult HIV prevalence (in %) and PLHIV size (1990-2024)



In 2024, around 64.47 thousand new HIV infections and 32.16 thousand AIDS-related deaths were estimated to happen nationally, underlining declines of 48.69% and 81.42%, respectively, compared to 2010. These reductions far exceeded the global averages of 40% and 54%. This epidemic trajectory aligns with game changers introduced since 2014, including the "Test and Treat" strategy, Universal Viral Load Testing, and the enactment of the HIV and AIDS Prevention and Control Act (2017). As evident, the declines underscore the impact of several transformative initiatives launched under the NACP over the past decade. In 2024–25, sustained focus on integrated health campaigns targeting HIV, syphilis, hepatitis B, and hepatitis C in priority locations, alongside index testing initiatives for eligible spouses, partners, and biological children of PLHIV, and coordinated IEC campaigns collectively augmented the national response. These efforts facilitated the early identification of previously undiagnosed cases, strengthening outreach and linkage to care.

Consolidated prevention efforts and expanded treatment services have led to a near convergence in the number of new HIV infections and AIDS-related deaths in India (figure 2.2). In this context, the incidence mortality ratio (IMR) and incidence prevalence ratio (IPR) serve as critical epidemiological metrics for projecting the future trajectory of the HIV epidemic[3,4]. India's epidemic currently shows signs of stabilization nationally, but both progress and emerging challenges sub-nationally.

In 2024, the IPR was estimated at 2.52, remaining below the threshold of 3 that signifies a declining epidemic. Sustaining this level is essential for advancing toward elimination (figure 2.3). However, the IMR stood at 1.07, slightly above the threshold of 1, indicating that the decline in AIDS-related mortality is outpacing the reduction in new infections resulting in a gradual expansion of the PLHIV size. To bring the IMR below 1, an indicator of a shrinking epidemic, India must further intensify its prevention efforts. This will be critical to achieving the 2030 goal of ending AIDS as a public health threat.

[3] Ghys PD, Williams BG, Over M, Hallett TB, Godfrey-Faussett P. Epidemiological metrics and benchmarks for a transition in the HIV epidemic. PLoS medicine. 2018 Oct 25;15(10):e1002678.

[4] Kumar P, Das C, Kumar A, Sahu D, Rai SK, Godbole S, Arumugam E, PVM L, Dutta S, Devi HS, Vardhana Rao Mendu V. Diversity in HIV epidemic transitions in India: An application of HIV epidemiological metrices and benchmarks. Plos one. 2022 Jul 18;17(7):e0270886.

Figure 2.2. New HIV infections, deaths and PLHIV size, 1981-2024

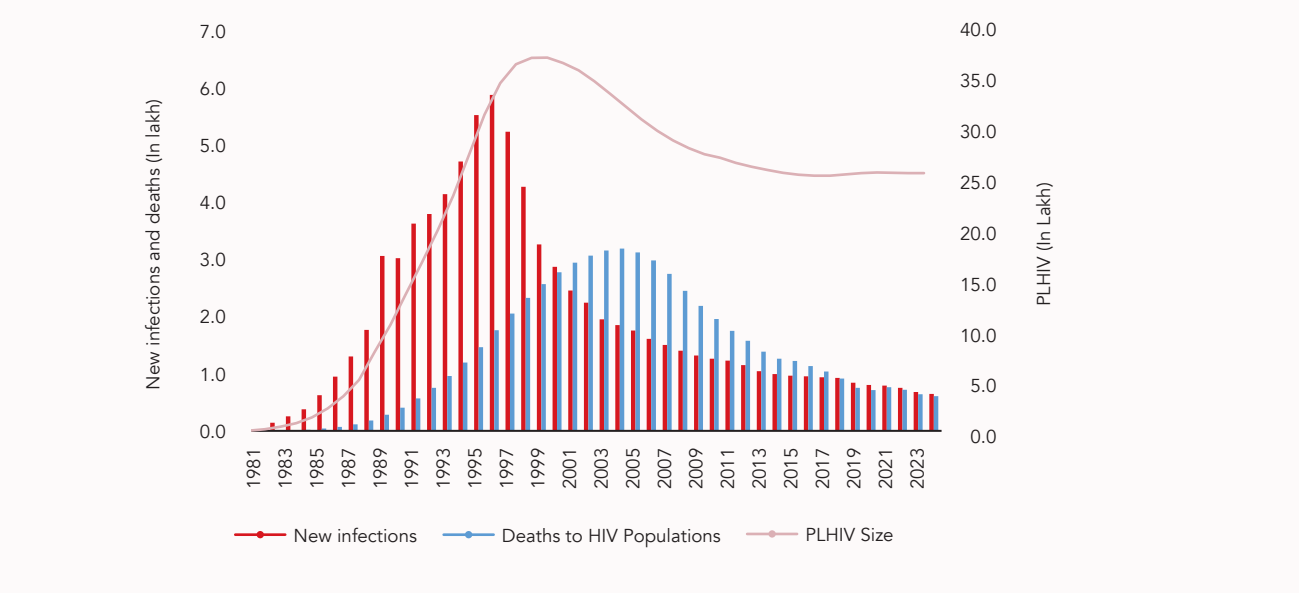


Figure 2.3. HIV epidemic transition in India, 2000-2024



2.4. Route of transmission

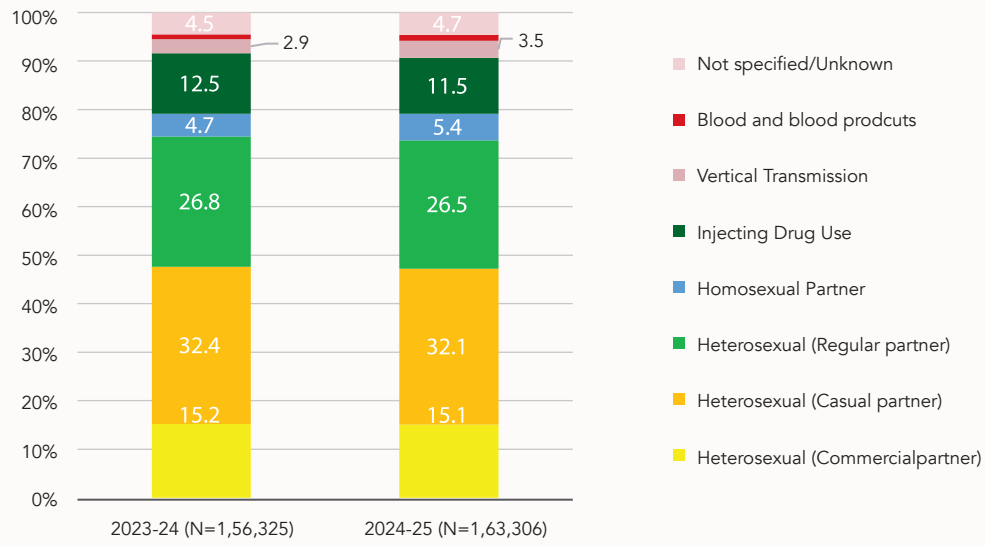
Understanding the probable routes of HIV transmission is central to interpreting the epidemic's drivers and identifying shifts in transmission dynamics over time. This insight is not only essential for epidemiological characterization but also for designing interventions tailored to the emerging epidemic context.

Overall, a total of 1,63,306 valid records were reported in IT-enabled routine programme monitoring information management system (SOCH) of NACP. Analysis of self-reported transmission routes among newly diagnosed PLHIV in 2023–24 and 2024–25 indicates a largely stable pattern, with heterosexual transmission continuing to account for the majority of cases (figure 2.4).

In 2024–25, heterosexual contact through casual partners (32.1%), regular partners (26.5%), and commercial partners (15.1%) collectively comprised over 73% of reported transmissions, indicating the sustained predominance of sexual transmission in India's epidemic profile. Notably, transmission through homosexual partners increased from 4.7% to 5.4%. Transmission via injecting drug use (IDU) route continue to have a significant proportion, while vertical transmission was attributed for 3.5% of newly diagnosed cases. Blood and blood product-related transmission remained low (1.0%-1.2%). The proportion of cases with unspecified or unknown transmission routes remained relatively unchanged (4.5% to 4.7%), highlighting the need for improved data completeness and counselling during diagnosis.

As evident, India's HIV transmission pattern has undergone a gradual but notable shift. While heterosexual transmission continues to dominate, the rising share of infections attributed to IDU establishes an evolving epidemic profile. The proportion of new HIV detections linked to infected needles and syringes has increased markedly from less than 3% in 2017–18 to 11.5% in 2023–24. This trend is particularly concerning given the higher transmission probability associated with needle-sharing compared to sexual routes[5].

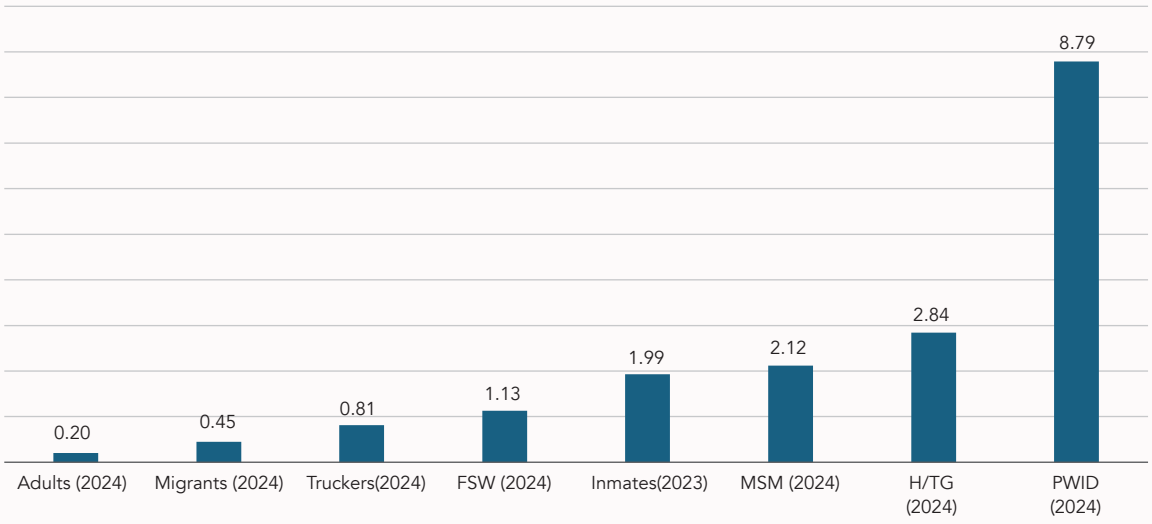
Figure 2.4. Proportional distribution (in %) of newly detected HIV positive cases by route of transmission (self-reported), 2023-24 and 2024-25



2.5. HIV epidemic among key population

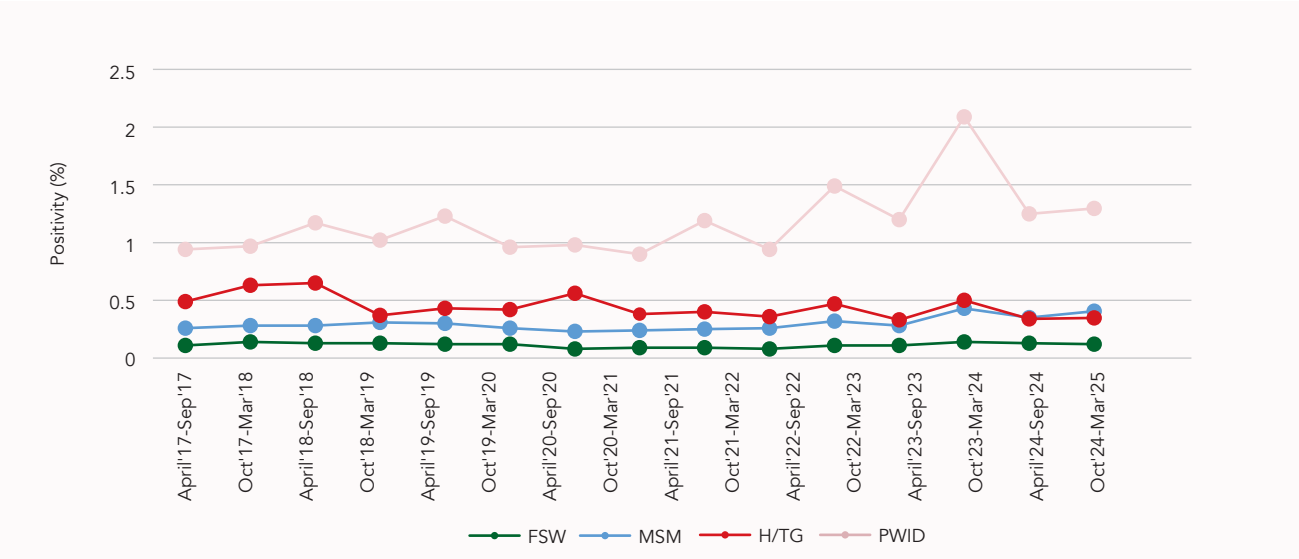
India continues to have a concentrated HIV epidemic nationally with significantly higher prevalence among key and vulnerable populations compared to the overall adult prevalence. People who inject drugs (PWID) reported the highest sero-prevalence at 8.79%, followed by Hijra/Transgender (H/TG) persons (2.84%) and men who have sex with men (MSM) (2.12%) in 2024, indicating persistent transmission risks in these groups. Inmates also showed higher sero-prevalence at 1.99% in 2023. Among female sex workers (FSW), sero-prevalence was 1.13%, while truckers and migrants recorded sero-prevalence of 0.81% and 0.45%, respectively in 2024 (figure 2.5).

Figure 2.5. HIV prevalence (in %) by population sub-groups, 2023 and 2024



Analysis of HIV testing data from targeted interventions corroborate the higher HIV prevalence among PWID. As evident, the positivity noted among PWID is much higher than the rest of the population group, though with a declining trajectory (figure 2.6). After peaking at 2.09% in April–September 2023, positivity among PWID declined sharply to 0.88% in October 2024–March 2025, marking the lowest level in the entire reference period. At the same time, positivity rates among FSW, MSM and H/TG people have remained relatively consistent.

Figure 2.6. HIV sero-positivity among key population under Targeted Intervention projects, April 2017-March 2025



2.6. State/UT-wise epidemic level and trends

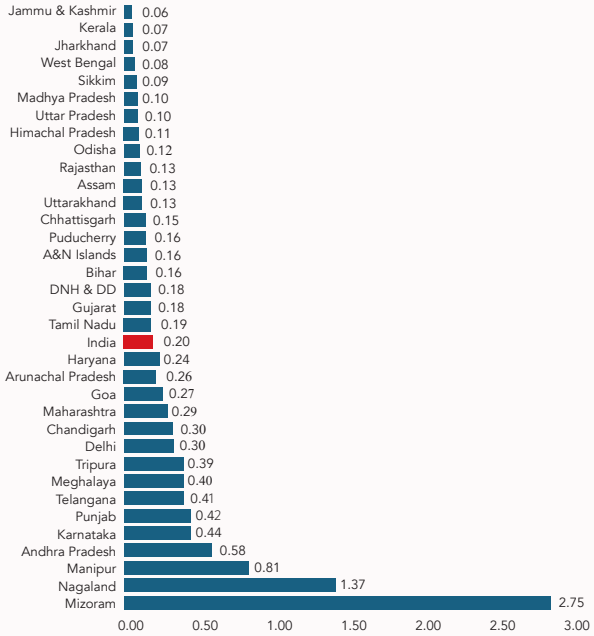
2.6.1. Epidemic levels

India's HIV epidemic continues to have significant geographic diversity, with much higher prevalence and incidence in select states (table 2.2, figure 2.7 to 2.10). Mizoram remains the most impacted state with highest estimated adult HIV prevalence at 2.75% and the highest incidence at 0.9 per thousand uninfected population, far higher than the national averages of 0.20% and 0.05 per thousand uninfected population, respectively. States of Nagaland (prevalence: 1.37%, incidence: 0.42 per thousand uninfected population) and Manipur (prevalence: 0.81%, incidence: 0.17 per thousand uninfected population) also had much higher prevalence and incidence than the national average, reflecting persistent vulnerabilities in these states. Southern states of Andhra Pradesh (0.58%), Karnataka (0.44%), and Telangana (0.41%) continue to have moderate prevalence, but with much lower incidence rates.

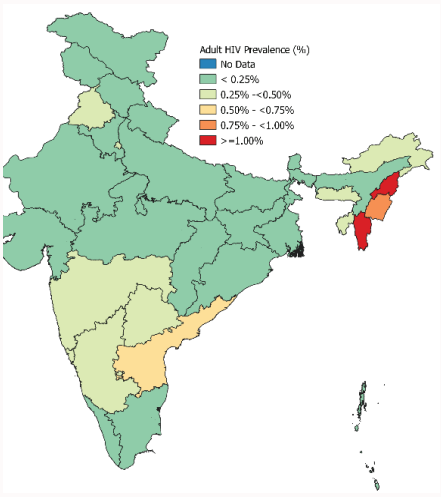
States of Punjab, Tripura, and Meghalaya have moderate prevalence but disproportionately high incidence, indicating active transmission. Arunachal Pradesh also stands out, with an incidence rate nearly four times the national average. Several large states, including Uttar Pradesh, West Bengal, and Madhya Pradesh, are estimated to have low prevalence and incidence. However, these states require sustained interventions, given their population size and the potential for significant increases in disease burden even with marginal rises in transmission.

Figure 2.7. Adult HIV prevalence (%), 2024

Graph



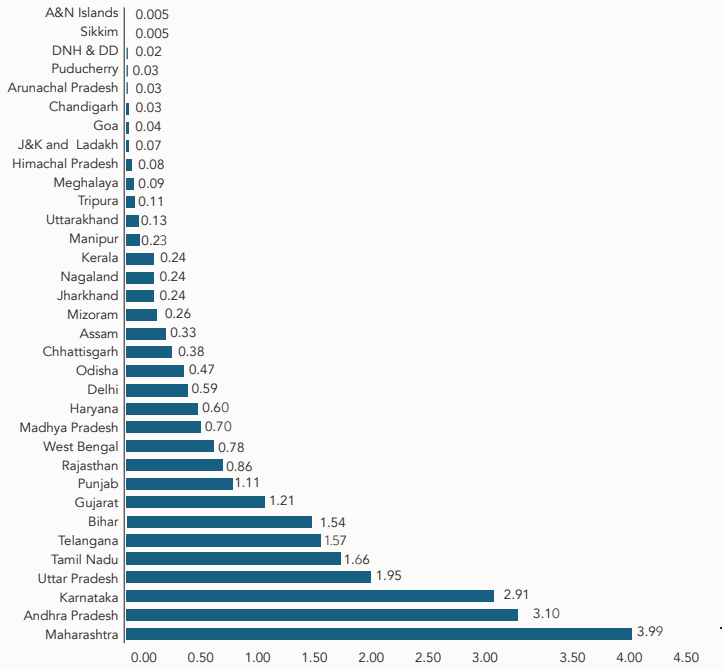
Map



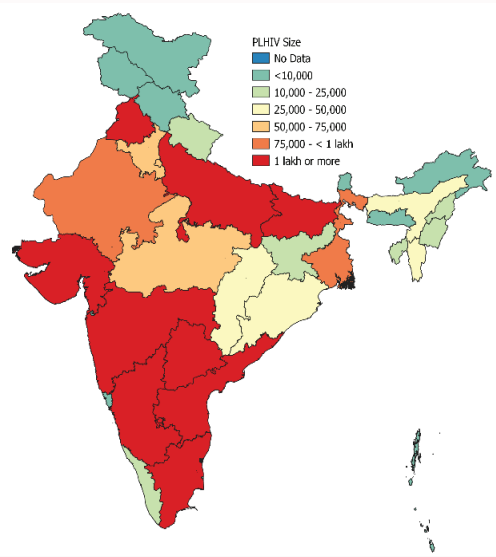
The distribution of total PLHIV size estimates and annual new infections by state/UTs further underscores the heterogeneity of the epidemic. High-burden states of Maharashtra (PLHIV: 399,023; new infections: 5,334), Andhra Pradesh (PLHIV: 3,10,451; new infections: 2,864), Karnataka (PLHIV: 2,91,348; new infections: 4,618), and Tamil Nadu (PLHIV: 1,65,971; new infections: 1,487) were estimated to had relatively low incidence in proportion to their PLHIV size.

Figure 2.8. PLHIV size (In lakh), 2024

Graph



Map



States of Bihar (PLHIV: 1,54,296; new infections: 7,694), Uttar Pradesh (PLHIV: 195,427; new infections: 6,373), and Punjab (PLHIV: 110,715; new infections: 6,785) had relatively high new infections compared to their PLHIV estimates, indicating ongoing transmission risks. States of Arunachal Pradesh, Mizoram, Nagaland, Tripura, and Meghalaya also show high incidence in relation to their PLHIV size estimates, suggesting ongoing high transmission much higher than the national averages.

Figure 2.9. State/UT-wise HIV incidence per 1,000 uninfected population, 2024

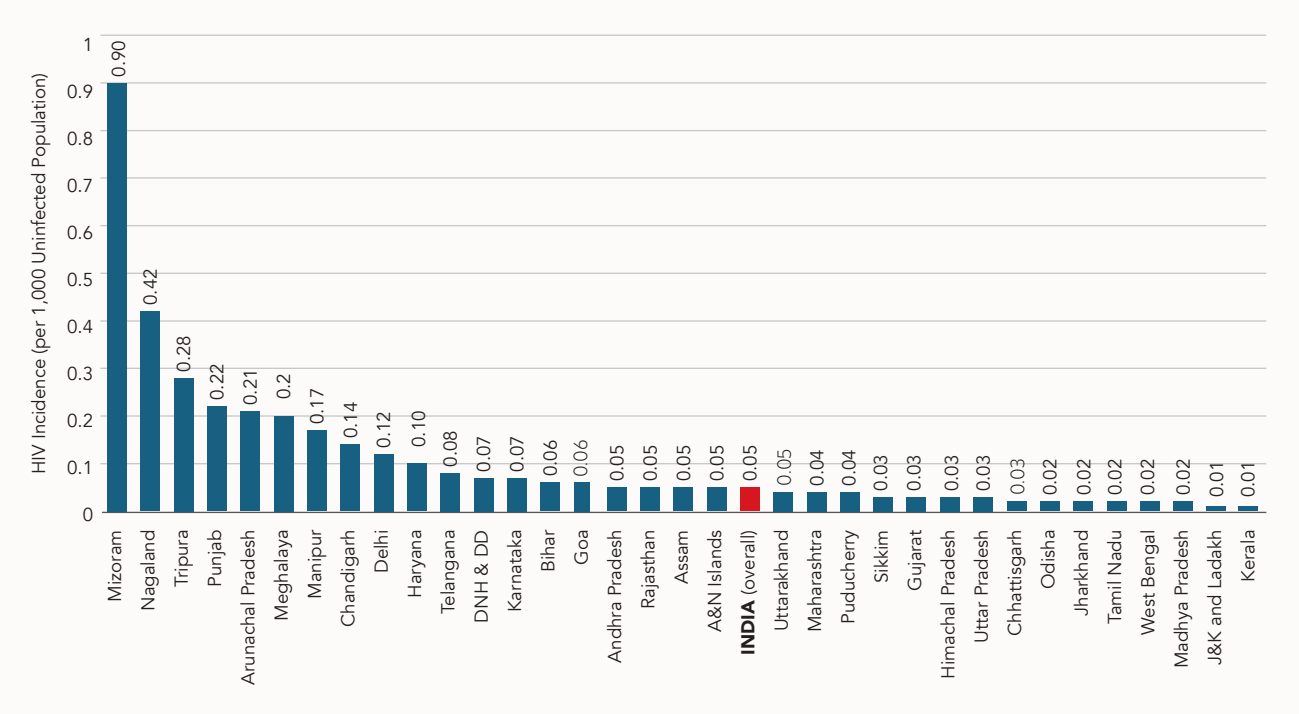
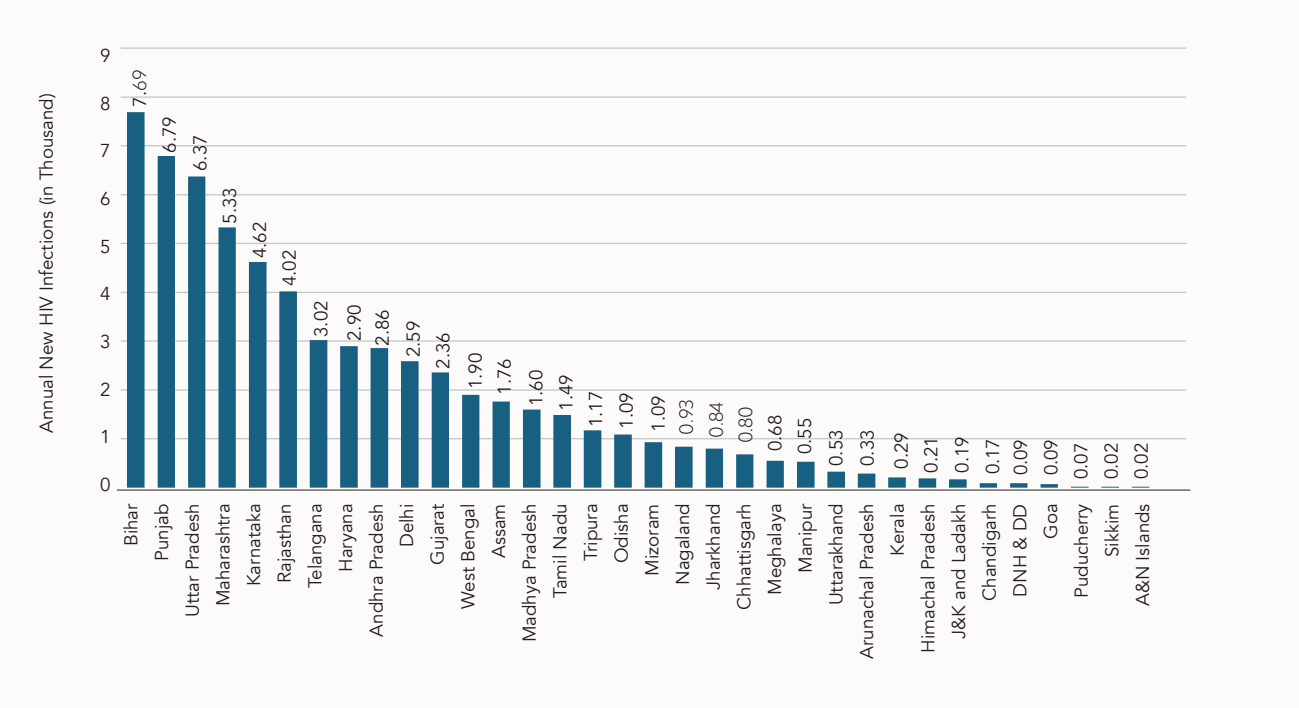


Figure 2.10. State/UT-wise new HIV infections (In 1,000), 2024



2.6.2. District-wise HIV Prevalence (%) and PLHIV Size

The district-level distribution of adult HIV prevalence further underscores the geographic diversity of India's HIV epidemic (figure 2.11-2.12). In 2024, 30 districts were estimated to have an adult HIV prevalence of 1% or more, with 29 of these located in states of Nagaland (11 districts), Mizoram (10), Manipur (5), Meghalaya (2), and Arunachal Pradesh (1). The only other district in this category is in Karnataka.

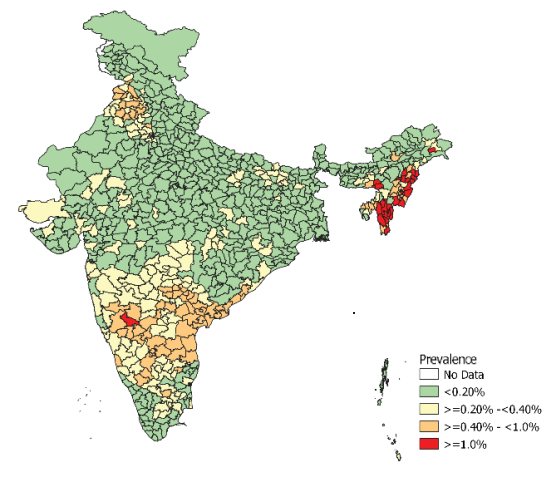
Additionally, 89 districts reported adult HIV prevalence in the range of 0.40% to <1%. Of these, 51 districts are concentrated in Andhra Pradesh (20), Telangana (15), Karnataka (12), Maharashtra (2), and Tamil Nadu (2). Another 19 districts in this category are located in states of Manipur (8), Nagaland (4), Tripura (4), Arunachal Pradesh (1), Meghalaya (1), and Mizoram (1). The remaining 19 districts are in Punjab (13), Delhi (5), and Haryana (1).

In terms of PLHIV size, five districts, three in Maharashtra and two in Karnataka, are estimated to have PLHIV populations exceeding 25,000 each. A total of 43 districts fall in the 10,000 to <25,000 PLHIV category, primarily located in Andhra Pradesh, Karnataka, and Maharashtra. Additionally, 117 districts are estimated to have PLHIV populations in the range of 5,000 to <10,000, including 16 in Karnataka, 13 each in Maharashtra, Tamil Nadu, and Uttar Pradesh, 12 in Bihar, 11 in Telangana, 8 in Punjab, and 7 in Andhra Pradesh.

NACP classify district into high, moderate, low, and very low priority category for programmatic purposes based on the estimated adult prevalence and PLHIV size. A total of 193 districts has been classified as high priority, concentrated primarily in Andhra Pradesh (24 districts), Karnataka (24), Maharashtra (24), Tamil Nadu (15), Telangana (13), Uttar Pradesh (13), Bihar (13), Nagaland (11), and Mizoram (10). These districts align closely with areas of high prevalence, large PLHIV populations, and high incidence. An additional 166 districts fall under the moderate priority category, distributed across states of Gujarat, Punjab, Rajasthan, and Delhi. Further, 181 districts are categorised as low priority, and 222 districts as very low priority.

Figure 2.11. District wise estimated adult prevalence (%), and PLHIV Size, 2024

A. Adult HIV Prevalence (15–49 Years)



B. People Living with HIV (PLHIV)

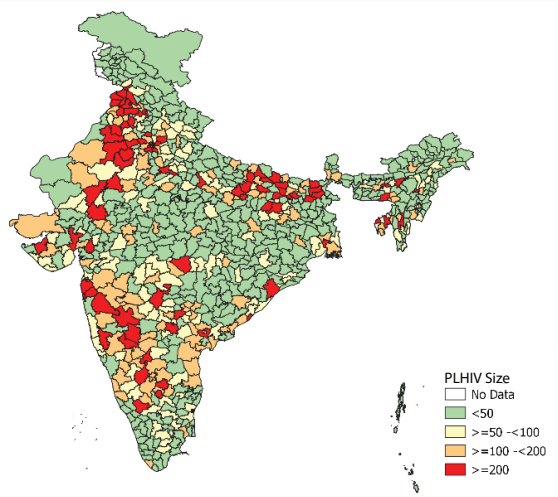
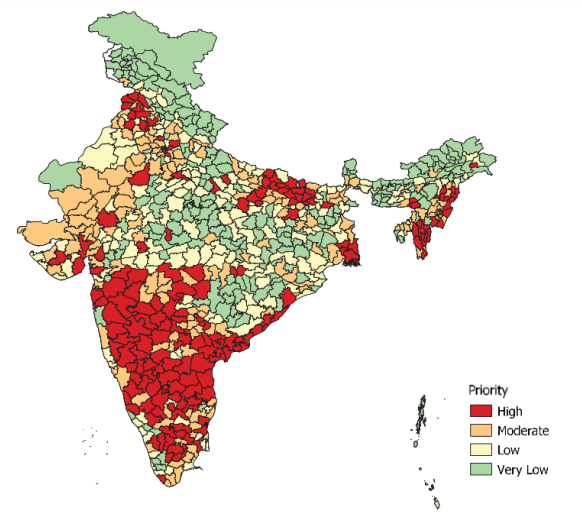


Figure 2.12. District Prioritisation, 2024



Districts Prioritization Category	Description	District (N=762)
High	Adult prevalence of ≥1% or PLHIV size of ≥5,000	193
Moderate	Adult prevalence of 0.4% - <1% or PLHIV size of 2,500 - <5,000	166
Low	Adult prevalence of 0.20% - <0.40% or PLHIV size of 1,000 - <2,500	181
Very Low	Adult prevalence of <0.20% and PLHIV size of <1,000	222

Table 2.2. State/UT-wise HIV prevalence, incidence, mortality, PLHIV Size, IPR and IMR, 2024

State/UT	Adult (15-49 years) HIV Prevalence (%)	PLHIV Size	HIV Incidence per 1,000 Uninfected Population	New HIV Infection	Decline in annual new HIV infection between 2010 to 2024 (%)	IPR	AIDS-related Death per 1,00,000 Population	Annual AIDS Related Deaths	Decline in annual AIDS related deaths between 2010 to 2024 (%)	IMR
A&N Islands	0.16 (0.08-0.34)	501 (247-1042)	0.05 (0.02-0.17)	19 (7-66)	55.81	3.79	1.74 (0.49-5.91)	7 (2-24)	61.11	1.90
Andhra Pradesh	0.58 (0.50-0.69)	310451 (274532-359781)	0.05 (0.04-0.08)	2864 (1858-4382)	76.96	0.92	8.24 (5.80-12.11)	4364 (3070-6414)	88.72	0.35
Arunachal Pradesh	0.26 (0.23-0.32)	2630 (2201-3230)	0.21 (0.16-0.29)	328 (249-448)	-455.93	12.47	1.05 (0.80-1.40)	16 (12-22)	-128.57	13.12
Assam	0.13 (0.11-0.16)	33148 (27985-40737)	0.05 (0.03-0.08)	1757 (1145-2953)	-8.32	5.30	0.68 (0.48-1.05)	243 (173-377)	55	3.82
Bihar	0.16 (0.12-0.20)	154296 (123671-190508)	0.06 (0.04-0.10)	7694 (4607-12982)	11.42	4.99	1.00 (0.64-1.57)	1265 (813-1990)	68.26	2.87
Chandigarh	0.30 (0.19-0.44)	3016 (1950-4389)	0.14 (0.04-0.35)	166 (50-428)	1.78	5.50	2.88 (1.20-7.25)	35 (15-89)	-25	2.96
Chhattisgarh	0.15 (0.13-0.17)	38276 (32928-43530)	0.03 (0.02-0.04)	800 (605-1063)	75.17	2.09	2.74 (1.83-3.79)	827 (552-1146)	71.32	0.64
DNH&DD	0.18 (0.14-0.25)	1923 (1533-2635)	0.07 (0.05-0.12)	93 (59-150)	-78.85	4.84	0.82 (0.55-1.45)	11 (7-19)	81.03	4.65
Delhi	0.30 (0.24-0.37)	59079 (47815-74103)	0.12 (0.07-0.19)	2590 (1507-3969)	27.45	4.38	4.32 (2.14-8.25)	927 (460-1769)	2.11	1.93
Goa	0.27 (0.24-0.37)	4376 (3930-5449)	0.06 (0.04-0.11)	90 (65-172)	18.92	2.06	1.54 (1.11-2.52)	24 (17-40)	95.14	1.53
Gujarat	0.18 (0.17-0.21)	120799 (111207-140041)	0.03 (0.02-0.06)	2362 (1719-4049)	61.3	1.96	0.97 (0.66-1.44)	697 (475-1032)	72.26	1.15
Haryana	0.24 (0.19-0.29)	59642 (47329-71871)	0.10 (0.07-0.13)	2900 (2035-3910)	24.79	4.86	0.89 (0.59-1.28)	269 (178-388)	80.16	3.48
Himachal Pradesh	0.11 (0.09-0.14)	7953 (6635-9422)	0.03 (0.02-0.04)	213 (131-334)	59.66	2.68	0.62 (0.44-0.86)	46 (32-64)	89.33	1.57
Jammu & Kashmir Ladakh	0.06 (0.04-0.08)	6766 (4996-9173)	0.01 (0.008-0.03)	194 (107-417)	71.8	2.87	0.90 (0.44-1.79)	122 (59-242)	57.79	1.08
Jharkhand	0.07 (0.06-0.09)	24268 (19051-29440)	0.02 (0.01-0.03)	838 (549-1217)	49.85	3.45	0.38 (0.23-0.64)	149 (90-254)	70.44	2.12
Karnataka	0.44 (0.39-0.47)	291348 (261096-313484)	0.07 (0.06-0.08)	4618 (3733-5553)	65.83	1.59	8.39 (6.08-10.46)	5675 (4110-7072)	81.58	0.50
Kerala	0.07 (0.06-0.08)	23608 (20632-29295)	0.01 (0.006-0.02)	292 (216-579)	75.85	1.24	0.62 (0.42-0.99)	221 (149-355)	78.54	0.59
Madhya Pradesh	0.10 (0.09-0.12)	69935 (62939-85074)	0.02 (0.01-0.03)	1601 (1154-2550)	65.3	2.29	0.83 (0.64-1.35)	720 (553-1168)	86.03	1.07
Maharashtra	0.29 (0.24-0.35)	399023 (341054-472897)	0.04 (0.03-0.07)	5334 (3288-9255)	63.73	1.34	5.43 (3.45-8.45)	6858 (4356-10668)	80.27	0.47
Manipur	0.81 (0.66-0.91)	23463 (20112-26209)	0.17 (0.08-0.27)	546 (264-852)	50.94	2.33	15.49 (11.45-20.24)	499 (369-652)	65.3	0.80
Meghalaya	0.40 (0.34-0.50)	9244 (7825-11602)	0.20 (0.15-0.37)	681 (513-1232)	-58.74	7.37	1.01 (0.68-1.45)	33 (23-48)	61.18	8.73
Mizoram	2.75 (2.33-3.37)	26321 (22123-32457)	0.90 (0.76-1.27)	1088 (925-1533)	29.76	4.13	10.88 (7.08-16.57)	135 (88-205)	78.08	3.26
Nagaland	1.37 (1.27-1.56)	23731 (21631-27272)	0.42 (0.32-0.60)	928 (712-1326)	39.97	3.91	7.59 (5.58-10.85)	169 (124-241)	80.21	2.72
Odisha	0.12 (0.10-0.14)	46919 (42590-54498)	0.02 (0.018-0.03)	1091 (810-1477)	72.13	2.33	1.79 (1.39-2.63)	825 (642-1213)	68.38	0.80
Puducherry	0.16 (0.11-0.28)	2625 (2124-4098)	0.04 (0.01-0.13)	65 (20-214)	18.75	2.48	2.42 (1.61-6.04)	40 (27-100)	83.67	0.97
Punjab	0.42 (0.40-0.59)	110715 (100063-155336)	0.22 (0.19-0.36)	6785 (5674-10974)	-29.39	6.13	3.13 (2.08-7.82)	961 (638-2400)	-67.71	3.40
Rajasthan	0.13 (0.10-0.16)	86143 (68320-108557)	0.05 (0.03-0.08)	4020 (2053-6793)	3.04	4.67	0.48 (0.32-0.75)	388 (261-607)	78.02	3.12
Sikkim	0.09 (0.06-0.14)	533 (339-780)	0.03 (0.01-0.08)	24 (9-54)	17.24	4.50	0.33 (0.13-0.72)	2 (0.91-5)	33.33	4.00
Tamil Nadu	0.19 (0.16-0.24)	165971 (141131-201015)	0.02 (0.01-0.04)	1487 (918-3303)	74.49	0.90	1.69 (1.19-2.59)	1296 (914-1984)	89.52	0.44
Telangana	0.41 (0.35-0.51)	156961 (135367-186604)	0.08 (0.05-0.13)	3022 (1718-4826)	58.65	1.93	8.00 (4.55-13.26)	3035 (1727-5033)	79.85	0.62
Tripura	0.39 (0.35-0.49)	10769 (9333-13477)	0.28 (0.23-0.41)	1171 (935-1702)	-447.2	10.87	1.21 (0.85-1.84)	50 (35-76)	-354.55	13.01
Uttar Pradesh	0.10 (0.07-0.15)	195427 (135540-269697)	0.03 (0.01-0.06)	6373 (3451-14016)	47.05	3.26	0.66 (0.34-1.50)	1549 (801-3535)	79.55	1.68
Uttarakhand	0.13 (0.09-0.17)	12902 (9022-16636)	0.05 (0.03-0.07)	532 (335-767)	49.38	4.12	1.02 (0.55-1.78)	119 (64-207)	53.7	2.22
West Bengal	0.08 (0.077-0.10)	78399 (71947-88411)	0.02 (0.01-0.03)	1899 (1399-2677)	55.89	2.42	0.59 (0.44-0.82)	585 (434-806)	88.6	1.37
India	0.20 (0.17-0.24)	2561161 (2189203-3066521)	0.05 (0.03-0.08)	64465 (42962-105114)	48.69	2.52	2.32 (1.55-3.60)	32162 (21468-49947)	81.42	1.07

2.6.3. Epidemic trends

HIV prevalence trends in India vary widely across states and Union Territories (figure 2.13). A consistent decline has been observed in Andhra Pradesh, Chhattisgarh, Goa, Himachal Pradesh, Karnataka, Kerala, Maharashtra, Manipur, Madhya Pradesh, Tamil Nadu, West Bengal, Puducherry, and Telangana. Estimated prevalence appears to have stabilized over the last couple of years in Bihar, Haryana, Nagaland, Rajasthan, and Uttar Pradesh after a period of increasing trend. Delhi, Gujarat, J&K and Ladakh, Jharkhand, Odisha and Uttarakhand appear to have a stable to declining trend in adult HIV prevalence. An upward trend is estimated in Arunachal Pradesh, Assam, Meghalaya, Mizoram, Punjab, Sikkim, Tripura, and Chandigarh.

In terms of the estimated size of PLHIV, a sustained long-term decline is evident only in Andhra Pradesh, Goa, Karnataka, Maharashtra, Manipur, Tamil Nadu, Telangana, and Puducherry. J&K and Ladakh, along with Odisha, have shown a decline more recently.

A stable PLHIV size is estimated in Chhattisgarh, Himachal Pradesh, Kerala, Madhya Pradesh, and West Bengal. In all other states and Union Territories, the PLHIV population is projected to be increasing.

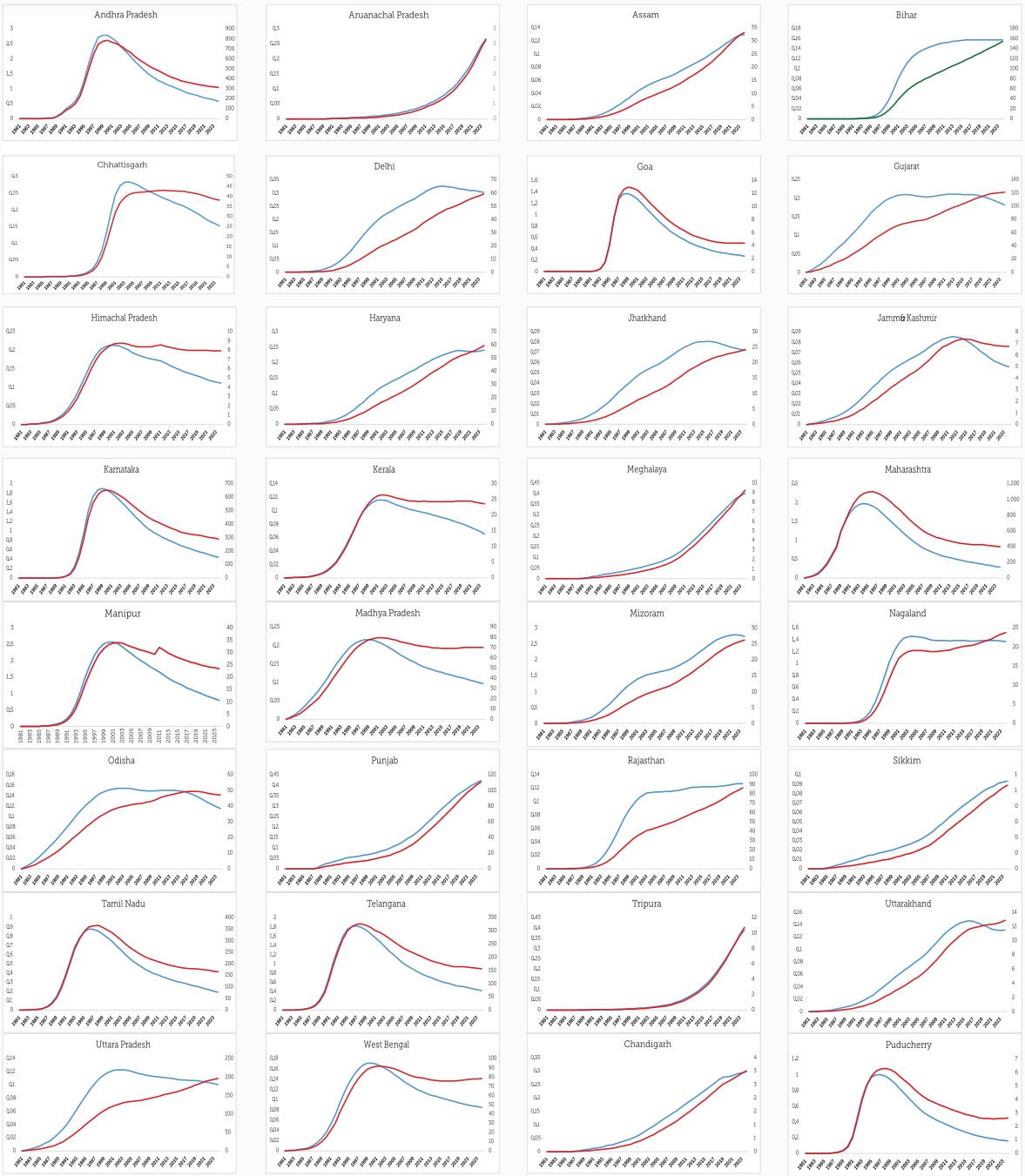
The overall epidemic trend is being determined by different incidence and mortality trends in different state/UTs (figure 2.14). In Andhra Pradesh, Karnataka, Maharashtra, Tamil Nadu, and Telangana, the decline is driven by substantial decline in both of new infections and AIDS-related mortalities. In all these states, the value of IPR and IMR are well below the recommended threshold level with ART coverage of at-least 69% indicating a successful AIDS response with declining epidemic size.

The declining trend being seen in Manipur need to be seen in challenging programmatic context. Estimated deaths among PLHIV and New Infection has been relatively same in the state.

A noticeable increasing trend in the prevalence of new infections has been observed in the northeastern states of Tripura, Arunachal Pradesh, Meghalaya, and Assam, as well as in the northern state of Punjab, primarily driven by the rise in new infections (figure 2.15). In Tripura and Arunachal Pradesh, the number of new infections in 2024 has increased by over 400% compared to the 2010. Similarly, in Punjab and Meghalaya, the annual new infections estimated for 2024 have nearly doubled compared to the 2010.

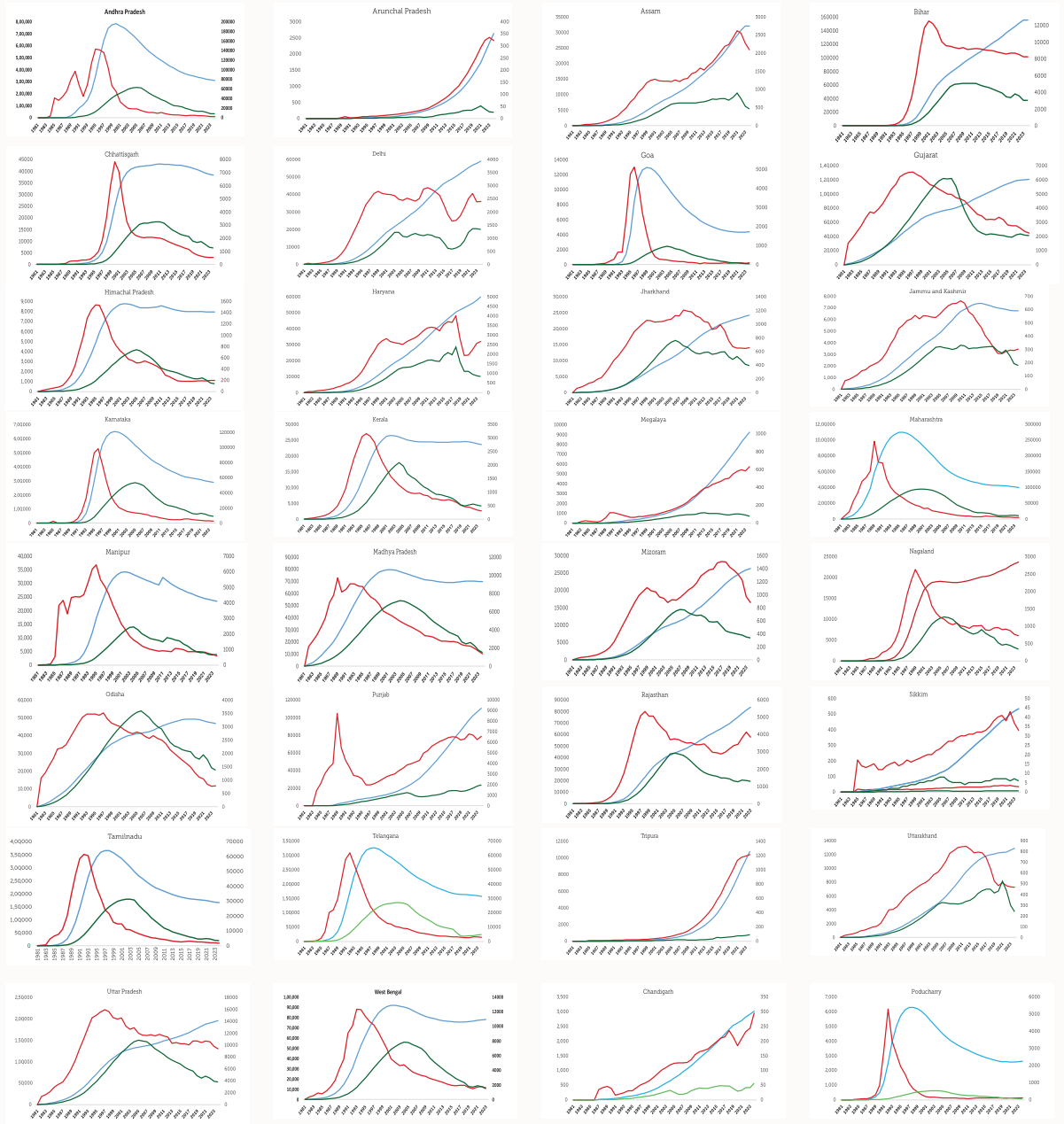
In Mizoram, annual new infections reached its peak in 2017/18 and then started to show decline. However, still as new infections are much higher than the deaths (IMR >3 in 2024), the epidemic is continuing to expand in the state that reflects into rising prevalence.

Figure 2.13. State/UT-wise adult HIV prevalence (%) and PLHIV size (In 1000), 1981-2024



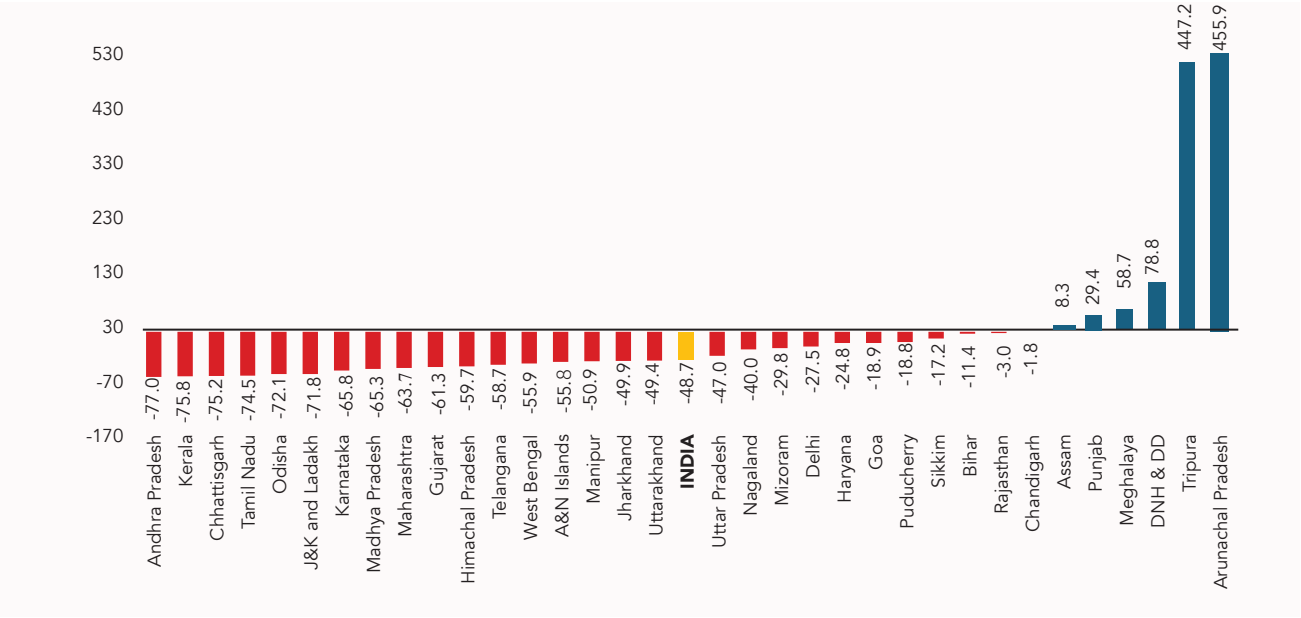
Note: Adult HIV prevalence (in %) in blue line primary 'Y' axis, PLHIV size (in 1000) in red line on secondary 'Y' axis

Figure 2.14. New infections, PLHIV size and deaths among PLHIV, 1981-2024



Note: PLHIV size (in blue line) on primary 'Y' axis; new infections (in red line) and deaths among PLHIV (in green line) on secondary 'X' axis; time-series on 'X' axis

Figure 2.15. State/UT-wise change (%) in annual new HIV infections during 2010 and 2024



2.7. Routes of transmission (Self-reported)

The patterns of HIV transmission vary by route across different states and Union Territories (table 2.3 and figure 2.16). In Arunachal Pradesh, Tripura, Assam, and Punjab, the primary mode of transmission is injecting drug use, accounting for 56-72% of newly detected HIV-positive cases in 2024-25. This is attributed to the use of infected syringes or needles. In Uttarakhand, Mizoram, Delhi, Manipur, and Haryana, approximately in the range of 20-26% of cases reported acquiring the infection through infected needles or syringes, while in Himachal Pradesh, J&K and Ladakh and Chandigarh, the proportion was between 12-19%. An increasing prevalence of adult HIV infections has been observed in many of these states. The epidemic trajectory in Arunachal Pradesh, Assam, and Tripura has significantly shifted in recent years, with a notable rise in HIV cases among persons who inject drugs (PWID). There are indications that injecting drug behavior is increasingly contributing to the HIV epidemic in several northeastern states. For instance, in Assam, the percentage of HIV cases reporting injecting drug use as a transmission route rose from 2.1% in 2017-18 to 60% in 2024-25; similarly, in Tripura, it increased from around 18% in 2017-18 to approximately 67% in 2024-25.

In other states, heterosexual transmission remains the predominant route. In DNH & DD, Goa, Chandigarh, A&N Islands, Meghalaya, and Nagaland, 51-58% of cases reported HIV transmission through heterosexual casual partners, whereas in Telangana, Tamil Nadu, Chhattisgarh and Andhra Pradesh, 42-47% of respondents indicated this mode of transmission.

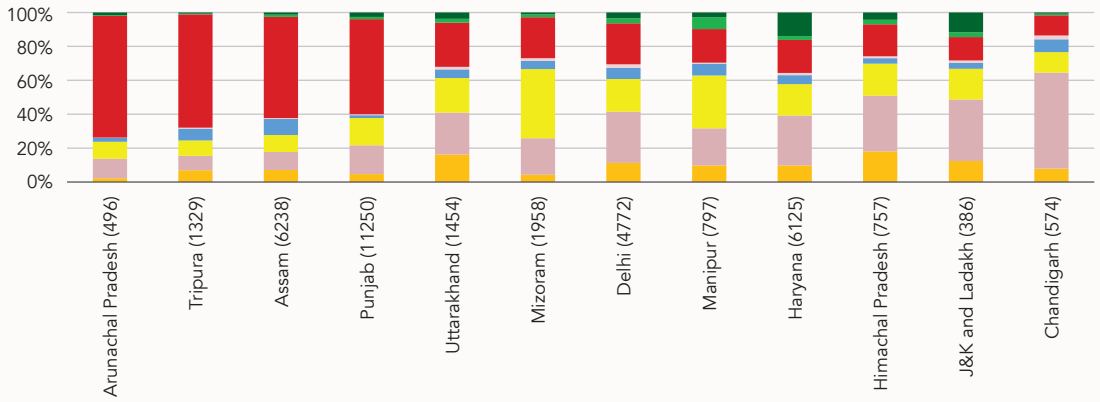
In Mizoram and Puducherry, around 40% reported transmission through heterosexual regular partners, followed by 30%-36% in Andhra Pradesh, Nagaland, Karnataka, Rajasthan, Manipur, Telangana, Madhya Pradesh and Bihar. Moreover, in Kerala and Sikkim 15%-27% of newly detected cases indicated acquiring HIV infection through heterosexual commercial partners. In A&N Islands, Goa and West Bengal, 16%-20% of cases reported HIV transmission through homosexual routes, followed by approximately 10%-11% in the Delhi, Odisha, Puducherry, and Tamil Nadu.

Despite ongoing intensive efforts for elimination of vertical transmission of HIV (EVTH) under NACP-V, vertical transmission continues to contribute a notable size in HIV transmission in several states. In Uttar Pradesh, Bihar, and Odisha, between 400 and 1,000 cases were attributed to vertical transmission in 2024–25. These figures underscore the need for sustained intensity under programme to further reduce vertical transmission rates in India.

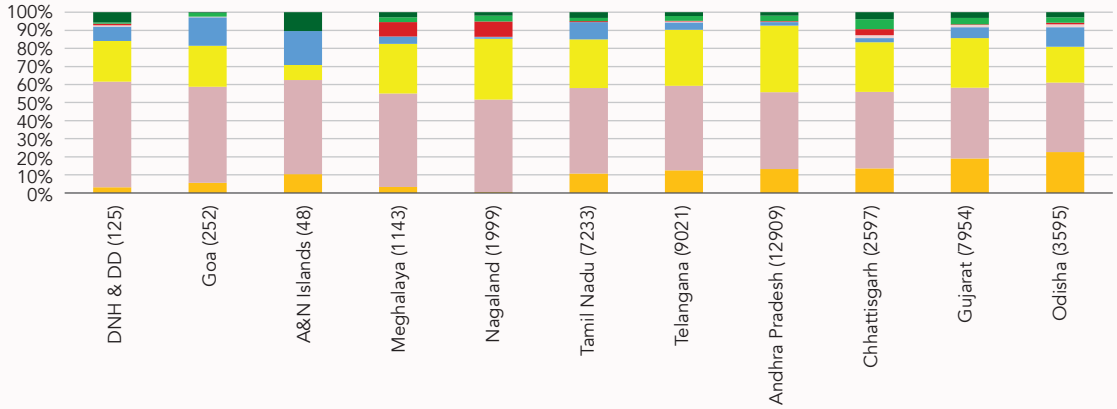
A notable proportion of newly detected HIV-positive cases in several states and UTs reported under the "Not specified/Unknown" transmission category. Specially, in Haryana, Bihar, and Delhi, this category accounted for 6–14% of total cases. This pattern reflects limitations in data collection, incomplete disclosure during counseling, or stigma-related underreporting. Improving the quality of case documentation are essential to reduce the proportion of cases with unknown transmission routes and to better inform targeted interventions.

Figure 2.16. State/UT-wise proportional distribution of route of transmission (self-reported) in newly diagnosed cases, 2024-25

A. Injecting drug use as a significant route



B. Heterosexual (Casual / non- commercial, non- regular partner) as a significant route



C. Heterosexual (Regular partner/spouse) as a significant route

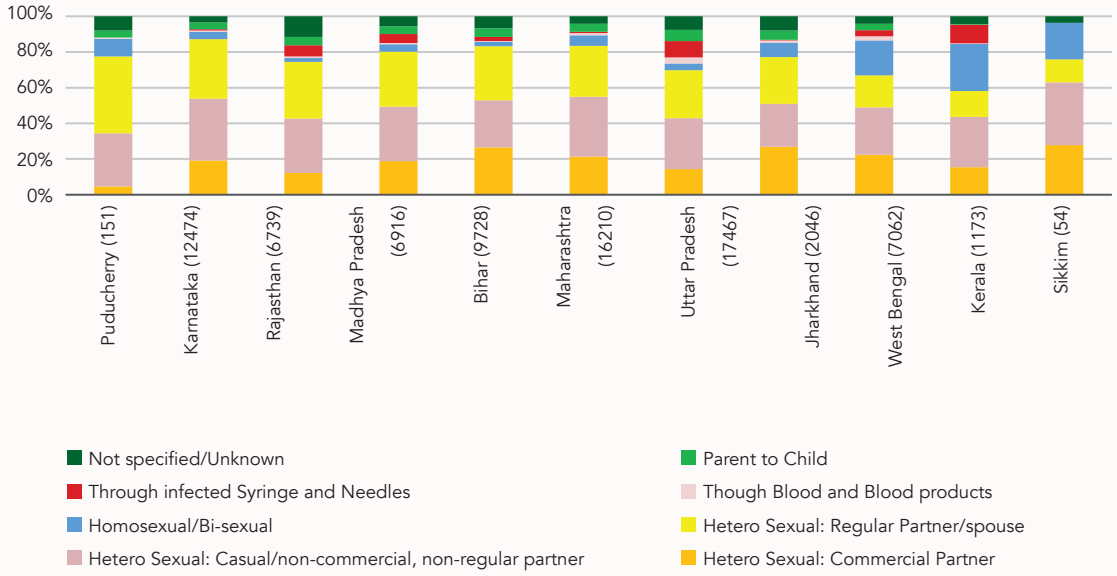


Table: 2.3 State/UT-wise proportional distribution of route of transmission (self-reported) in newly diagnosed cases, 2024-25

State/UT	Proportional distribution (In %)								Total newly diagnosed HIV-positive cases
	Heterosexual: Commercial partnerw	Heterosexual: Casual/non-commercial, non- regular partner	Heterosexual (Regular partner / spouse)	Homosexual/ Bi- sexual	Through Blood and Blood products	Through infected Syringe and Needles	Parent to Child	Not specified/ Unknown	
A&N Islands	10.42	52.08	8.33	18.75	0.00	0.00	0.00	10.42	48
Andhra Pradesh	13.27	42.51	36.88	1.87	0.23	0.25	3.01	1.98	12,909
Arunachal Pradesh	2.22	11.52	10.10	2.22	0.20	71.72	0.40	1.62	495
Assam	7.22	10.48	9.97	9.45	0.54	59.70	1.30	1.34	6,328
Bihar	26.56	26.42	30.20	2.58	0.30	2.45	4.76	6.73	9,728
Chandigarh	7.84	56.62	12.20	7.49	2.26	11.85	1.05	0.70	574
Chhattisgarh	13.59	42.40	27.38	2.35	1.58	3.43	5.39	3.89	2,597
DNH & DD	3.20	58.40	22.40	8.00	0.80	0.80	0.80	5.60	125
Delhi	11.34	30.07	19.30	6.62	2.10	24.25	3.02	3.31	4,772
Goa	5.56	53.17	22.62	15.87	0.40	0.00	1.98	0.40	252
Gujarat	19.03	39.20	27.52	5.92	1.32	0.30	3.47	3.23	7,954
Haryana	9.71	29.57	18.47	5.34	1.31	19.43	2.24	13.94	6,125
Himachal Pradesh	18.10	32.76	19.02	3.17	1.19	18.76	2.64	4.36	757
J&K and Ladakh	12.44	36.27	18.13	3.37	1.55	13.73	2.85	11.66	386
Jharkhand	26.93	23.95	26.34	7.92	1.27	0.49	5.08	8.02	2,045
Karnataka	19.27	34.63	33.21	4.28	0.57	0.80	3.73	3.50	12,474
Kerala	15.35	28.22	14.49	26.51	0.26	10.40	0.43	4.35	1,173
Madhya Pradesh	18.84	30.57	30.87	3.96	0.77	5.05	4.37	5.58	6,916
Maharashtra	21.32	33.55	28.46	5.97	1.38	0.67	4.52	4.13	16,210
Manipur	9.79	21.96	31.12	7.03	0.50	19.82	7.03	2.76	797
Meghalaya	3.41	51.62	27.47	4.02	0.00	8.05	2.62	2.80	1,143
Mizoram	4.33	21.55	40.65	5.04	1.43	24.25	1.68	1.07	1,963
Nagaland	0.52	51.18	33.68	0.84	0.16	8.54	3.09	1.99	1,909
Odisha	22.59	38.53	19.83	10.74	1.59	0.83	3.09	2.81	3,595
Puducherry	4.64	29.80	43.05	9.93	0.66	0.00	3.97	7.95	151
Punjab	4.64	17.01	16.04	1.79	0.47	56.15	1.23	2.66	11,520
Rajasthan	12.24	30.51	31.77	2.09	0.93	6.31	4.60	11.54	6,739
Sikkim	27.78	35.19	12.96	20.37	0.00	0.00	0.00	3.70	54
Tamil Nadu	10.78	47.32	26.86	9.47	0.12	0.44	1.78	3.21	7,233
Telangana	12.53	46.77	31.07	3.94	0.57	0.39	2.61	2.14	9,021
Tripura	6.92	8.58	9.03	7.00	0.53	66.82	0.45	0.68	1,329

Table continued...

...Table continued

State/UT	Proportional distribution (In %)								Total newly diagnosed HIV-positive cases
	Heterosexual: Commercial partnerw	Heterosexual: Casual/non-commercial, non- regular partner	Heterosexual (Regular partner / spouse)	Homosexual/ Bi- sexual	Through Blood and Blood products	Through infected Syringe and Needles	Parent to Child	Not specified/ Unknown	
Uttar Pradesh	14.39	28.44	26.93	3.73	3.45	9.23	6.16	7.67	17,467
Uttarakhand	16.16	24.69	20.50	5.02	1.51	26.20	2.20	3.71	1,454
West Bengal	22.44	26.54	17.94	19.53	2.35	3.47	3.50	4.23	7,062
India	**15.10**	**32.13**	**26.46**	**5.44**	**1.16**	**11.53**	**3.52**	**4.66**	**1,63,306**

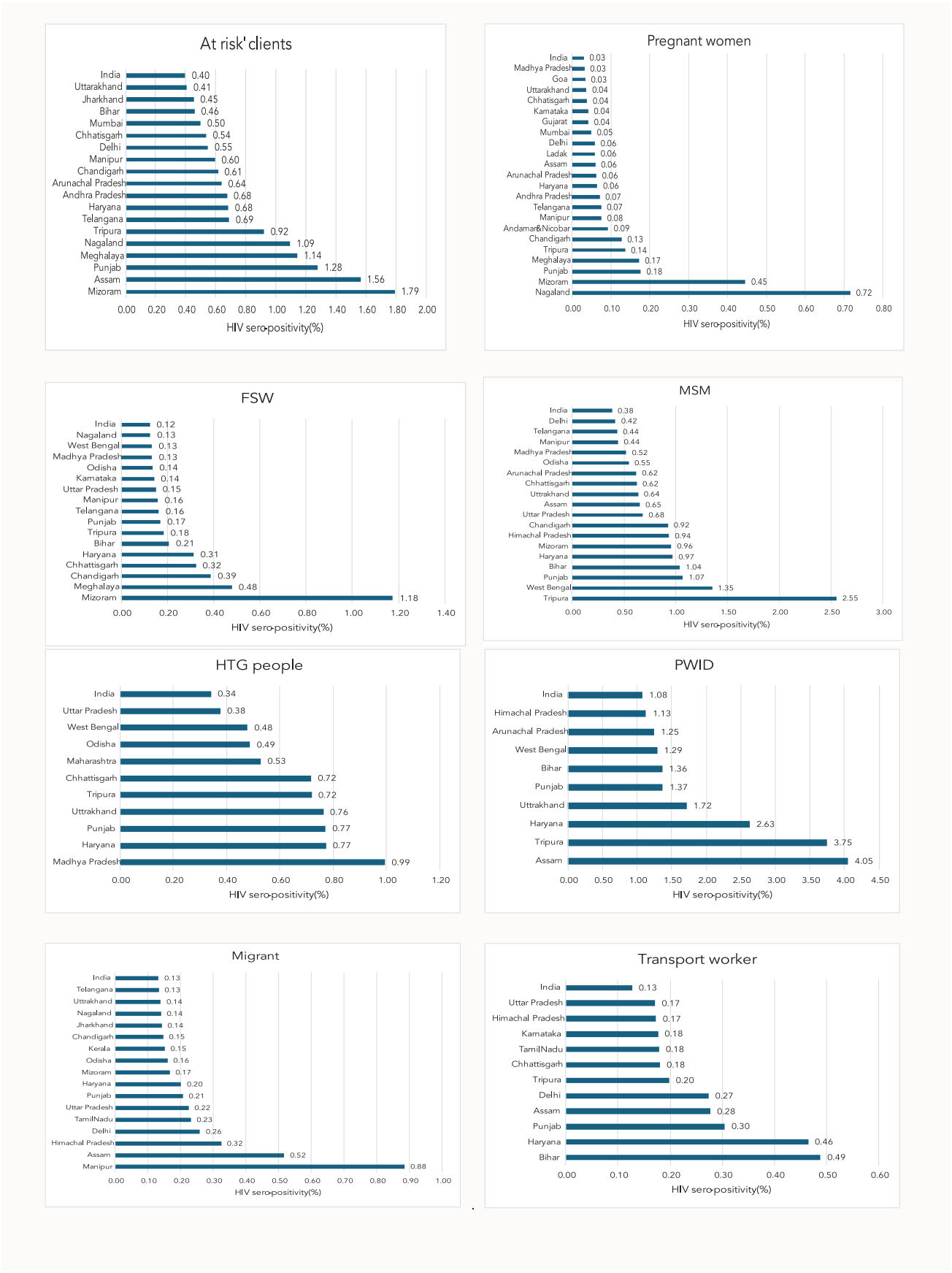
2.8. HIV infections among different population groups

Similar to adult HIV prevalence, significantly higher rates are observed among key populations in the northeastern states compared to national averages, as reflected in the 2024 surveillance rounds (table 2.4). Among PWID, HIV infection seroprevalence levels are particularly alarming. The elevated epidemic burden in these states is further underscored by the high positivity rates recorded during routine testing. figure 2.17 outlines the annual seropositivity observed in various key population groups during 2023-24 in India, with a specific focus on selected northeastern states. Among 'at-risk' clients, the national seropositivity was recorded at 0.40%, compared to 1.79% in Mizoram, 1.56% in Assam, 1.14% in Meghalaya, 1.09% in Nagaland, 0.96% in Tripura, and 0.60% in Manipur, Similarly, six state/UTs where HIV seropositivity among positivity among PW was more than 0.10%; four are in the northeastern region: Nagaland (0.72%), Mizoram (0.45%), Meghalaya (0.17%), and Tripura (0.14%). A similar pattern was also reported among key and bridge population groups.

However, relatively higher annual seropositivity in routine program testing has also been noted in other state/UTs. Punjab had a seropositivity of more than 1.28% among 'at-risk' clients, while in Telangana, Haryana, and Andhra Pradesh, Chandigarh, Delhi, Chhattisgarh, it ranged between 0.54% and 0.69%. Punjab and Chandigarh are two state/UTs from northern India with seropositivity of more than 0.10% among pregnant women.

Chandigarh has a seropositivity of around 0.39%, and Chhattisgarh has seropositivity of 0.32% respectively among FSW, with Haryana at 0.31%. Among MSM, West Bengal recorded a seropositivity of 1.35%, Punjab 1.07%, Bihar 1.04%, Haryana 0.97%, Himachal Pradesh 0.94%, and Chandigarh 0.92%, whereas Uttar Pradesh, Assam, Uttarakhand, Chhattisgarh ranges 0.68% to 0.62%. Haryana recorded a seropositivity of around 2.63% among PWID, Uttarakhand 1.72%, Punjab 1.37% and Bihar 1.36%. The highest HIV positivity among transport workers was noted in Bihar (0.49%) and Haryana (0.46%). Variations in reported seropositivity levels within the program likely reflect differences in coverage and testing practices across states and Union Territories. These figures provide essential context for interpreting the epidemiological situation in each state or region.

Figure 2.17. Annual HIV sero-positivity (in %) noted in routine testing, 2024-25



2.9. Vertical HIV transmission

Eliminating vertical HIV transmission is key to NACO's goal of ending the HIV/AIDS epidemic as a public health threat in India. This involves reducing the paediatric HIV incidence to fewer than 50 per 1,00,000 live births and keeping vertical transmission rates below 5% in breastfeeding populations (or less than 2% in non-breastfeeding populations). Annual estimations under NACP provide data on these indicators.

The final MTCT rate is estimated based on transmission probabilities across different prophylaxis/treatment groups during perinatal or breastfeeding periods. Under the UNAIDS-recommended Spectrum model, the highest risk occurs when HIV infections in women occur during pregnancy or breastfeeding. Women on antiretroviral therapy prior to pregnancy have the lowest transmission risks.

In 2024, an estimated 18.47 thousand (UB:15.27-22.84) HIV-positive mothers needed ART to prevent vertical transmission, with a coverage rate of 93.8% (figure 2.18). The overall final transmission rate was 10.25% (UB:6.74-16.77), down from more than 25% in 2020 underlining significant gains being made under NACP-V. There were an estimated 1,894 (UB:1061-3854) new vertical HIV infections contributing 3% of total new infections in the country. The paediatric HIV incidence per 1,00,000 live births was at 8.49 (UB: 4.76–17.28).

Overall, 51% of vertical transmission in 2024 were from incident infections in women during pregnancy or breastfeeding, and 13% from women not receiving ARVs during pregnancy. This highlights the importance of primary prevention in attaining the EVTH goals in India.

Figure 2.18. Vertical transmission rate for HIV, key statistics, 2024

18.47 thousand

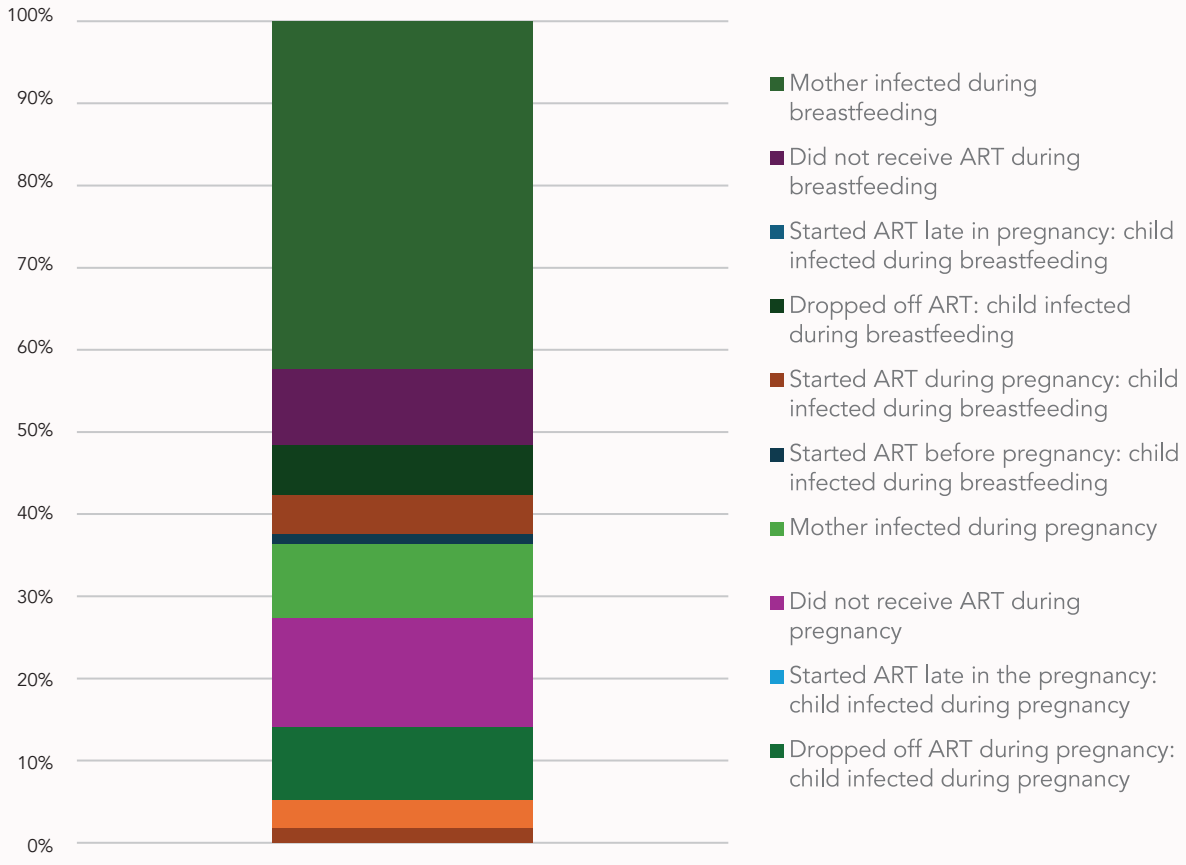
- Estimated number of HIV-positive women to give birth (PMTCT need)

17.32 thousand

- Number of HIV positive PW on-ART, either newly initiated or already on-ART

1.89 thousand

- Number of Children estimated to acquire HIV transmission through vertical transmission



93.8%

- Percentage of HIV PW on-ART against the estimated need

3.75%

- Vertical transmission rate at 6 weeks

10.25%

- Final transmission rate including perinatal transmission and up to 36 months of breastfeeding

03

PROGRESS ON 95-95-95



PROGRESS ON 95-95-95

3.1. Background

India is committed to achieving the SDG-3 target 3.3 of ending the AIDS epidemic as a public threat by 2030. NACP-V has adopted attainment of 95-95-95 by 2025 as critical target towards achieving of 'End of AIDS' by 2030. The progress achievement of these target is being reported in the Global AIDS Monitoring (GAM) portal annually, and also the progress on 3rd 95 is being reported in OOMF portal of NITI Aayog, Government of India.

The 95-95-95 targets aim to ensure that 95% of PLHIV are aware of their status, 95% of those aware of their status are on anti-retroviral treatment (ART), and 95% of those on ART have achieved viral suppression. The HIV 'Testing and Treatment' cascade, also known as the HIV Care Continuum, is another related framework used to describe the progress on sequential steps and key stages involved in the diagnosis, treatment, and management of HIV. Full attainment of 95-95-95 targets would mean that 86% of all PLHIV have achieved viral suppression. Achieving these milestones is essential for reducing new HIV infections and AIDS-related mortality by 90% by 2030, a key requirement toward the global goal of ending AIDS as a public health threat by 2030.

3.2. Method

The method for calculating the progress on 95-95-95 has been detailed elsewhere.[1] Table below summarises the numerator and denominator for calculation of 95-95-95.

Table 3.1. Method of calculating progress on 95-95-95

Indicator	Description	Calculation details	
		Numerator	Denominator
First 95	Percent of all PLHIV who know their HIV status	Number of PLHIV who know their HIV status	Estimated number of PLHIV
Second 95	Percent of PLHIV who are on ART among those who know their HIV status	Number of PLHIV who are on ART	Number of PLHIV who know their HIV status
Third 95	Percent of PLHIV on ART who are virally suppressed	Number of PLHIV on ART who are virally suppressed	Number of PLHIV on ART who are tested for viral load

The source of the data is CST MPR and SOCH. The Denominator to measure the progress on 1st 95 is provided from the latest round of HIV Burden estimates. The HIV Burden estimation under NACP is done using the UNAIDS recommended Spectrum modelling tool. Each round of HIV burden estimation generates the complete historical data on key epidemiological indicators for each state/UTs. This is done as per the UNAIDS recommendations which states that data from latest estimates replace those from previous rounds in view of the updates in the modelling tools to reflect the latest science.[2] For the 'Testing and Treatment' cascade, the denominator at each step remains the same i.e., estimated PLHIV. The data for the latest round of estimates in used to measure the progress on first

[1] National AIDS Control Organization (2020). Sankalak: Status of National AIDS Response (Second edition, 2020). New Delhi: NACO, Ministry of Health and Family Welfare, Government of India.

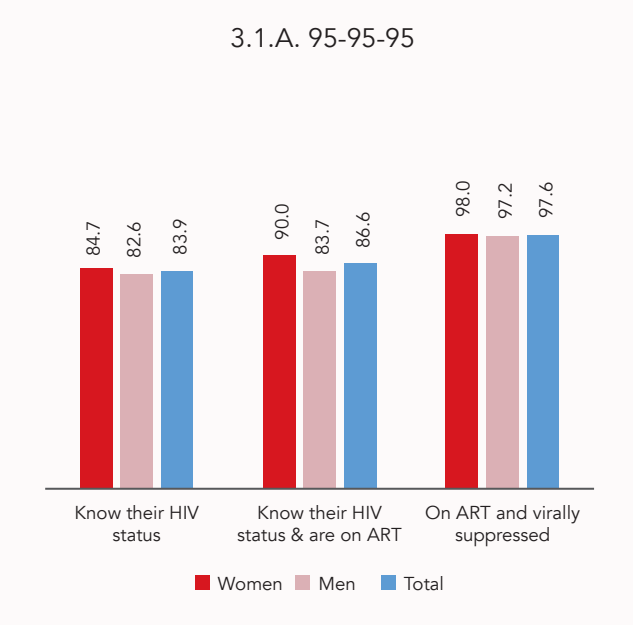
[2] UNAIDS. The path that ends AIDS: UNAIDS Global AIDS Update 2023. Geneva: Joint United Nations Programme on HIV/AIDS; 2023. Licence: CC BY-NC-SA 3.0 IGO.

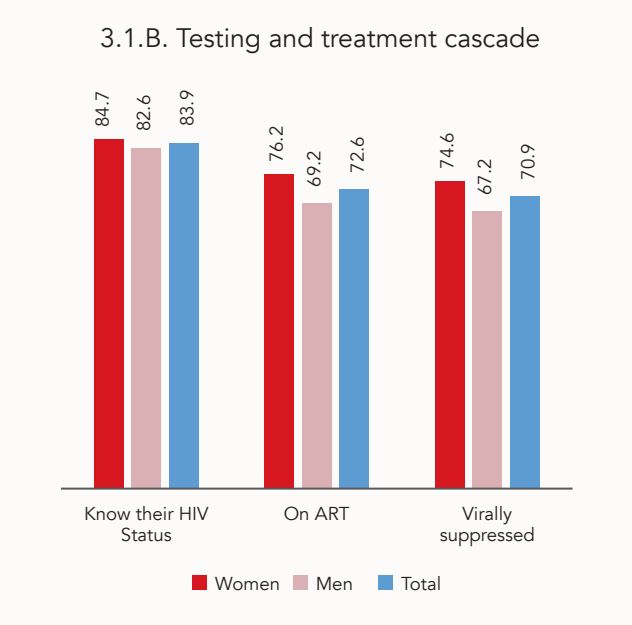
95 for the latest as well as for the previous years in alignment with the UNAIDS recommendations. For the current report, data from HIV Estimations 2025 round has been used for measuring the progress on 95s and cascade.

3.3. National Progress

As of March 2025, about 83.9% of PLHIV were aware of their HIV status. Of those aware, 86.6% were receiving ART, and 97.6% of those on ART were virally suppressed. In terms of 'Test and Treat' cascade, 83.9% of all PLHIV were aware of their HIV status, 72.6% were on-ART, and 70.9% were virally suppressed. Progress in these indicators was slightly higher among women living with HIV compared to men (figure 3.1). Globally, 87% of PLHIV knew their HIV status. Among them, 89% were on ART, and 94% of those on ART were virally suppressed underlining that 77% of the global PLHIV size were on ART while 73% were virally suppressed.[3]

Figure 3.1. Gender-wise progress on 95-95-95 and treatment cascade (in %), 2024-25





The number of PLHIV diagnosed, placed on treatment, and virally suppressed is increasing. Number of PLHIV who knew their HIV status, increased from around 18.10 lakh in March 2021 to 21.49 lakh in March 2025 (15.8% increase). In the same reference period, number of PLHIV on-ART increased from around 14.94 lakh to 18.61 lakh (24.5% increase). As on March 2025, based on the extrapolation of the viral load suppressions rate among on-ART PLHIV tested for viral load to the total on-ART PLHIV, around 18.15 lakh PLHIV were estimated to had suppressed viral load.

3.4. State/UT-wise progress

In 2024-25, an increase of 3.9 percentage points in the 1st 95 progress has been noted nationally vis-à-vis previous year. Almost all the state/UTs were made progress towards the first 95 target, and notable progress was identified in the state of Arunachal Pradesh (14.2%), followed by Assam (11.4), and Uttarakhand (9.7). Further, many of the other state/UTs (Andhra Pradesh, Chandigarh, DNH&DD, Delhi, Goa, Gujarat, Himachal Pradesh, Ladakh, Maharashtra, Meghalaya, Rajasthan, Tamil Nadu and West Bengal) exceeded the national average (83.9%). Union Territories such as Chandigarh, DNH&DD, and Delhi reached 95% or higher. However, data for UT shall be interpreted with caution in view of the hub-spoke model effect as they PLHIV from neighbouring states also avail services from these UTs.

Several state/UTs including Andaman & Nicobar Islands, Bihar, Haryana, J&K, Manipur, Odisha,

[3] UNAIDS Estimates 2025

Puducherry and Tripura reported progress on first 95 compared to previous years but below 75%, indicating the need for intensifying the efforts.

For progress on second 95 target, which measures ART coverage among those aware of their status, three state/UTs achieved or exceeded 95%, including DNH & DD, Kerala and Telengana. The progress of the Second 95 for Telangana needs to be interpreted with caution given the current addition of a very high number of the on-ART PLHIV in private sector for the state. Similarly, data for DNH & DD as the 95-95-95 progress for the state is to be reconciled based on the place of residence data. The other states those whose status of 2nd 95 more than or equal to national average were Andaman & Nicobar Islands (93%), Bihar (92.6%), Haryana (86.9%), Himachal Pradesh (91.8%), Manipur (89.4%), Mizoram (88.5%) and Rajasthan (89.2%). In four states, Delhi (68.9 %), Assam (70%), Tripura (74.4%) and Punjab (74.8%) reported lowest ART coverage among aware PLHIV, indicating challenges with retention in treatment. Most other state/UTs achieved ART coverage rates between 80-94% in 2024-25 (table 3.1).

In terms of viral suppression among those on ART, all except six state/UTs (Andaman and Nicobar Islands, Bihar, DNH&DD, Odisha, Rajasthan and Tripura) showed strong outcomes (table 3.1), with most achieving 95% or greater viral suppression. Out of six states, 5 states states with viral load suppression of less than 95% but more than 92%, except Tripura (85%).

There was slight variation in the 95-95-95 progress trends by states/UTs. The first 95 has seen a rising trend across all state/UTs in the last four years. However, for the second 95, 23 state/UTs have shown decline in their second 95 status as on March 2025, that of March 2024. Further, in states of Tripura and Punjab, progress on the second 95 decreased 10.2 % and 8.6% respectively in March 2025 as reported in March 2024.This may be due to revised definition of LFU cases, or slower retention of PLHIV on-ART vis-à-vis progress on detections.

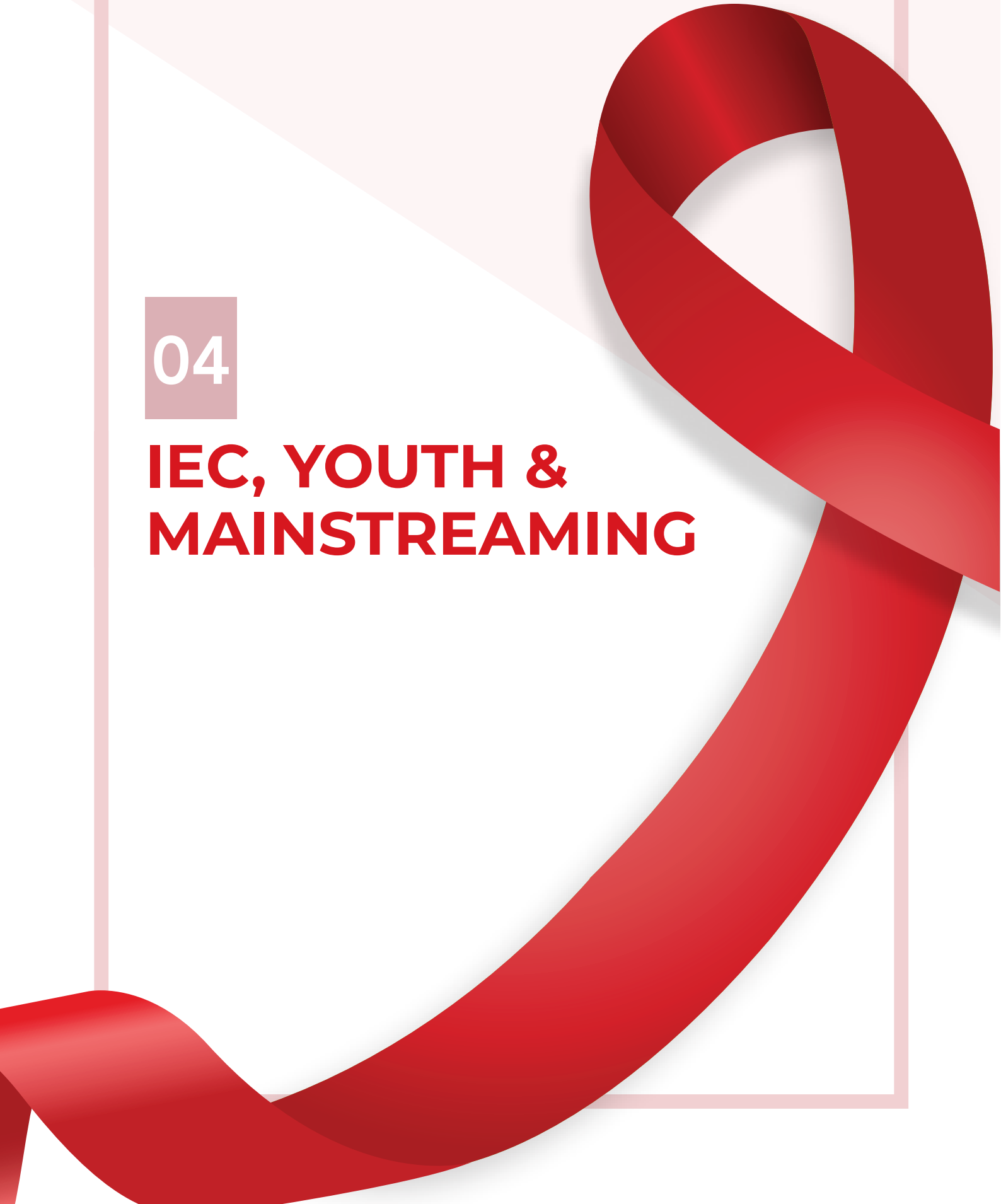
Table 3.2. State/UT-wise Progress on 95-95-95 (2020-21 to 2024-25)

State/UT	First 95 (%)					Second 95 (%)					Third 95 (%)				
	2020-21	2021-22	2022-23	2023-24	2024-25	2020-21	2021-22	2022-23	2023-24	2024-25	2020-21	2021-22	2022-23	2023-24	2024-25
A&N Islands	29.5	31.9	36.4	44.4	51.3	87.0	90.5	91.7	94.1	93.0	-	-	82.9	≥95	93.7
Andhra Pradesh	77.1	79.2	82.1	85.8	89.1	74.9	77.9	82.8	83.9	83.9	81.3	86.2	93.2	≥95	≥95
Arunachal Pradesh	18.4	18.7	37.6	68.5	82.7	69.0	67.5	71.8	73.3	84.6	74.3	77.8	85.2	≥95	≥95
Assam	41.7	44.6	52.4	67.4	78.8	72.0	72.2	76.3	72.6	70.0	87.9	88.9	94.2	≥95	≥95
Bihar	56.4	57.1	60.0	63.2	65.1	83.7	85.1	88.4	91.5	92.6	85.3	83.0	89.3	≥95	93.5
Chandigarh	≥95	≥95	≥95	≥95	≥95	87.8	82.1	85.5	88.6	87.0	92.6	92.5	≥95	≥95	≥95
Chhattisgarh	53.3	58.4	64.5	70.5	78.3	76.3	77.1	79.4	78.7	76.3	85.7	75.5	90.3	94.2	≥95
DNH & DD*	-	-	-	-	≥95		-	-	-	≥95		-	-	-	92.3
Delhi	92.1	93.2	≥95	≥95	≥95	72.6	72.8	73.6	73.2	68.9	87.8	87.5	≥95	≥95	≥95
Goa	81.7	85.9	89.4	93.6	≥95	84.3	83.7	83.4	83.6	81.6	86.3	88.7	≥95	≥95	≥95
Gujarat	77.5	77.6	80.6	83.7	87.6	82.8	84.3	85.5	87.0	86.5	84.6	83.8	92.9	≥95	≥95
Haryana	45.5	53.1	61.4	68.0	74.3	73.2	81.0	88.5	92.3	86.9	81.8	77.9	86.8	94.4	≥95
Himachal Pradesh	67.3	70.1	74.8	79.1	84.2	85.6	86.5	88.5	89.8	91.8	83.7	73.0	81.8	≥95	≥95
Jammu & Kashmir Ladakh	54.9	55.7	61.5	62.5	67.6	76.9	79.9	81.5	86.2	85.9	89.9	89.9	92.9	94.4	≥95
Jharkhand	64.7	67.2	71.3	75.8	81.0	83.9	86.1	88.0	88.4	86.9	83.2	76.6	86.4	≥95	≥95
Karnataka	68.4	70.8	74.1	76.8	79.9	83.0	82.6	84.8	87.3	86.9	81.0	81.3	93.3	≥95	≥95
Kerala	67.2	68.6	73.5	77.6	80.6	≥95	≥95	≥95	≥95	≥95	91.4	91.8	≥95	≥95	≥95
Madhya Pradesh	58.3	61.1	66.1	72.3	77.7	74.3	78.0	80.0	83.7	85.2	81.2	76.5	87.6	≥95	≥95
Maharashtra	83.4	82.9	86.2	89.4	92.2	81.8	84.1	85.6	86.9	87.0	86.9	88.3	≥95	≥95	≥95
Manipur	60.9	64.6	67.8	69.5	72.1	91.7	90.0	92.2	90.1	89.4	92.8	≥95	≥95	≥95	≥95
Meghalaya	61.3	65.9	74.4	83.1	89.4	73.0	74.4	81.5	83.7	78.9	91.5	87.6	≥95	≥95	≥95
Mizoram	58.1	62.0	66.0	71.0	76.5	84.7	84.9	88.2	90.4	88.5	90.5	91.3	93.8	≥95	≥95
Nagaland	62.0	65.6	70.3	75.9	81.1	77.5	75.8	77.8	79.8	79.1	87.0	86.0	92.8	≥95	≥95
Odisha	52.9	56.5	61.8	66.2	72.8	84.0	83.0	84.0	85.6	82.8	86.6	84.5	86.5	92.2	93.5
Puducherry	62.4	64.2	64.7	67.1	68.2	77.6	76.9	79.2	81.1	82.5	85.9	83.2	≥95	≥95	≥95
Punjab	62.7	63.0	69.0	75.9	80.5	77.2	83.1	85.6	83.4	74.8	83.6	78.7	89.8	≥95	≥95
Rajasthan	76.0	76.7	78.7	81.8	84.4	84.3	86.2	89.4	91.0	89.2	83.3	84.6	90.6	≥95	94.7
Sikkim	59.1	64.8	71.3	76.2	83.7	84.4	84.6	86.5	86.8	87.4	88.9	90.7	≥95	≥95	≥95
Tamil Nadu	83.0	84.8	88.5	92.1	≥95	85.2	85.1	86.1	87.8	87.4	84.6	86.2	93.2	≥95	≥95
Telangana*	65.1	67.2	70.9	75.8	79.9	≥95	≥95	≥95	≥95	≥95	80.5	76.9	91.8	≥95	≥95
Tripura	36.6	43.8	56.1	65.9	70.2	88.6	86.1	90.3	84.6	74.4	85.2	78.3	90.1	≥95	85.6
Uttar Pradesh	59.6	61.7	65.8	70.0	75.7	84.3	84.1	85.8	86.8	85.4	86.8	85.1	92.6	≥95	≥95
Uttarakhand	51.1	55.4	60.1	66.6	76.3	72.1	67.4	77.8	79.9	77.9	85.9	86.5	81.5	≥95	≥95
West Bengal	72.6	75.9	81.1	86.3	92.4	84.7	83.5	85.7	87.7	86.6	90.1	86.8	≥95	≥95	≥95
India	**70.7**	**72.3**	**76.0**	**80.0**	**83.9**	**82.5**	**83.8**	**86.2**	**87.6**	**86.6**	**84.9**	**84.8**	**93.1**	**≥95**	**≥95**

** Interim progress on 95-95-95 to be reconciled.*

04

IEC, YOUTH & MAINSTREAMING



IEC, YOUTH & MAINSTREAMING

4.1. Information Education and Communication

Information, Education and Communication (IEC) is a cross-cutting component of the National AIDS & STD Control Programme (NACP), seamlessly integrated across all thematic areas-from prevention and testing to treatment, care and support. Its role transcends mere messaging; IEC acts as a strategic enabler, connecting programmatic goals with community understanding, engagement and action. By embedding communication into every layer of service delivery, IEC ensures that interventions are not only technically sound but socially resonant. Through a dynamic multimedia approach-spanning mass media, mid-media, folk performances and digital platforms-IEC activities have significantly contributed to promoting positive health behaviours and reducing stigma and discrimination.

Campaigns are strategically crafted based on programmatic needs, with tailored messaging disseminated via television, radio, outdoor media, social platforms and even cinema halls to maximize reach. In remote areas, folk media has proven especially effective, with standardized regional scripts and trained troupes ensuring culturally resonant communication. Campaigns such as the Intensified IEC Campaign, implemented nationwide, foster awareness, encourage prevention among the general population, reduce stigma and discrimination and motivate individuals-especially in peri-urban and rural areas-to access HIV-related services. In 2024, the campaign was a resounding success, bringing together State leaderships, key departments, village-level functionaries and other stakeholders and reached over 22 million people across the country.

As IEC continues to evolve, its future lies in deepening community ownership, leveraging emerging technologies, and sustaining inclusive narratives that empower every citizen.

4.1.1. Youth Intervention

4.1.1.a. Red Ribbon Club (RRC):

The Red Ribbon Club (RRC) initiative engages youth aged 15-29 years, motivating them to adopt safe and healthy lifestyles. The RRCs serve as a platform to create awareness on HIV/AIDS, Sexually Transmitted Infections (STIs), voluntary blood donation and safe practices, while empowering young people to act as change agents both for the HIV/AIDS programme and within their communities.

The key objective of RRCs is to provide youth with accurate and comprehensive information, enhance their knowledge and equip them overall, to make responsible choices. As on March 2025, overall 14,925 functional RRCs were active in colleges across the country.

Major activities undertaken by RRC members include:

- Observation of important days and events such as International Youth Day, World AIDS Day and college festivals.
- Prepare the youth as peer educators and agents of change by enhancing their skills in leadership, communication and team building.
- Constitution of Joint Working Group (JWG) for youth at the State level to ensure effective coordination and smooth implementation of the programme.
- Organize awareness campaigns, street plays and rallies within colleges and communities to spread messages on HIV prevention, stigma reduction and voluntary blood donation.

4.1.1.b. Adolescent Education Programme (AEP):

AEP is one of the key interventions under NACP aimed at 'life skill development' among adolescents. The AEP helps them cope with negative peer pressure, develop positive behaviours, improve sexual health and prevent

HIV infections. The objective of AEP is to reinforce positive behaviours and strengthen life skills, enabling young people to protect themselves from risky situations. AEP is being implemented in Government schools in collaboration with NCERT. A 16-hour curriculum is delivered to adolescent students in classes IX and XI, covering more than 80,000 schools nationwide. The current status of the AEP's implementation is as follows:

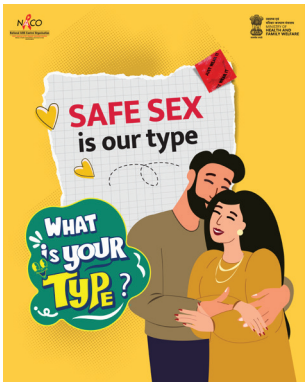
Status	State/UTs
Functional	Andaman & Nicobar Islands, Andhra Pradesh, Arunachal Pradesh, Assam, Bihar, Chandigarh, Chhattisgarh, Dadra & Nagar Haveli, Daman & Diu, Delhi, Goa, Gujarat, Haryana, Himachal Pradesh, Jammu & Kashmir, Jharkhand, Karnataka, Kerala, Mizoram, Manipur, Meghalaya, Maharashtra, Nagaland, Odisha, Puducherry, Punjab, Rajasthan, Sikkim, Tamil Nadu, Telangana, Tripura, Uttarakhand, Uttar Pradesh and West Bengal
Suspended	Madhya Pradesh

4.1.2. Social Media

In today's digital era, social media has emerged as a powerful tool for awareness, dialogue and community mobilisation. It is where conversations happen, ideas spread and communities connect. To keep pace with changing communication trends, NACO has strengthened its digital footprint with creative campaigns, interactive posts and dynamic storytelling. From awareness drives and myth-busting messages to live engagements and youth-focused initiatives, NACO's social media platforms are shaping a space where reliable information meets meaningful conversations, inspiring action towards ending HIV as a public health threat.

From events to **youth focused campaigns** like "HIV ka Punchnama" "This is my Type" or "Spill the tea", our focus has always been on placing the youth at the centre- because they are not only the largest audience online but also the true change-makers of tomorrow. While the campaigns are vibrant and youthful, the messaging is crafted in Hinglish- a tone that resonates equally with Tier 1, Tier 2 and Tier 3 cities, ensuring it feels natural, accessible and inclusive even for rural communities.





To make HIV/AIDS conversations relatable, we've seamlessly blended popular culture with awareness. Whether it's partnering with vocal personalities like **Bhumi Pednekar** and **RJ Naved**, amplifying inclusivity through **Sushant Digvijay** from the transgender community, or collaborating with talents like MTV Hustle featured rapper **Agsy** (Agrita Dhawan) and regional artists, every campaign is designed to speak the language of its audience.

The energy of our on-ground events like the **Red Run** and the nationwide buzz of **World AIDS Day**, inaugurated by **Hon'ble Union Health Minister Shri Jagat Prakash Nadda**, has seamlessly translated into our digital storytelling. The highlight of the year was the launch of a powerful anthem **#EkAisiDuniya** featuring renowned singers- an inspiring, hopeful composition that became much more than a song. It emerged as an anthem of solidarity, one that emotionally connected with millions and turned HIV awareness into a cultural moment.





This integrated approach - blending influencers, music, events, Hinglish messaging and trend-led campaigns has positioned NACO as one of the most

trusted digital voices in public health. Today, our platforms reached out to ***6 million people on Facebook, 7 million on Instagram and record over 1 lakh impressions per month on X***. These figures are not just statistics; they reflect the trust, relatability and inclusivity that millions of Indians associate with NACO.

Across India, NACO's platforms have established themselves as a trusted go-to friend- reliable, approachable and inclusive where HIV awareness translates into collective action.

At the heart of it all, our mission is to create a space that keeps people informed, educated and protected while breaking HIV stigma and strengthening **India's collective fight against HIV & AIDS.**











4.1.3. National Toll-Free AIDS Helpline 1097

The National Toll-Free AIDS Helpline- 1097 continues to serve as a critical and indispensable lifeline for individuals seeking confidential information, counselling, and support related to HIV/AIDS. Throughout the 2024-25 period, the helpline recorded 4,32,474 calls, providing round-the-clock assistance in 16 languages, ensuring accessibility across the entire country. This platform remains crucial in offering anonymous, stigma-free support to both the general public and high-risk populations.



4.1.4. Operational Highlights for 2024-25

- **Call Volume Trends:** The helpline maintained a consistent call volume throughout the year. Notably, call volume rose sharply from 37,891 in November to 97,484 in December, primarily driven by targeted outreach efforts and SMS-based promotional campaigns, reflecting the success of outreach and promotional efforts. However, this was followed by a sharp **76% decline in January 2025**, reflecting a seasonal drop in public engagement after the peak period.

- **Language and Geographic Trends:** The majority of calls were serviced in Hindi, followed by Bengali and Telugu, reflecting the linguistic diversity of callers. Significant call volumes were recorded from telecom circles covering Madhya Pradesh (MP) & Chhattisgarh, Andhra Pradesh & Telangana (AP&TS), and West Bengal. In contrast, regions like Jammu & Kashmir and parts of the North East showed lower levels of engagement, highlighting areas where further outreach may be necessary.

- **Peak Hours:** The helpline consistently experienced the highest call volumes between 11.00 AM and 12:00 P.M., across all months. Conversely, there was very low engagement during the early morning hours, particularly between 03:00 A.M. and 04:00 A.M., which is consistent with expected user behaviour patterns.
- **Purpose of Calls:** A consistent 99% of serviced calls were related to information dissemination and counselling, underscoring the helpline's primary role as both an educational and emotional support resource. These services were especially valuable in helping individuals cope with anxiety and uncertainty, particularly for those seeking confirmation of HIV test results and requiring counselling related to their status.
- **Abandoned Calls:** The helpline made significant strides in reducing the rate of abandoned calls, dropping from 10% in April 2024 to just 8% by March 2025.This notable improvement highlights enhanced call management practices and a stronger focus on service delivery throughout the year.

4.1.5. Emerging Trends and Observations

- **Gender and Age Dynamics:** While men continued to form the majority of callers, representing 92% of total calls, there was a noticeable increase in calls from women this year, reflecting the helpline's expanding reach across gender lines. The largest demographic of callers remained those in the 25 to 35-year age group, aligning with global trends indicating a heightened need for HIV awareness and testing among younger populations.
- **Counselling and Mental Health Support:** The helpline has proven to be an essential resource for addressing not only HIV-related queries but also mental health concerns. Many callers sought support for anxiety, depression and the social stigma associated with HIV. The impact of compassionate counselling has been transformative, as evidenced by numerous success stories where individuals reported feeling reassured and more confident in managing their health and well-being following counselling sessions.
- **Grievance Redressal via the Online Portal:** The helpline features a dedicated Online Grievance Redressal Management Portal. During the 2024-25 period, 469 grievances were registered and more than 89% of the grievances were successfully redressed within the stipulated timelines. These grievances predominantly relate to anonymity concerns, discriminatory attitudes towards PLHIV and challenges related to migration, Social Protection schemes. The efficiency of the grievance redressal system reflects the helpline's commitment to addressing the systemic and social challenges faced by PLHIV, thereby improving access to care and support.

4.1.6. Strategic Outlook for the Future

The data from 2024-25 reaffirms the helpline's role as a trusted and critical resource for HIV-related information, support and care, both for the general public and PLHIV. As the call volumes are expected to increase with continued promotional efforts, the helpline will focus on expanding its reach, especially in underrepresented regions and further reducing call abandonment rates. These efforts will ensure that seamless access to vital HIV information, testing support and care continues to be available to all who need it, further strengthening the national response to HIV/AIDS.

4.2. Mainstreaming & Partnership

The National AIDS & STI Response identifies mainstreaming as a vital strategy for strengthening the multi-sectoral response to HIV and AIDS. It focuses on expanding the reach of HIV prevention messages, ensuring stronger linkages to essential services such as testing and Anti-Retroviral Treatment (ART), supporting the implementation of the HIV and AIDS Policy for Establishments, 2022 to eliminate stigma and discrimination, and facilitating access to social protection schemes for people living with and affected by HIV. Through these measures, mainstreaming has contributed to reducing vulnerabilities, building awareness through training and sensitization, integrating HIV-related services within non-health sectors, and extending social protection benefits to marginalized communities.

Under the mainstreaming efforts of NACO and SACS, the State Council on AIDS (SCA) and the Legislative Forum on AIDS (LFA) have emerged as critical platforms for advancing a coordinated response to HIV in India. The SCA operates at the State level to facilitate interdepartmental collaboration, ensuring that HIV/AIDS interventions are integrated across departments and sectors. It provides strategic oversight, mobilizes resources and expands linkage to social protection to the people infected and affected by HIV. In parallel, the Legislative Forum on AIDS engages elected representatives to champion HIV-related issues by advocating for policy reforms and anti-discrimination measures. This forum plays a vital role in shaping public discourse and political commitment. Together, these bodies strengthen the institutional architecture of India's HIV response, bridging administrative execution with legislative advocacy to promote inclusion, accountability, and sustained impact. During 2024 and 2025, 13 States had organized the meeting of the State Council on AIDS (SCA).

Table 4.1. State wise SCA meeting Details (2024 & 2025)

S. No.	Name of State/ UT	Date of Meeting	Meeting Chaired by	Key outcome of the SCA meeting
1	Andaman & Nicobar Islands	09.07.2024	Chief Secretary, Andaman & Nicobar Administration	The meeting emphasized on the effective roll-out of MoUs across all departments and the strengthening of RRC activities in colleges and appointment of Nodal Officers in the island territory.
2	Assam	03.01.2024	Principal Secretary, Health & Family Welfare	The meeting emphasized the nomination of a Nodal Officer in each district to address all HIV/AIDS-related concerns. Following the deliberations, all Additional District Commissioners (Health) of all districts have been officially designated as Nodal Officers and will serve as Ombudsmen for HIV/AIDS-related matters.
3	Chandigarh	27.03.2025	Secretary (Health), Chandigarh Administration	Following the SCA meeting, all boards, departments and organisations were directed to adopt the HIV and AIDS Policy for Establishments (2022), nominate Complaint Officers and conduct employee awareness activities. As a result, several awareness initiatives were undertaken and 10 additional Complaint Officer nominations were received.
4	Chhattisgarh	08.08.2024	Chief Secretary, Government of Chhattisgarh	Outcomes of the SCA meeting included directives for all departments, PSUs and private industries to nominate Complaint Officers under the HIV/AIDS (P&C) Act, 2017 and integrate HIV-related content into all training curricula; the Government and private colleges will establish Red Ribbon Clubs (RRCs) and the children living with HIV (CLHIV) will be covered under sponsorship schemes.
5	Dadra & Nagar Haveli and Daman & Diu	19.11.2024	Health Secretary, DD & DNH	All departments participated in the SCA meeting, where it was resolved that each will nominate Complaint Officers. Additionally, HIV/AIDS awareness activities will be conducted for employees across all departments.
6	Goa	09.01.2024	Chief Secretary, Government of Goa	Key outcomes of the SCA meeting included the approval to raise the DSS scheme's income eligibility for PLHIV from ₹24,000 to ₹1.5 lakh, effective December 2024. Goa will subsequently convert 1,911 PLHIV paper bus passes into free smart transit cards. Eleven additional Complaint Officers were nominated, and two multi-sectoral trainings were held.
7	Madhya Pradesh	20.03.2025	Principal Secretary, Government of Madhya Pradesh	As an outcome of the SCA meeting, HIV-AIDS awareness was integrated into the National Health Mission's Umang Adolescent Health Programme through school sessions, street wall writings and peer-led outreach under the Sathiya initiative. Red Ribbon Clubs were strengthened with Nodal Officers in all colleges. HIV screening was initiated at de-addiction centres across Madhya Pradesh and districts were directed to ensure HIV and Syphilis testing for all pregnant women with linkage to treatment. Children living with HIV (CLHIV) were included in sponsorship schemes and free, replacement-free blood access was assured for all HIV-infected individuals in government and private healthcare facilities.

Table continued...

...Table continued

S. No.	Name of State/ UT	Date of Meeting	Meeting Chaired by	Key outcome of the SCA meeting
8	Mizoram	19.08.2024	Hon'ble Chief Minister of Mizoram	Free Baseline Investigation for ART initiation (Government borne the requisite expenditure for PLHIV baseline investigation for ART initiation).
9	Nagaland	06.06.2024	Hon'ble Health Minister, Government of Nagaland	As an outcome of the SCA meeting, the 'Health on Bikes' initiative was launched to deliver comprehensive health services in hard-to-reach areas across seven targeted districts.
10	Puducherry	10.07.2025	Chief Minister of Puducherry	As part of the 2025-26 Health Department provisions in Puducherry, monthly nutrition supplement packets worth ₹1,250 each will be provided to 1,256 PLHIV and CLHIV, with an annual budget of ₹1.88 crore. Funeral assistance of ₹15,000 will be extended to families of deceased PLHIV, with an annual allocation of ₹3.75 lakh. Additionally, annual educational scholarships will be offered to children of PLHIV across the Union Territory.
11	Punjab	21.08.2024	Hon'ble Health Minister of Punjab	As an outcome of the SCA meeting, the Department of Social Security & WCD accepted the proposal of inclusion of children infected and affected by HIV in financial assistance schemes. Gram Panchayats were directed to pass resolutions promoting zero stigma and discrimination against PLHIV, supported by the installation of 153 digital wall paintings on the HIV/AIDS (P&C) Act, 2017 and the Ombudsman's role in BDPO offices. A proposal for free transport for female PLHIV was submitted to the Transport Department. The Skill Development Mission was tasked with designing targeted programs for PLHIV and HRG in coordination with PSACS. The Department of Industry was instructed to ensure implementation of the HIV/AIDS Policy for Establishments and appointment of Complaint Officers in workplaces with over 100 employees.
12	Sikkim	05.10.2024	Hon'ble Chief Minister of Sikkim	As an outcome of the SCA meeting, financial assistance was extended to four CABA beneficiaries through the Women and Child Development Department. Nutritional support was mobilized from pharmaceutical companies under CSR initiatives. Multiple government departments collaborated to mainstream HIV/AIDS awareness and response within workplace policies.
13	Tripura	28.02.2025	Hon'ble Chief Minister of Tripura	As an outcome of the SCA meeting, each participating department will nominate a Nodal Officer to plan and implement HIV & AIDS prevention activities. Additionally, HIV/AIDS topics will be integrated into the curriculum and examinations for Classes IX–XII, with a dedicated allocation of 5 to 10 marks.

4.2.1. Status of Implementation of the HIV and AIDS Act

To address the challenges associated with HIV and AIDS, the Government of India enacted the HIV and AIDS (Prevention & Control) Act, 2017. The legislation is designed to prevent the spread of HIV, protect the rights of those affected and ensure dignity and equal access to services. It prohibits stigma and discrimination against people living with HIV/AIDS while also safeguarding the rights of healthcare providers.

In accordance with Section 12 of the Act, the HIV and AIDS Policy for Establishments was notified in 2022. This policy requires establishments to promote awareness, prevent workplace transmission, uphold the rights of individuals living with or affected by HIV/AIDS, provide a safe and non-discriminatory environment and maintain confidentiality of HIV-related data.

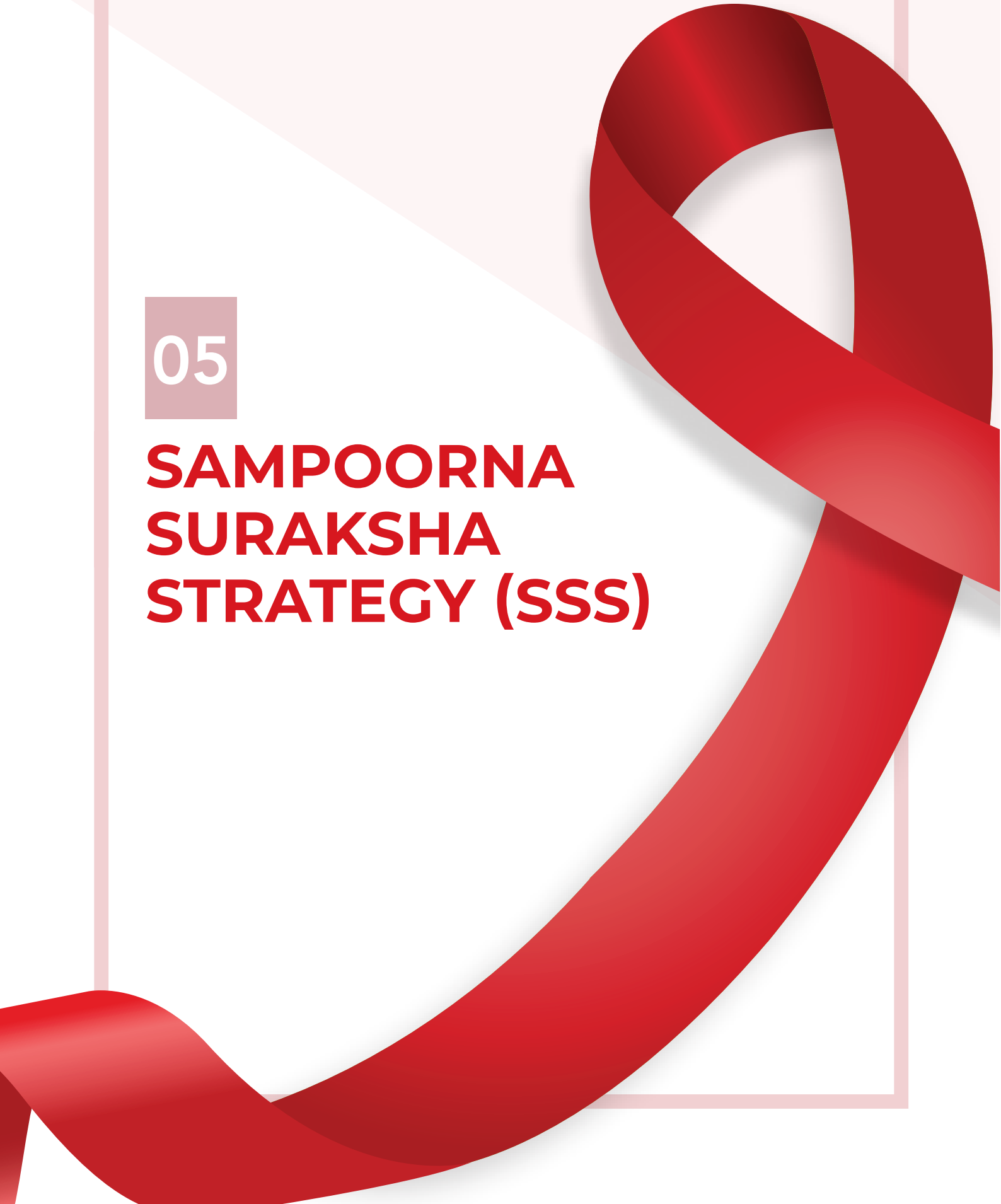
Furthermore, the Act establishes a grievance redressal mechanism through the appointment of an Ombudsman at the State level and a Complaints Officer at the establishment level, ensuring swift and effective resolution of complaints.

Table 4.2. State/UT-wise Status of 'Rules notification, Ombudsman, & Complaints Officer' for the FY 2024-25

Status of Rules notification		Status of Ombudsman		Complaints Officer deputed/ designated	
Yes	No	Yes	No	Yes	No
1. Andaman & Nicobar Islands 2. Andhra Pradesh 3. Arunachal Pradesh 4. Assam 5. Bihar 6. Chandigarh 7. Chhattisgarh 8. Delhi 9. Goa 10. Gujarat 11. Himachal Pradesh 12. Jammu & Kashmir 13. Karnataka 14. Jharkhand 15. Kerala 16. Madhya Pradesh 17. Maharashtra 18. Manipur 19. Meghalaya 20. Mizoram 21. Nagaland 22. Puducherry 23. Punjab 24. Rajasthan 25. Sikkim 26. Tamil Nadu 27. Tripura 28. Uttar Pradesh 29. West Bengal	1. DNH & DD 2. Haryana 3. Odisha 4. Uttarakhand 5. Telangana	1. Andaman & Nicobar Islands 2. Andhra Pradesh 3. Arunachal Pradesh 4. Assam 5. Bihar 6. Chandigarh 7. Chhattisgarh 8. DNH & DD 9. Delhi 10. Goa 11. Gujarat 12. Haryana 13. Himachal Pradesh 14. Jammu & Kashmir 15. Karnataka 16. Jharkhand 17. Kerala 18. Madhya Pradesh 19. Maharashtra 20. Manipur 21. Meghalaya 22. Mizoram 23. Mumbai 24. Nagaland 25. Odisha 26. Puducherry 27. Punjab 28. Rajasthan 29. Sikkim 30. Tamil Nadu 31. Tripura 32. Uttarakhand 33. Uttar Pradesh 34. West Bengal	1. Telangana	1. Andaman & Nicobar Islands 2. Andhra Pradesh 3. Arunachal Pradesh 4. Assam 5. Bihar 6. Chandigarh 7. Chhattisgarh 8. DNH & DD 9. Delhi 10. Goa 11. Gujarat 12. Haryana 13. Himachal Pradesh 14. Jammu & Kashmir 15. Karnataka 16. Jharkhand 17. Kerala 18. Madhya Pradesh 19. Maharashtra 20. Manipur 21. Meghalaya 22. Mizoram 23. Nagaland 24. Odisha 25. Puducherry 26. Punjab 27. Rajasthan 28. Sikkim 29. Tamil Nadu 30. Tripura 31. Uttarakhand 32. Uttar Pradesh 33. West Bengal	1. Telangana

05

SAMPOORNA SURAKSHA STRATEGY (SSS)



SAMPOORNA SURAKSHA STRATEGY (SSS)

5.1. Background

The HIV epidemic in India has evolved significantly over the past two decades. While the Targeted Intervention (TI) model under NACP reduced new infections among Key Populations (KPs), many individuals outside traditional high-risk groups remain vulnerable. These "At-risk" populations include walk-in clients at ICTCs, adolescents and youth, sexual and social networks, sexual partners of people living with HIV, and those reached through the National AIDS Helpline 1097, IEC materials, or virtual outreach.

To address this gap, the Sampoorna Suraksha Strategy (SSS) was introduced under NACP-V. Self-walk-in clients with perceived risk are screened using a Risk Assessment Tool, while routine clients visiting ICTCs are fast-tracked to reduce congestion. Clients identified as At-risk receive detailed counselling and a comprehensive package of preventive services, including HIV testing, STI/RTI management, syphilis and hepatitis screening, risk-reduction counselling, and linkages to care. The strategy also emphasizes community engagement and decentralization of services through the general health system, including mobile vans, motorbike outreach, and dedicated community outreach days by counsellors, to expand reach and reduce stigma while encouraging proactive health-seeking behaviour.

Under SSS, selected ICTCs and DSRCs were upgraded into **Sampoorna Suraksha Kendras (SSK)**. The pilot began with 25 centres in FY 2021–22, scaled to 150 centres across 150 districts in 20 states, and by FY 2024–25, 250 SSKs were functional across 27 states, with a target of 489 centres by 2027. Each SSK provides single-window services guided by client prioritization and streamlines linkages from TIs, ART centres, or antenatal clinics. During FY 2023–24, a total of 1,04,911 At-risk HIV-negative clients were enrolled, demonstrating the feasibility and impact of integrated prevention services. Programme monitoring is supported by the NORMS and SOCH platforms (Ref: Sankalak 2024; SSS Operational Guidelines – 2nd Cut; NACP-V Strategic Document).

5.2. Sampoorna Suraksha Kendra (SSK)

Under the Global Fund Grant 2021-24, 150 SSKs were established in two phases (75 in 2022 and 75 in 2023), with all centres reporting through the digital platform NORMS. Building on this, the Global Fund 2024–27 cycle approved expansion to an additional 339 SSK, taking the total target to 489 SSKs by 2027. By March 2025, 250 SSKs were functional across 27 state/UTs, providing services to 2,01,316 At-risk HIV-negative clients as seen in figure 5.1.

Each SSK functions as a single-window facility offering cyclical prevention services, including HIV testing, repeat testing, syphilis and hepatitis screening, STI/RTI management, and partner services. During FY 2024–25, a total of 1,60,317 attendees were tested for syphilis, of whom 4,813 (3.0%) were found reactive. Screening for hepatitis was also scaled up, with 90,514 clients tested for Hepatitis B (1,125 reactive; 1.24%) and 65,861 clients tested for Hepatitis C (1,753 reactive; 2.66%). These results highlight the added value of SSKs in broadening the HIV response beyond testing to integrated STI/Hepatitis prevention (figure 5.2).

Figure 5.1. Year wise Progress on SSK establishment and client registration

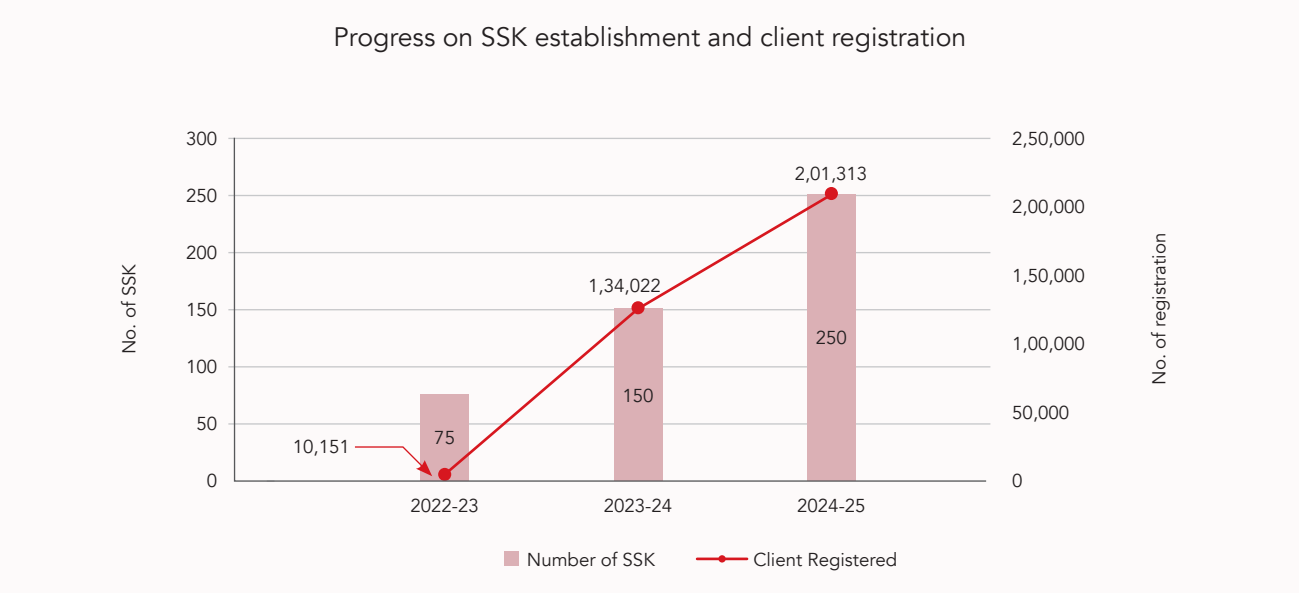


Figure 5.2. Services provided at Sampoorna Suraksha Kendra, FY 2024-25

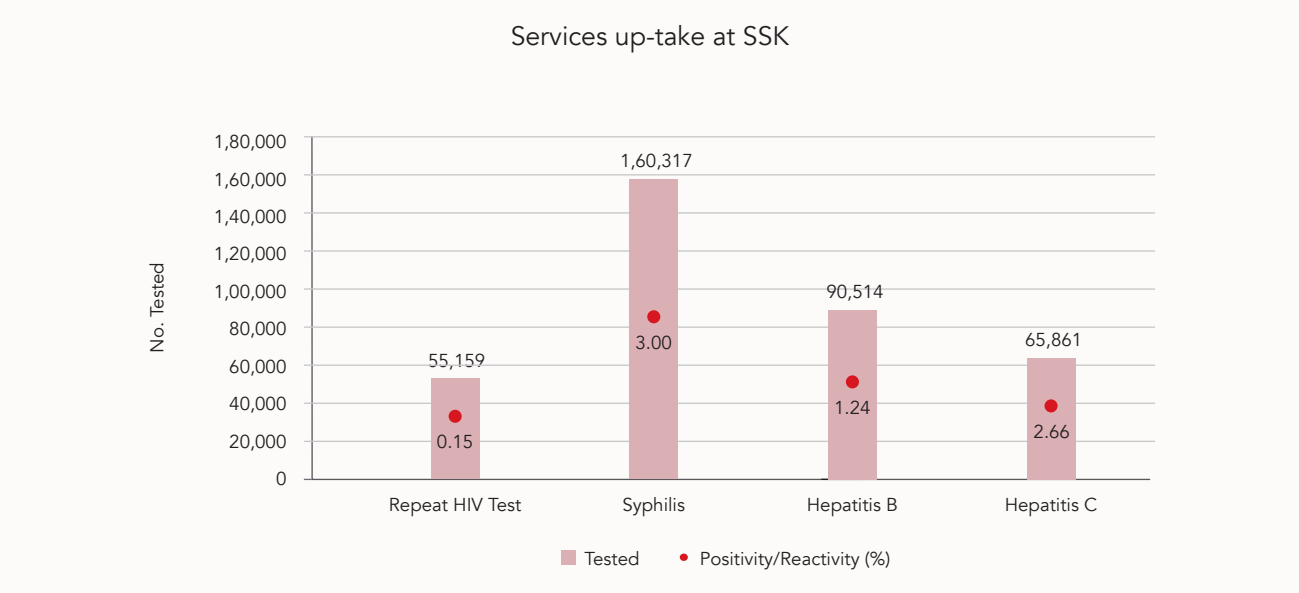


Table 5.1. Single Window Cyclical Service Provided at SSK for the FY 2024-25

S. No.	State/UT	Total centres	No. of Clients Registered	HIV test in subsequent visit			Syphilis			Hepatitis B			Hepatitis C			No. of Partners
				Tested	Positive	Positivity	Tested	Reactive	Reactivity	Tested	Reactive	Reactivity	Tested	Reactive	Reactivity	
	India	250	2,00,933	55,159	80	0.15	1,60,173	4,813	3.00	90,514	1,125	1.24	65,861	1,753	2.66	45,415
1	Andhra Pradesh	12	14,623	637	1	0.16	7,703	112	1.45	5,796	36	0.62	5,361	10	0.19	105
2	Arunachal Pradesh	3	891	2	0	0.00	408	150	36.76	285	7	2.46	278	4	1.44	4
3	Assam	14	2,081	204	0	0.00	704	36	5.11	41	0	0.00	31	0	0.00	50
4	Bihar	18	10,244	545	4	0.73	2,727	58	2.13	1,006	37	3.68	880	6	0.68	779
5	Chandigarh	1	883	415	0	0.00	1,199	32	2.67	1,294	1	0.08	1,295	7	0.54	107
6	Chhattisgarh	3	715	1	0	0.00	309	57	18.45	277	24	8.66	275	1	0.36	3
7	Delhi	8	7,650	485	13	2.68	1,297	56	4.32	193	8	4.15	104	0	0.00	555
8	Gujarat	15	12,000	1,272	4	0.31	8,903	712	8.00	3,363	22	0.65	3,120	3	0.10	934
9	Haryana	3	5,321	3,209	5	0.16	8,374	61	0.73	2,631	10	0.38	2,619	10	0.38	1,737
10	J&K and Ladakh	3	221	0	NA	NA	0	NA	NA	0	NA	NA	0	NA	NA	0
11	Jharkhand	3	1,309	1	0	0.00	889	23	2.59	489	18	3.68	399	10	2.51	11
12	Karnataka	7	6,406	82	2	2.44	4,157	33	0.79	3,624	20	0.55	3,292	0	0.00	396
13	Madhya Pradesh	19	29,600	9,758	2	0.02	35,196	716	2.03	17,683	63	0.36	4,897	6	0.12	19,393
14	Maharashtra	8	9,971	6,511	2	0.03	11,504	178	1.55	10,813	216	2.00	5,019	12	0.24	1356
15	Manipur	3	762	29	0	0.00	400	45	11.25	133	2	1.50	122	21	17.21	16
16	Meghalaya	5	1,043	3	0	0.00	863	594	68.83	92	0	0.00	79	0	0.00	304
17	Mizoram	8	2,570	401	9	2.24	479	105	21.92	304	4	1.32	306	22	7.19	51
18	Nagaland	3	1,757	3	0	0.00	1,129	67	5.93	756	4	0.53	902	10	1.11	27
19	Odisha	3	4,155	4	0	0.00	2,216	239	10.79	1,327	47	3.54	1,291	8	0.62	177
20	Punjab	17	9,283	4,503	21	0.47	6,348	361	5.69	3,617	96	2.65	2,987	1,168	39.10	562
21	Rajasthan	19	7,245	66	0	0.00	3,124	196	6.27	1,877	110	5.86	826	10	1.21	280
22	Tamil Nadu	3	952	17	0	0.00	946	104	10.99	920	6	0.65	916	2	0.22	9
23	Telangana	16	13,425	6,578	0	0.00	8,859	160	1.81	6,993	120	1.72	5,527	29	0.52	486
24	Tripura	2	366	1	0	0.00	160	4	2.50	105	0	0.00	0	0	0.00	1
25	Uttar Pradesh	35	40,838	20,026	16	0.08	44,614	342	0.77	22,247	194	0.87	21,002	388	1.85	16,700
26	Uttarakhand	6	1,455	127	0	0.00	402	18	4.48	459	1	0.22	286	0	0.00	473
27	West Bengal	13	15,167	279	1	0.36	7,407	354	4.78	4,189	79	1.89	4,047	26	0.64	899

Table 5.2. Risk Assessment conducted at ICTCs for FY 2024-25

State/UT	Risk Assessment Conducted				At-risk negative identified (Unique cases)				At-risk negative tested for Syphilis		Risk Assessment on At- risk client*						
	Female	Male	H/TG	Total	Female	Male	H/TG	Total	No. Tested	Reactive	Using/ sharing injecting drugs	Sexual partners (M/F/ TG)	Sexual relationship beyond Spouse/ partner	Bought Sex	Paid Sex	STI syndromes last 3 months	PLHIV Spouse/ Partner
India	23,93,522	25,32,838	7,667	49,34,027	2,38,727	3,53,224	2,601	5,94,552	91,901	2,141	32,105	82,827	3,37,318	99,001	60,883	1,16,001	78,213
A&N Islands	3,532	5,352	-	8,884	61	192	-	253	131	18	6	107	76	8	4	67	6
Andhra Pradesh	2,06,718	1,84,679	712	3,92,109	43,225	50,088	196	93,509	5,486	23	904	6,828	69,328	22,992	12,229	12,709	16,246
Arunachal Pradesh	7,357	7,066	1	14,424	607	1,163	1	1,771	1,274	134	618	132	117	26	25	950	41
Assam	46,546	47,841	65	94,452	4,804	10,314	22	15,140	4,451	174	5,070	1,265	4,787	1,343	1,001	4,537	892
Bihar	41,211	35,318	20	76,549	3,997	5,812	16	9,825	1,272	48	343	878	4,966	321	247	5,561	2,401
Chandigarh	6,236	3,826	32	10,094	763	751	3	1,517	932	33	27	212	634	39	42	652	227
Chhattisgarh	79,078	32,837	98	1,12,013	7,155	5,172	10	12,337	3,654	31	126	1,004	6,064	231	146	5,540	310
Delhi	6,305	12,047	14	18,366	530	1,939	7	2,476	46	2	195	404	1,233	402	72	446	428
DNH & DD	5,505	7,242	-	12,747	151	324	-	475	221	7	15	248	29	11	13	107	86
Goa	852	6,296	2	7,150	53	152	1	206	17	-	13	59	79	57	22	43	48
Gujarat	1,54,462	1,46,549	89	3,01,100	20,719	26,139	34	46,892	11,452	256	248	4,060	30,295	6,871	2,402	10,417	6,312
Haryana	45,843	63,589	267	1,09,699	2,976	6,090	23	9,089	932	8	1,346	1,809	3,298	1,125	582	1,982	861
Himachal Pradesh	27,244	44,438	4	71,686	213	1,304	-	1,517	376	3	188	814	285	38	14	111	137
JJ&K and Ladakh	3,916	4,761	4	8,681	65	509	1	575	21	1	87	304	86	48	15	107	33
Jharkhand	21,819	11,674	6	33,499	559	979	6	1,544	140	13	18	462	683	190	68	521	133
Karnataka	1,86,738	1,91,206	951	3,78,895	12,192	15,161	187	27,540	3,383	20	795	7,514	9,257	3,702	2,037	3,736	8,998
Kerala	62,554	90,458	487	1,53,499	3,603	13,219	147	16,969	517	93	728	3,059	10,690	5,899	3,646	2,214	1,565
Madhya Pradesh	2,59,417	1,68,957	124	4,28,498	20,043	22,226	21	42,290	14,625	139	479	5,626	25,264	4,002	2,912	8,708	2,732
Maharashtra	3,35,075	4,28,498	871	7,64,444	27,605	41,847	406	69,858	6,104	106	2,282	13,909	31,779	7,713	7,475	7,685	13,658
Manipur	19,910	30,391	226	50,527	1,514	5,405	20	6,939	1,545	12	3,371	587	1,314	1,370	577	492	376
Meghalaya	21,100	7,969	3	29,072	431	1,223	1	1,655	898	180	141	191	1,115	84	25	159	162
Mizoram	7,787	11,387	1	19,175	777	2,337	1	3,115	774	30	1,393	179	874	38	29	196	843
Nagaland	10,480	12,512	1	22,993	287	1,013	1	1,301	350	11	492	180	432	16	8	71	175
Odisha	94,373	1,31,247	1,197	2,26,817	4,639	15,850	131	20,620	4,026	154	525	3,196	12,243	7,040	3,617	5,614	699
Puducherry	13,700	12,930	95	26,725	76	173	95	344	215	25	7	200	155	136	136	32	77
Punjab	62,575	44,066	198	1,06,839	6,021	8,614	142	14,777	1,649	35	4,828	2,217	7,876	4,445	2,906	882	1,400
Rajasthan	65,990	79,268	3	1,45,261	2,569	3,347	1	5,917	411	28	208	882	1,225	1,152	699	719	2,367
Sikkim	340	532	-	872	59	103	-	162	81	23	2	36	36	6	8	83	30
Tamil Nadu	1,42,908	1,63,887	822	3,07,617	12,447	21,813	401	34,661	7,355	150	2,585	7,736	20,533	5,335	4,662	4,065	4,356
Telangana	1,03,476	1,22,553	307	2,26,336	22,474	27,826	132	50,432	5,853	33	3,102	4,196	38,695	8,080	5,038	4,498	5,866
Tripura	9,965	17,427	12	27,404	168	644	7	819	128	5	288	219	128	17	6	78	132
Uttar Pradesh	1,42,266	1,34,827	782	2,77,875	9,159	10,672	414	20,245	2,143	50	841	3,957	4,934	1,240	1,297	9,190	2,404
Uttarakhand	18,484	12,482	17	30,983	2,313	735	6	3,054	1,982	16	117	297	2,399	144	52	70	231
West Bengal	1,79,760	2,58,726	256	4,38,742	26,472	50,088	168	76,728	9,457	280	717	10,060	46,409	14,880	8,871	23,759	3,981

** Based on risk assessment questions in the ICTC-SOCH module, the At-risk individuals who provided a 'yes' response were considered.*

State-level analysis presented in table 5.1, highlights wide variation in service uptake and positivity rates across SSKs. Meghalaya recorded the highest syphilis reactivity (68.83%), followed by Arunachal Pradesh (36.76%) and Mizoram (21.92%). Hepatitis C reactivity was notably higher in Punjab (39.1%), Manipur (17%) and Mizoram (7%), indicating the need for targeted State-specific interventions. By contrast, large-volume states such as Madhya Pradesh, Maharashtra, and Uttar Pradesh contributed substantially to overall testing numbers but reported lower positivity rates, suggesting broader coverage with lower yield.

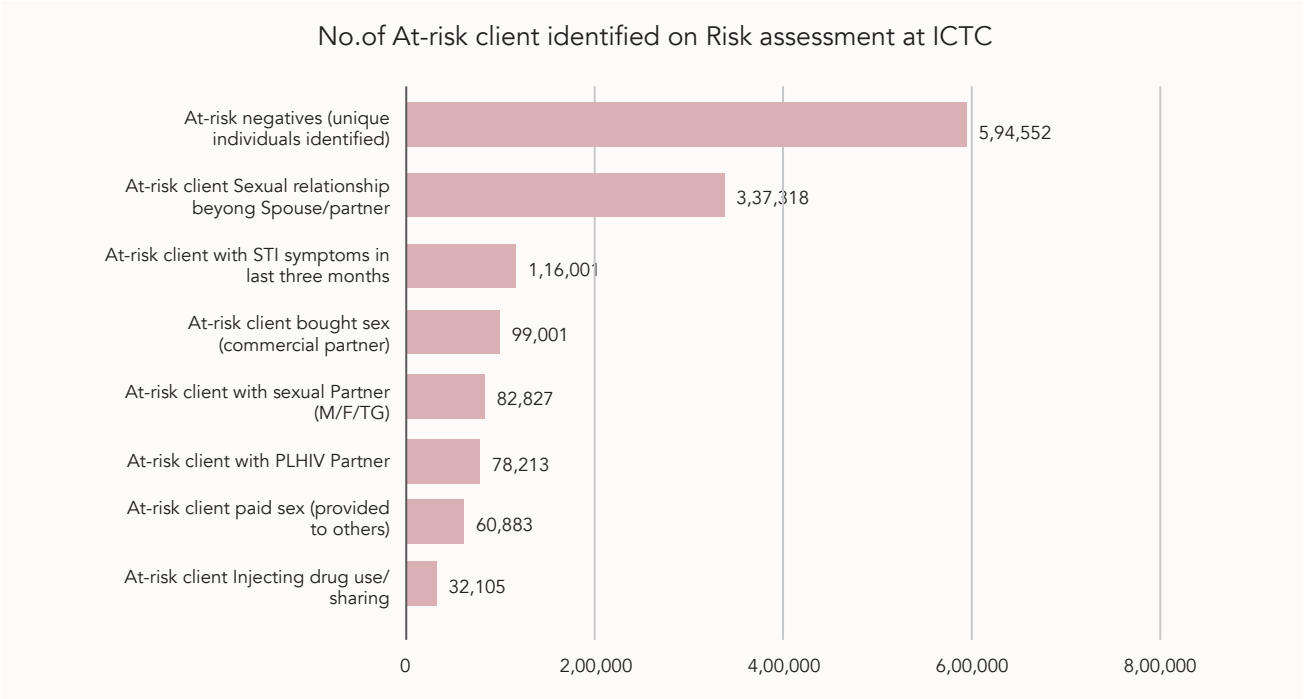
Overall, the SSK platform has demonstrated both scale and impact, successfully integrating HIV, STI, and Hepatitis services into routine ICTC/DSRC interventions. The findings provide evidence for further expansion of the strategy.

5.3. Risk Assessment

Risk assessment is a central feature of the HCTS Guidelines 2024, which mandate that ICTCs function not only as confirmatory sites but also as platforms for identifying and prioritizing At-risk HIV-negative clients. A structured tool with seven risk assessment questions (covering injecting drug use, partner type, non-regular partnerships, transactional sex, STI symptoms, and PLHIV partner status) has been introduced to enable counsellors to screen clients systematically. Clients who self-identify risk and/or identified 'At-risk' on risk assessment are provided comprehensive prevention services, while routine ICTC attendees are fast-tracked to reduce congestion.

During FY 2024-25, around 49.34 lakh clients underwent risk assessment across 3,922 reporting ICTCs. Of these, 5.94 lakh (12.1%) were identified as "At-risk" based on at least one affirmative response as seen in figure 5.3 and table 5.2 excluding the clients referred by TI. The most commonly reported risk factors among those who underwent risk assessment included non-regular sexual partnerships (6.8%), history of transactional sex (3.2% bought/paid), and STI symptoms in the past three months (2.4%). A smaller proportion of clients disclosed that their partner was living with HIV (1.7%) or that they were injecting drug users (0.7%). About 1 in 7 ICTC attendees were screened in FY 2024-25 identified as At-risk, underscoring the importance of systematic risk assessment for enrolling clients into prevention services.

Figure 5.3. At-risk client identified on Risk Assessment at ICTC, FY 2024-25



As detailed in table 5.2, notable state-level variations were observed. Maharashtra, West Bengal, Madhya Pradesh, Andhra Pradesh, Karnataka, Tamil Nadu, and Gujarat each reported more than 3 lakh clients screened, while Sikkim reported the lowest with only 872 clients. These findings highlight both the scale of implementation and the need for state-specific programmatic focus.

Risk assessment was also linked with integrated preventive services. In FY 2024-25, over 91,900 At-risk clients underwent syphilis testing, of whom 2,141 were reactive. The integration of syphilis and hepatitis screening within the 'At-risk' client service provision framework highlights the added value of SSS in expanding prevention beyond HIV testing alone. In addition, both At-risk HIV-negative clients and PLHIV are counselled and encouraged to share details of their partners and social networks, enabling the implementation of index testing and social network strategies. This approach ensures that partners and wider networks are reached and provided with comprehensive SSS interventions.

Services provided to STI attendees at DSRCs are discussed in detail in Chapter 7. As they are considered At-risk, these clients also receive cyclical prevention services based on risk screening conducted at DSRCs.

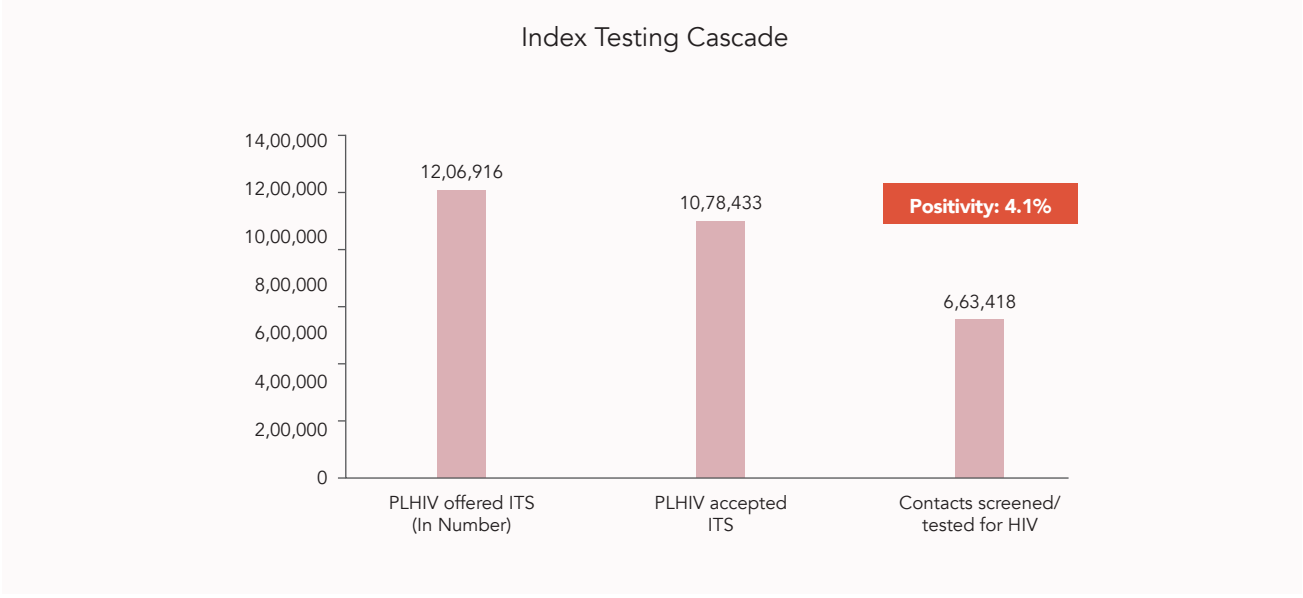
In sum, the ICTC-based risk assessment framework has enabled systematic identification of hidden At-risk populations beyond traditional HRGs. Nearly 5.94 lakh clients were newly enrolled into SSS interventions in FY 2024-25, providing a strong foundation for scale-up across all ICTCs. These findings have also informed the FY 2025–26 Testing targets, ensuring greater alignment of services to populations most in need.

5.4. Index Testing

Index Testing has emerged as a high-yield case-finding strategy and is elaborated extensively in the National HCTS Guidelines 2024. From April–November 2024, a nationwide campaign was initiated and subsequently routinized to ensure that Index Testing is offered to all eligible PLHIV at NACP facilities, rather than restricting it to newly identified cases at ICTCs as was practiced earlier. A SOCH-based reporting and dashboard system was rolled out to replace Excel-based reporting, enabling case-level monitoring, due-list generation, and identification of eligible contacts in real time.

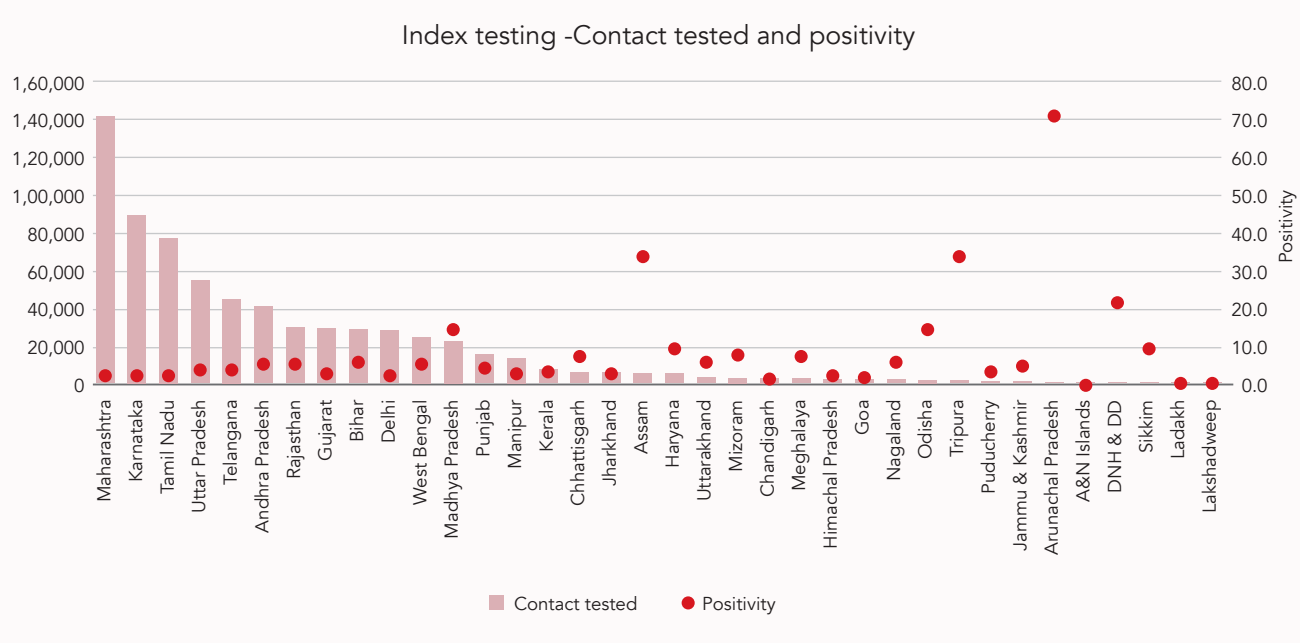
Index Testing Services (ITS), also known as partner notification, is a voluntary, client-centred approach to identify and test sexual partners, needle-sharing contacts, and biological children (<19 years) of PLHIV with the client's consent. During FY 2024-25, a total of 12.1 lakh PLHIV were offered ITS, of whom 10.8 lakh accepted. Overall, 6.6 lakh contacts (spouses/partners and children) were tested, yielding a positivity of 4.1% nationally (figure 5.4). Based on these findings, state/UT-wise targets for FY 2025-26 have already been set.

Figure 5.4. Index testing offered and tested, FY 2024-25



The positivity of Index Testing varied widely across state/UTs. Extremely high yields were reported from Arunachal Pradesh (73%), Assam (35%), and Tripura (35%), with Dadra & Nagar Haveli and Daman and Diu (22%), Madhya Pradesh (15%) and Odisha (15%) also recording higher-than-average yields (figure 5.5). Moderate positivity levels were noted in Sikkim (10%), Haryana (9.5%), Mizoram (7.9%), Meghalaya (7.7%), Chhattisgarh (7.6%), and Bihar (6.7%). Large-volume states such as West Bengal (6.1%), Rajasthan (6.0%), Andhra Pradesh (5.4%), Punjab (5.1%), Telangana (4.5%), and Uttar Pradesh (3.7%) contributed substantially to the number tested, though yields were closer to or below the national average.

Figure 5.5. State/UT-wise distribution of Index testing-Contact tested and Positivity , FY 2024-25



By contrast, some states reported consistently low yields (<3%), including Himachal Pradesh (2.7%), Karnataka (2.6%), Jharkhand (2.5%), Delhi (2.3%), Maharashtra (2.2%), Tamil Nadu (2.2%), Goa (1.8%), Chandigarh (1.5%), and Andaman & Nicobar Islands (0%). These results point to either saturation of testing among known partners or gaps in elicitation and follow-up.

Taken together, the data underscore both the scope for scaling up and the need for differentiated approaches. High-yield states with smaller volumes (e.g., Arunachal Pradesh, Tripura, DNH&DD) indicate the potential of index testing to uncover hidden positives, while large-volume states with moderate or low yields require programmatic strengthening of elicitation, counselling, and repeat follow-up. A more granular analysis of reactive contacts by type (spousal, non-spousal, and children) was carried out during the campaign using SOCH reporting, to guide programmatic refinements.

Thus, Index Testing has demonstrated strong potential for identifying undiagnosed PLHIV across diverse geographies, and its systematic scale-up will be critical for meeting NACP's 95-95-95 goals.

5.5. HCTS through Mobile and Outreach

HCTS through Mobile and Outreach is emphasized in the National HCTS Guidelines 2024 as a critical strategy to extend HIV testing and counselling services to hard-to-reach and underserved populations. They serve as an outreach arm of the NACP facilities, bringing confidential, stigma-free prevention and testing services directly to communities with limited access to facility-based services. Within the framework of the Sampoorna Suraksha Strategy (SSS), mobile vans and outreach complement NACP facilities by covering remote areas, urban hotspots, worksites, and transit

locations, thereby enhancing early case detection and linkage to prevention and treatment services. Their flexibility and mobility make them particularly effective in identifying "hidden" positives among populations who may not otherwise seek services.

During FY 2024-25, a total of 3.33 lakh clients were tested for HIV through 113 Mobile ICTCs across 21 state/UTs as presented in table 5.3, of whom 1,572 were diagnosed HIV positive, yielding an overall positivity of 0.47%—slightly higher than the national average HIV positivity of 0.40% reported from all testing modalities (Refer Chapter 8 on HCTS). This reinforces the value of mobile vans in expanding outreach and identifying hidden positives, particularly in remote and hard-to-reach areas. Based on these findings, state-wise mobile ICTC testing targets for FY 2025–26 have already been set.

Table 5.3. HIV Testing through Mobile Van in FY 2024-25

S.No.	State/UT	No. of Mobile ICTC	Client Tested	Positive	Positivity at Mobile ICTC	Positivity Over all
1	Andhra Pradesh	6	5,776	9	0.16	0.68
2	Arunachal Pradesh	2	1,988	46	2.31	0.64
3	Assam	2	4,468	76	1.70	1.56
4	Chandigarh	1	14,452	14	0.10	0.61
5	Chhattisgarh	3	16,418	41	0.25	0.54
6	Delhi	1	2,894	10	0.35	0.55
7	Gujarat	3	37,456	19	0.05	0.38
8	Haryana	1	7,148	48	0.67	0.68
9	Himachal Pradesh	2	4,108	14	0.34	0.22
10	Karnataka	12	48,584	87	0.18	0.32
11	Kerala	2	20,200	25	0.12	0.07
12	Maharashtra	13	83,487	324	0.39	0.28
13	Manipur	6	4,716	35	0.74	0.60
14	Meghalaya	3	1,346	60	4.46	1.14
15	Mizoram	9	6,993	360	5.15	1.79
16	Nagaland	12	11,416	194	1.70	1.09
17	Punjab	1	2,176	21	0.97	1.28
18	Tamil Nadu	16	40,382	142	0.35	0.19
19	Telangana	11	2,729	6	0.22	0.69
20	Uttarakhand	1	131	0	0.00	0.41
21	West Bengal	6	16,112	41	0.25	0.27
India		**113**	**3,32,980**	**1,572**	**0.47**	**0.40**

The yield from Mobile ICTCs showed distinct regional variations. North-Eastern states reported the highest positivity, with Mizoram (5.2%), Meghalaya (4.5%), Arunachal Pradesh (2.3%), Nagaland (1.7%) and Assam (1.7%) far exceeding the national average (table 5.3). Other states such as Punjab (1.0%) and Manipur (0.7%) also recorded higher-than-average yields. By contrast, large-volume states such as Maharashtra (0.39%), Tamil Nadu (0.35%), Delhi (0.35%), and Chhattisgarh (0.25%) contributed substantially to the total number tested but reported lower yields. Very low yields were observed in Gujarat (0.05%), Chandigarh (0.10%), and Kerala (0.12%),

suggesting underperformance and the need for route map planning and deployment strategies.

Overall, the data highlight a dual opportunity: in high-prevalence regions such as the North-East, Mobile ICTCs demonstrate strong potential to detect a greater proportion of hidden positives, while in lower-prevalence, large-volume states, programmatic adjustments are required to optimize deployment, targeting, and follow-up through carefully planned route map based on local intelligence. Strengthening linkages from mobile ICTCs to ICTC/DSRCs and ART centres will be essential to ensure timely confirmation, treatment initiation, and partner services.

Complementing these mobile strategies, the HCTS Guidelines 2024 also place strong emphasis on counsellor-led outreach as a routine extension of facility-based services. Each counsellor is expected to devote at least two days per week for field-based activities, focusing on systematic follow-up of missed At-risk clients, unreached index testing contacts, and their wider social networks, while also organising community-based outreach camps. In addition, motorbike-based outreach has been introduced in difficult-to-reach geographies to ensure last-mile coverage where even mobile vans cannot operate, with 93 bikes deployed across ten states to conduct outreach activities in challenging terrains. Conducted in partnership with local bodies, outreach workers, and peer educators, these camps deliver HIV testing, STI/Syphilis screening, counselling, and partner services directly within communities—reducing stigma, ensuring continuity of care, and uncovering "hidden At-risk" populations who might otherwise remain outside the programme's reach.

5.6. Conclusion

The Sampoorna Suraksha Strategy has established a unified prevention platform that brings together fixed-site SSKs, ICTC-based risk assessment, partner services, and mobile ICTCs to expand the reach of HIV prevention beyond traditional key populations. The evidence from FY 2024-25 demonstrates both scale and differentiation—addressing hidden risk in the general population, reaching high-burden geographies such as the North-East, and integrating services for syphilis and hepatitis alongside HIV. Going forward, the programmatic focus must remain on sustaining high coverage while sharpening yield through risk prioritization, partner engagement, and targeted outreach, ensuring that prevention services are embedded in the across NACP facilities and contribute effectively toward national 95-95-95 goals.

06

PREVENTION OF NEW HIV/STI INFECTIONS AMONG HIGH-RISK GROUP AND BRIDGE POPULATION



PREVENTION OF NEW HIV/STI INFECTIONS AMONG HIGH-RISK GROUP AND BRIDGE POPULATION



6.1. Background

Prevention of HIV and STI infections among High-Risk Groups (HRGs) and Bridge Populations, is one of the core strategies of National AIDS and STD Control Programme (NACP). High-Risk Groups (HRGs) includes Female Sex Workers (FSW), Men who have Sex with Men (MSM), People who Inject Drugs (PWID), and Hijra/Transgender persons (H/TG) and the population incarcerated in Prisons as well as OCS. Migrants and Transport workers are categorized as Bridge Populations. Prevention services are provided to the above groups of population through prevention projects like Targeted Interventions Projects (TI) and Link Worker Schemes (LWS), through establishment of Opioid Substitution Therapy (OST) centres, and interventions in Prison and Other Closed Settings (P& OCS).

Under NACP, prevention projects (TI and LWS) are implemented through social contracting of Non-Governmental Organizations (NGOs) and Community-Based Organizations (CBOs) by State AIDS Control Societies (SACS). The prevention projects are strategically located in the urban and rural areas to cover selected target groups, guided by scientific evidence generated through mapping and population size estimations (p-MPSE) as well as field intelligence. Interventions for populations in Prison and Other Closed Settings (P&OCS) are implemented in collaboration with State Prison Department, Department of Women and Child Development, Department of Social welfare, and other line departments at the state level.

Among the preventive services, Opioid Substitution Therapy (OST) is a crucial harm reduction strategy under NACP and plays a significant role in reducing the risks of HIV and other blood-borne infections among PWIDs. OST primarily involves treatment of opioid dependent PWIDs with a long-acting opioid agonist medication in the form of Buprenorphine and Buprenorphine–Naloxone administered sublingually, which helps to minimize cravings and withdrawal symptoms, thereby aiding in the cessation of injection drug use. OST helps to significantly reduce drug-related harms, including socio-legal, physical and psychological harms and is considered as first line treatment for long term pharmacotherapy of opioid dependence. Under the NACP, OST is mainly provided as a "Directly Observed Treatment" in clinic-based OST Centres under trained medical supervision, with provision of take-home doses available for stable clients. The OST is implemented through three delivery models namely the Collaborative Model located in public health settings, the NGO Model located at TI NGOs, and the Satellite Model located at various facilities such as CHCs, PHCs, Health & Wellness Centres as well as in the Prisons and Other Closed settings.

NACP offers comprehensive package of services across the HIV and STI Prevention, Testing and Treatment cascade to HRGs and Bridge Populations through a "Peer Led" outreach model. Focus is given to identifying new HRGs, exploring their social and sexual networks, and expanding outreach beyond the traditional areas, targeting

emerging hotspots including spa and massage parlour sites, spouses and partners of HRGs, index testing, peer navigation for linking HRG People Living with HIV to to Anti-Retroviral treatment (ART) Centre and inclusion of risk assessment among bridge populations etc. The recently updated guidelines for Bridge population interventions has revised the definition of Bridge Population to be more inclusive and broad based, so as to cast the net wide and identify high risk behaviours putting people at risk of HIV and STI.

Focus is also given to secondary distribution of needle and syringes (SDNS) and establishing satellite OST centres to bring services for PWID population to bring services in the vicinity of the community.

The impact of the prevention programme is demonstrated by its effectiveness in increasing the coverage of HRGs and bridge population with a comprehensive range of prevention services. This has been achieved through extensive community outreach, strengthening referrals and linkages. SACS conducts six monthly appraisals of NGO/CBOs implementing TI projects to assess the progress of the projects in the important indicators. Third parties conducts external evaluations of the NGOs/CBOs implementing TI projects. Currently the Global Fund Grant supports these evaluations. The key components and service delivery framework of TI projects are outlined in the table 6.1 below;

Table 6.1. Components and Service Delivery Framework of Targeted Intervention Projects

Components	Activities for Service Delivery*	Strategic Places /locations of Service Delivery
Behaviour Change Communication	Interpersonal Communication (IPC), Counselling, One-to-One, One-to-Group Sessions, Use of SBCC Materials, NACO Help Line	• Drop-In Centre (DIC) • Static Clinic • Preferred Public Providers (PPP) • Health Camps • Hotspots • Congregation Sites / Halt Points • OST Centers (Public Health Facility/ NGO run OST center/ Satellite OST Centers • Secondary Distribution of Needle/Syringe Sites • Referred Centers
Clinical Services	Syndromic Case Management, Syphilis Screening (Biannual) and treatment, Regular Medical Check-ups, Counselling and Follow-up visits, Partner management, Opioid Substitution Therapy (OST) for PWID, Abscess Management in the Static clinic set up in TI /Through referral or health camps	
Commodity Provision	Condoms, Lubes, Clean Needle/Syringes etc. are distributed through Peers, Outreach team, secondary distribution centres	
Referral and Linkages	Referral to ICTC, ART, DSRC, Preferred Providers, TB, Other referred Centres as per the demand of the Community	
Enabling Environment	Advocacy, Liaison with Key Stakeholders such as Community Gate Keepers like Dera Heads, Police, Lawyers etc. Networking	
Community Mobilization	Mobilization of Community Groups, Strengthening of CBOs and Community Systems	

**Service delivery activities and locations/places of service delivery varies based on the types of subgroups of population covered under TI*

Detailed analysis of services provided to HRGs and Bridge Populations through these projects (TI, LWS and OSTC) is provided in the subsequent paragraphs. The state wise distribution of prevention projects operational during FY 2024-25 is placed below at table 6.2.

Table 6.2. State/UT-wise Distribution of Prevention Projects as of 31st March 2025

State/UT	Targeted Intervention (TI)	Link Workers Scheme (LWS)	Opiod Substitution Therapy Centre*
A&N Islands	1	0	0
Andhra Pradesh	96	13	2
Arunachal Pradesh	33	0	5

State/UT	Targeted Intervention (TI)	Link Workers Scheme (LWS)	Opiod Substitution Therapy Centre*
Assam	73	1	6
Bihar	13	3	2
Chandigarh	12	0	4
Chhattisgarh	44	6	6
DNH & DD	0	0	0
Delhi	79	0	12
Goa	16	0	1
Gujarat	95	11	2
Haryana	43	0	13
Himachal Pradesh	18	0	2
J&K and Ladakh	25	0	6
Jharkhand	33	0	3
Karnataka	80	5	2
Kerala	64	0	10
Madhya Pradesh	72	9	18
Maharashtra	174	21	3
Manipur	53	9	26
Meghalaya	11	2	6
Mizoram	36	8	17
Nagaland	49	10	32
Odisha	52	7	5
Puducherry	4	0	0
Punjab	71	7	35
Rajasthan	40	1	3
Sikkim	6	0	4
Tamil Nadu	87	17	1
Telangana	53	9	1
Tripura	13	2	6
Uttar Pradesh	92	9	21
Uttarakhand	37	0	8
West Bengal	44	11	8
India	**1,619**	**161**	**270**

** This includes OSTCs located in the public health settings and in NGO settings. In addition to this, there are 187 Satellite OSTC, the state wise distribution of which is given in table 6.10.*

NACO with the support of Global Fund Grant established Kshamta Kendras (KKs) to build the capacities of TIs/LWS staff. These centres provide comprehensive training to enhance programmatic, technical, and managerial skills, thereby improving service delivery and overall programme efficiency.

As of March 2025, a total of 19 Kshamta Kendra have been established across 19 States, extending capacity-building support to all State and District AIDS Control Societies (SACS/DACS) nationwide. The state wise locations of Kshamta Kendra and districts are placed at table 6.3.

Table 6.3. State/UT-wise Distribution of Kshamta Kendra location and district

State/UT	Location of Kshamta Kendra (KK) District	Language Competency
Assam, Meghalaya, Arunachal Pradesh, Sikkim	Guwahati	Assamese, Hindi, English
Bihar, Chhattisgarh, Jharkhand	Patna	Hindi
Chandigarh, Himachal Pradesh, J&K, Ladakh, Punjab	Mohali	Hindi, Punjabi
Delhi, Haryana, Uttarakhand	Delhi	Hindi
Gujarat, Daman & Diu, Dadra and Nagar Haveli	Kutch	Gujarati
Karnataka	Mysore	Kannada
Kerala, Lakshadweep	Thiruvananthapuram	Malayalam
Madhya Pradesh	Bhopal	Hindi
Maharashtra	Nagpur	Marathi
Manipur	Imphal	English
Mizoram	Aizawl	English
Mumbai, Goa	Mumbai	Hindi
Nagaland	Kohima	English
Odisha	Sundargarh	Odia
Rajasthan	Jaipur	Hindi
Tamil Nadu, Puducherry	Dindigul	Tamil
Telangana	Warangal	Telugu
Uttar Pradesh	Prayagraj	Hindi
West Bengal, Tripura	Kolkata	Bengali

To reach last mile At-Risk populations and strengthen prevention initiatives under NACP, One Stop Centres (OSC) have been established with support from the Global Fund Grant. These One Stop Centres (OSCs) are an integrated service delivery model established in community settings with the objective of providing a comprehensive package of services to key population groups (H/TG and PWID), Bridge Populations, and their partners through a person-centric approach. A total of 74 OSC centres are established across 25 States (64 districts) covering PWIDs, Hijra/Transgender persons and Bridge Populations. As of March 2025, around 60,323 Bridge Population, 14,584 PWIDs and 10,080 Hijra/Transgender persons were provided services through OSC. The state and typology wise distribution of OSC established is placed at table 6.4.

Table 6.4. State-wise distribution of One Stop Centres, as of 31st March, 2025

S.No.	State	Bridge Population	Hijra / Transgender Persons	People Who Inject Drugs	Total
1	Arunachal Pradesh	0	0	2	2
2	Assam	2	2	2	6
3	Bihar	0	1	1	2
4	Chhattisgarh	0	1	1	2
5	Delhi	2	2	2	6
6	Gujarat	3	0	0	3
7	Haryana	2	0	2	4
8	Himachal Pradesh	2	0	1	3
9	Jammu & Kashmir	1	0	1	2
10	Jharkhand	3	1	0	4
11	Karnataka	1	2	0	3
12	Kerala	0	1	0	1
13	Maharashtra	4	2	0	6
14	Madhya Pradesh	0	2	0	2
15	Manipur	1	-	0	1
16	Mizoram	0	0	1	1
17	Meghalaya	1	0	0	1
18	Nagaland	0	0	1	1
19	Odisha	3	0	0	3
20	Punjab	0	1	0	1
21	Tamil Nadu	3	1	0	4
22	Telangana	1	0	0	1
23	Tripura	0	0	4	4
24	Uttar Pradesh	4	2	1	7
25	West Bengal	1	2	1	4
Total		**34**	**20**	**20**	**74**

6.2. Coverage of HRG and bridge population through TI Projects: An overview

In the financial year 2024-25, 1,619 Targeted Intervention Projects (TIs) were on boarded out of the sanctioned 1,698 TIs as per the Annual Action Plan (AAP) 2024-25 (table 6.5). The coverage of High-Risk Groups (HRGs) and the Bridge Population against the estimated population was 90% or more, except for transport workers which was at 55%. Notably, HRG coverage has increased in 2024-25 with Hijra/Transgender up by 18%, PWID up by 13%, FSW up by 10% and MSM up by 8% from 2023-24. Among the bridge population, coverage of migrants remained above 95%. However, coverage of transport worker was stable as compared to last year's coverage.

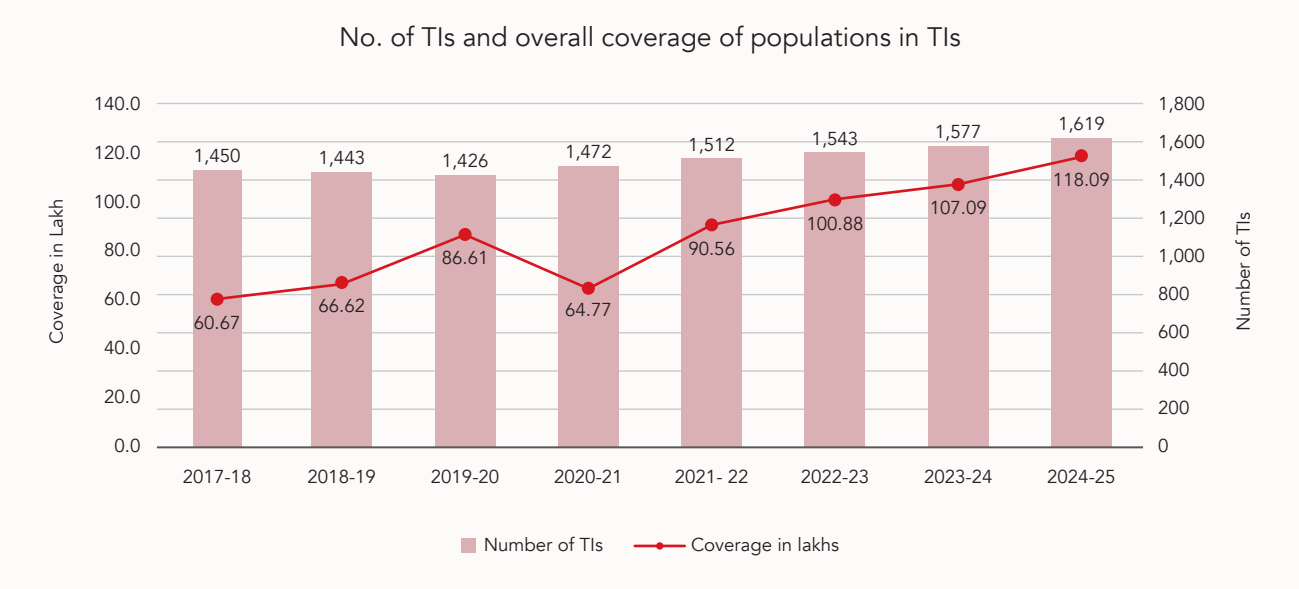
Table 6.5. Typology wise number of TIs and population coverage against the mapping estimates, FY 2024-25

S.No.	Typology	Mapping Estimates (in lakh)[a]	Coverage				Percentage Coverage against the Mapping Estimates
			Exclusive	Through Composite[b]	Total Unit (Excl.+Comp)[c]	Coverage (in lakh)	
1	Female Sex Workers	9.95	293	646	939	11.84	≥95
2	Men who Have Sex with Men	3.51	69	554	623	4.21	≥95
3	Person who Injects Drugs (PWID)	2.89	210	326	536	2.94	≥95
4	Hijra/Transgender	0.96	41	340	381	1.03	≥95
6	Migrants	72	201	51	252	87.08	≥95
7	Transport Workers	20	74	47	121	10.99	55
8	Core Composite	-	731	-	-	-	-
Total		**109.31**	**1,619**			**118.09**	**≥95**

The details of last 8 years' achievements of number of TIs and total population covered is given in the figure 6.1 below:

The figure 6.1 below shows that the pace of overall coverage of HRGs and the bridge population have consistently increased since 2021. The focus on new registration of populations, extended outreach activities beyond the TI catchment area, reaching out to social and sexual network of HRGs, revision of Bridge population guidelines have contributed to the increased coverage under TI projects.

Figure 6.1. Year-wise number of TIs and overall coverage of populations in TIs, from FY 2017-18 to FY 2024-25



[a] Last mapping and population size estimation of FSW, MSM, IDU and H/TG population conducted in 2020-22. For Migrant and trucker's population, the size estimate is from 2008-09.

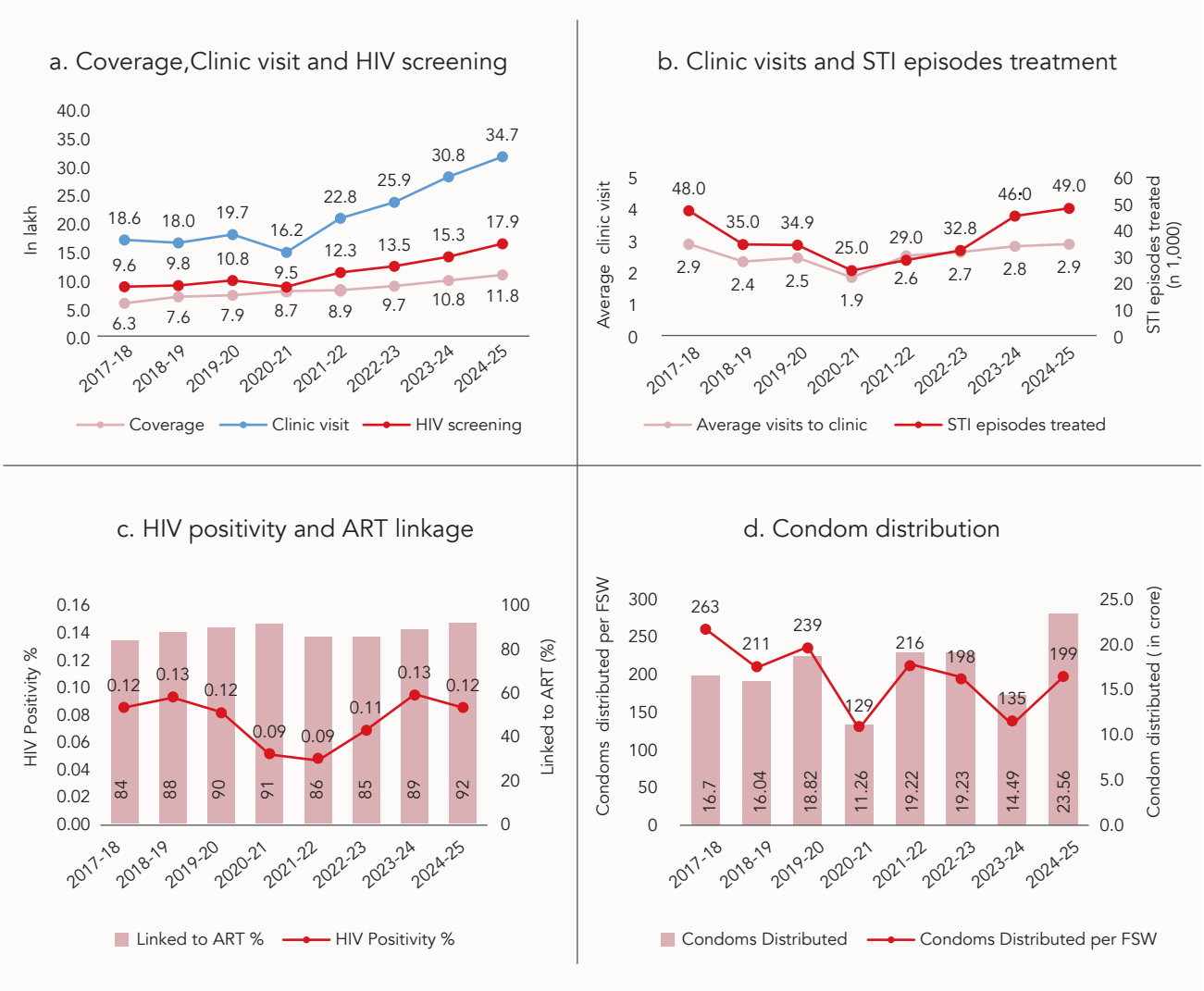
[b] Under Composite intervention more than one typology is covered in a TI.

[c] Total units refers to number of interventions implemented either through exclusive or composite interventions.

6.3. FSW Coverage through TI projects

Overall, around 11.84 lakh FSW were covered in 2024-25, with an increase of approx. 1.09 lakh FSW compared to the previous year 2023-24 (figure 6.2). TI projects focussed on reaching the unreached, new registration of sex workers, covering spa and massage parlours & network operators, strengthening outreach activities beyond the TI catchment areas, expanding reach to their social and sexual networks. This approach has led to an increase in the overall coverage of the population with services. The total clinic visits by FSW in TIs showed a significant increase reaching approximately around 34.68 lakh in 2024-25, up from around 31 lakh in 2023-24. The average number of clinic visits by FSW also increased from 2.8 lakh in 2023-24 to 2.9 lakh in 2024-25. Out of the total clinic visits, around 1.4% (49,455) of them were treated for STI during 2024-25 (table 6.6).

Figure 6.2. Key prevention services provided to FSW, from FY 2017-18 to FY 2024-25



HIV screening among FSWs increased to 17.9 lakh in 2024-25 from 15.3 lakh in 2023-24, with 2,214 FSWs detected HIV positive. The HIV sero-positivity rate among FSWs declined from 0.13% in 2023-24 to 0.12% in 2024-25. ART linkages for HIV positive FSWs improved from 89% to 92%, indicating improved linkages to treatment services. The provision of free condom distribution increased in 2024-25 to a tune to around 23.56 crore compared to the overall distribution of around 14.49 crore in 2023-24.

Twenty-five state/UTs reported over 95% or more coverage against the estimated FSW population, with Assam showing the lowest coverage of around 51% (table 6.6). Mizoram has the highest HIV sero-positivity rate among FSWs at 1.18%. Fifteen States/UTs achieved ART linkages of 95% or more for HIV positive FSW. Efforts were made to link all the identified HIV-positive HRGs to ART centres through peer navigation. Around 16.94 lakh syphilis screenings were conducted, out of which around 1,480 syphilis positive cases detected with sero-positivity at 0.09% at the national level. The state/UT-wise distribution of FSW coverage in key service parameters during 2024-25 is given in table 6.6.

Overall, 2024-25 data shows significant progress in coverage, clinic visits, HIV screening, STI screening and treatment and ART linkages.

Table 6.6. State/UT-wise coverage of FSW in key service parameter, FY 2024-25

State/UT	Total Coverage	Coverage (%)	Clinic Visit (in lakh)	STI Treated	Syphilis Screening (in lakh)	Syphillis positive detected	Condom Distribution (in lakh)	HIV screening (in lakh)	HIV Positive detected	Linked to ART	ART Linkages (%)
A&N Islands	177	-	0	2	0	4	0.02	0	0	0	-
Andhra Pradesh	1,55,601	>95	5.07	1,612	2.35	5	467.29	2.56	149	76	51
Arunachal Pradesh	7,651	>95	0.2	252	0.12	85	8.93	0.12	6	3	50
Assam	20,415	51	0.64	1,153	0.33	175	40.27	0.34	39	42	>95
Bihar	6,230	53	0.2	155	0.1	37	18.45	0.1	21	19	90
Chandigarh	7,928	>95	0.12	165	0.06	1	14.18	0.09	33	32	>95
Chhattisgarh	27,605	>95	0.91	2,595	0.47	130	73.06	0.47	153	142	93
DNH&DD	-	-	-	-	-	-	-	-	-	-	-
Delhi	86,355	>95	2.3	3,162	0.79	28	113.37	1.18	114	100	88
Goa	7,335	>95	0.26	183	0.12	4	21.88	0.13	5	4	80
Gujarat	35,085	95	1.24	2,139	0.63	46	144.14	0.64	35	36	>95
Haryana	18,411	>95	0.5	1,532	0.25	40	29.34	0.29	90	64	71
Himachal Pradesh	11,417	86	0.36	1,448	0.2	14	16.96	0.2	22	17	77
Jammu & Kashmir Ladakh	3,583	77	0.11	946	0.05	0	0.81	0.07	1	1	>95
Jharkhand	22,132	>95	0.7	1,170	0.34	8	29.58	0.35	9	9	>95
Karnataka	1,69,448	>95	4.88	5,669	2.5	140	208.3	2.4	341	325	95
Kerala	31,643	>95	0.66	456	0.28	17	32.07	0.32	9	6	67
Madhya Pradesh	54,107	>95	1.67	3,515	0.86	107	82.4	0.87	117	110	94
Maharashtra	1,06,409	>95	3.66	6,971	1.83	50	302.27	1.72	184	177	>95
Manipur	7,032	>95	0.21	150	0.09	4	14.36	0.08	12	11	92
Meghalaya	2,454	74	0.09	236	0.04	25	4.41	0.04	17	21	>95
Mizoram	1,273	89	0.04	120	0.02	31	3.65	0.02	21	20	95
Nagaland	4,494	>95	0.15	48	0.08	4	7.83	0.08	10	7	70
Odisha	17,770	72	0.63	2,120	0.29	33	36.28	0.31	42	39	93
Puducherry	4,296	>95	0.11	57	0.06	6	9.19	0.06	2	2	>95
Punjab	27,219	>95	0.74	986	0.28	52	52.31	0.37	63	69	>95
Rajasthan	20,346	>95	0.64	1,429	0.26	23	41.58	0.29	15	15	>95
Sikkim	1,110	>95	0.03	52	0.02	77	2.83	0.02	0	0	-
Tamil Nadu	63,174	>95	1.15	1,547	0.8	141	79.79	0.84	86	85	>95
Telangana	1,86,403	>95	5.17	3,801	2.56	76	322.47	2.78	453	453	>95
Tripura	6,056	>95	0.15	108	0.07	7	5.54	0.07	13	10	77
Uttar Pradesh	43,300	>95	1.16	4,001	0.61	38	89.65	0.63	94	81	86
Uttarakhand	7,721	>95	0.26	955	0.13	8	18.94	0.13	15	14	93
West Bengal	19,882	>95	0.65	720	0.33	64	63.62	0.32	43	42	>95
India	**11,84,062**	**>95**	**34.68**	**49,455**	**16.94**	**1,480**	**2,355.80**	**17.87**	**2,214**	**2,032**	**92**

6.4. MSM coverage through TI projects

In 2024-25, 4.21 lakh MSM were covered, an increase of over 0.30 lakh MSM from the previous year coverage (figure 6.3). This increase is due to TI Projects (TIs) focus to reach the new MSM populations, strengthening outreach activities, and enhancing coverage through social and sexual networks. Clinic visits by MSM increased significantly to 12.29 lakh in 2024-25 from 10.60 lakh in 2023-24, with each MSM visiting three times on an average per year. Out of the total visits, around 13,075 episodes of STI were treated. Around 6.02 lakh syphilis screening was done among MSM, with 2,114 tested positive resulting in a sero-positivity rate of 0.35% nationally.

HIV screening among MSM also increased from 5.25 lakh in 2023-24 to 6.14 lakh in 2024-25, where in 2,356 MSM were diagnosed HIV positive. The sero-positivity rate remained at 0.38% as was in 2023-24 at national level. The percentage of HIV-positive MSM linked to ART slightly declined from 93% to 92%, indicating gaps in linkages to treatment services. The provision of free condom distribution increased in 2024-25 to around 7.33 crore compared to 4.70 crore in 2023-24.

Twenty-nine state/UTs reported coverage of 95% or more against the estimated MSM population, with Assam reporting the lowest coverage at 42%. Eleven state/UTs achieved 100% ART linkage. Overall, 2024-25 data shows significant progress in coverage, clinic visits, HIV screening, STI screening and treatment and linkages to ART services. The state/UT-wise distribution of coverage of MSM in key service parameters during 2024-25, is shown in the table 6.7.

Figure 6.3. Key prevention services provided to MSM, from FY 2017-18 to FY 2024-25

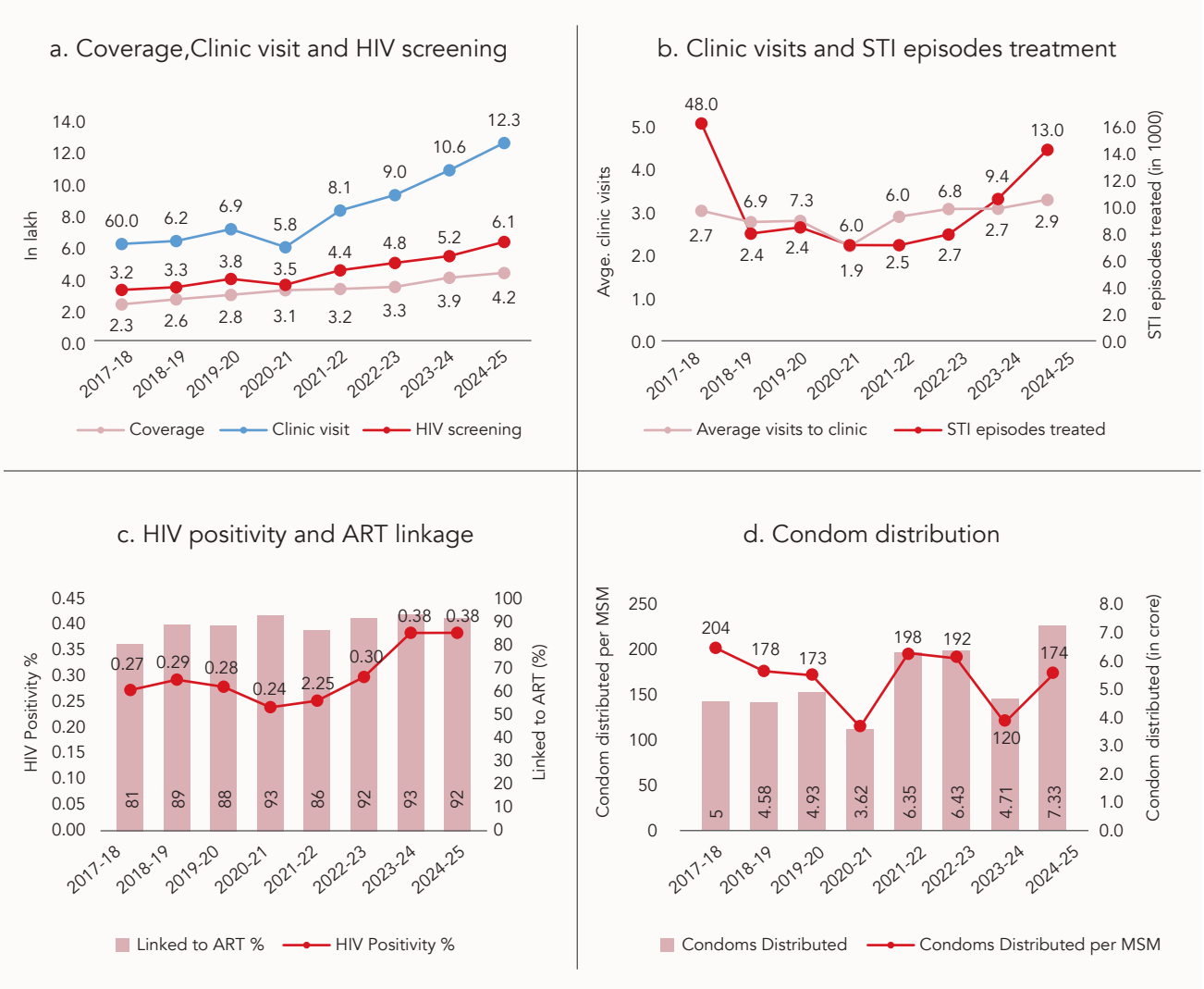


Table 6.7. State/UT-wise coverage of MSM in key service parameter, FY 2024-25

State/UT	Total Coverage	Coverage (%)	Clinic Visit (in lakh)	STI Treated	Syphilis Screening (in lakh)	Syphillis positive Detected	Condom Distribution (in lakh)	HIV screening (in lakh)	HIV Positive detected	Linked to ART	ART Linkages (%)
A&N Islands	77	-	0.00	5	0.00	5	0.01	0.00	6	6	>95
Andhra Pradesh	33,020	>95	1.06	232	0.49	10	96.57	0.53	71	46	65
Arunachal Pradesh	1,135	>95	0.03	59	0.02	44	1.30	0.02	11	10	91
Assam	6,922	42	0.23	346	0.12	104	10.42	0.12	78	71	91
Bihar	1,407	59	0.04	25	0.02	12	3.12	0.02	20	19	95
Chandigarh	3,414	>95	0.10	79	0.05	16	8.87	0.05	47	46	>95
DNH&DD	-		-	-	-	-	-	-	-	-	-
Chhattisgarh	5,697	>95	0.20	584	0.10	67	12.65	0.10	61	61	>95
Delhi	28,546	>95	0.92	252	0.24	62	34.55	0.24	100	55	55
Goa	4,926	>95	0.17	91	0.08	5	9.61	0.08	15	15	>95
Gujarat	32,902	>95	1.17	1,355	0.59	185	92.72	0.58	104	103	>95
Haryana	7,459	93	0.23	604	0.11	76	13.59	0.11	110	96	87
Himachal Pradesh	1,750	>95	0.06	205	0.03	21	3.00	0.03	28	23	82
J&K and Ladakh	852	>95	0.03	166	0.02	22	0.33	0.02	2	2	>95
Jharkhand	2,933	>95	0.11	75	0.05	4	4.12	0.06	16	14	88
Karnataka	71,984	>95	1.92	1,867	1.04	88	89.62	1.01	312	310	>95
Kerala	23,859	>95	0.52	176	0.22	86	20.67	0.26	22	22	>95
Madhya Pradesh	20,423	>95	0.66	975	0.33	165	24.39	0.34	175	166	95
Maharashtra	36,962	92	1.26	2,210	0.62	88	76.49	0.58	149	146	>95
Manipur	1,769	>95	0.03	22	0.02	4	2.15	0.02	7	7	>95
Meghalaya	270	79	0.01	3	0.00	1	0.33	0.00	1	1	>95
Mizoram	1,084	>95	0.04	10	0.02	12	1.21	0.02	16	16	>95
Nagaland	3,180	>95	0.09	4	0.05	5	5.73	0.05	10	10	>95
Odisha	4,508	75	0.14	471	0.07	25	8.07	0.07	38	29	76
Puducherry	1,958	79	0.04	37	0.02	10	4.50	0.03	3	3	>95
Punjab	7,016	87	0.24	227	0.08	69	13.43	0.11	119	84	71
Rajasthan	7,947	>95	0.25	319	0.11	52	12.30	0.12	38	34	89
Sikkim	-		-	-	-	-	-	-	-	-	0
Tamil Nadu	44,036	>95	0.90	662	0.59	681	54.61	0.60	211	198	94
Telangana	36,679	>95	1.01	300	0.49	56	76.87	0.55	240	240	>95
Tripura	1,070	>95	0.03	22	0.01	18	0.71	0.01	37	35	95
Uttar Pradesh	21,079	>95	0.60	1,350	0.32	76	39.50	0.31	213	201	94
Uttarakhand	3,382	>95	0.11	281	0.05	11	7.44	0.05	34	32	94
West Bengal	2,890	82	0.09	61	0.05	34	4.10	0.05	62	59	95
India	**4,21,136**	**>95**	**12.29**	**13,075**	**6.02**	**2,114**	**732.95**	**6.14**	**2,356**	**2,160**	**92**

6.5. H/TG persons coverage through TI projects

In 2024-25, around 1.03 lakh Hijra/Transgender (H/TG) were covered, an increase of 0.16 lakh H/TG persons from 2023-24 (figure 6.4). The increase in coverage resulted from efforts to reach the unreached and new registration through improved outreach activity. Clinic visits by H/TG persons increased significantly to 3 lakh in 2024-25 from 2.55 lakh in 2023-24. Average clinic visits per H/TG person per year increased significantly from 2.93 lakh visits in 2023-24 to 3.00 lakh visits in 2024-25. Out of total clinics visits, 3,653 H/TG visits received treatment for STIs during 2024-25. Around 1.45 lakh screening for syphilis was done in 2024-25, out of which 535 cases were tested positive, with syphilis sero- positive at 0.37% at National level.

HIV screening increased from 1.26 lakh in 2023-24 to 1.46 lakh in 2024-25, where in a total 500 H/TG person tested positive for HIV. HIV sero-positivity declined to 0.34% in 2024-25 from 0.41% in 2023-24 at the national level. The percentage of HIV-positive H/TG linked to ART increased from 87% in 2023-24 to 89% in 2024-25. Free condom distribution increased to 2.25 crore in 2024-25 from 1.34 crore in 2023-24.

Eighteen state/UTs reported coverage of 95% or more H/TG population against the estimated population, with Meghalaya reported the lowest at 38%. Twelve state/UTs achieved 100% ART linkage. Through peer navigation approach, efforts are being made to link all the identified HIV positive HRGs to ART centres. Overall, the data for 2024-25 shows encouraging progress in coverage, clinic visits, HIV screening, STI screening and treatment, and linkage to ART services. No coverage of H/TG persons was observed in Bihar & Jammu & Kashmir, even though state has estimated H/TG population as per p-MPSE 2022. The state/UT-wise distribution of coverage of H/TG persons in key service parameters during 2024-25 is given in the table.6.8.

Figure 6.4. Key prevention services provided to H/TG, from FY 2017-18 to FY 2024-25

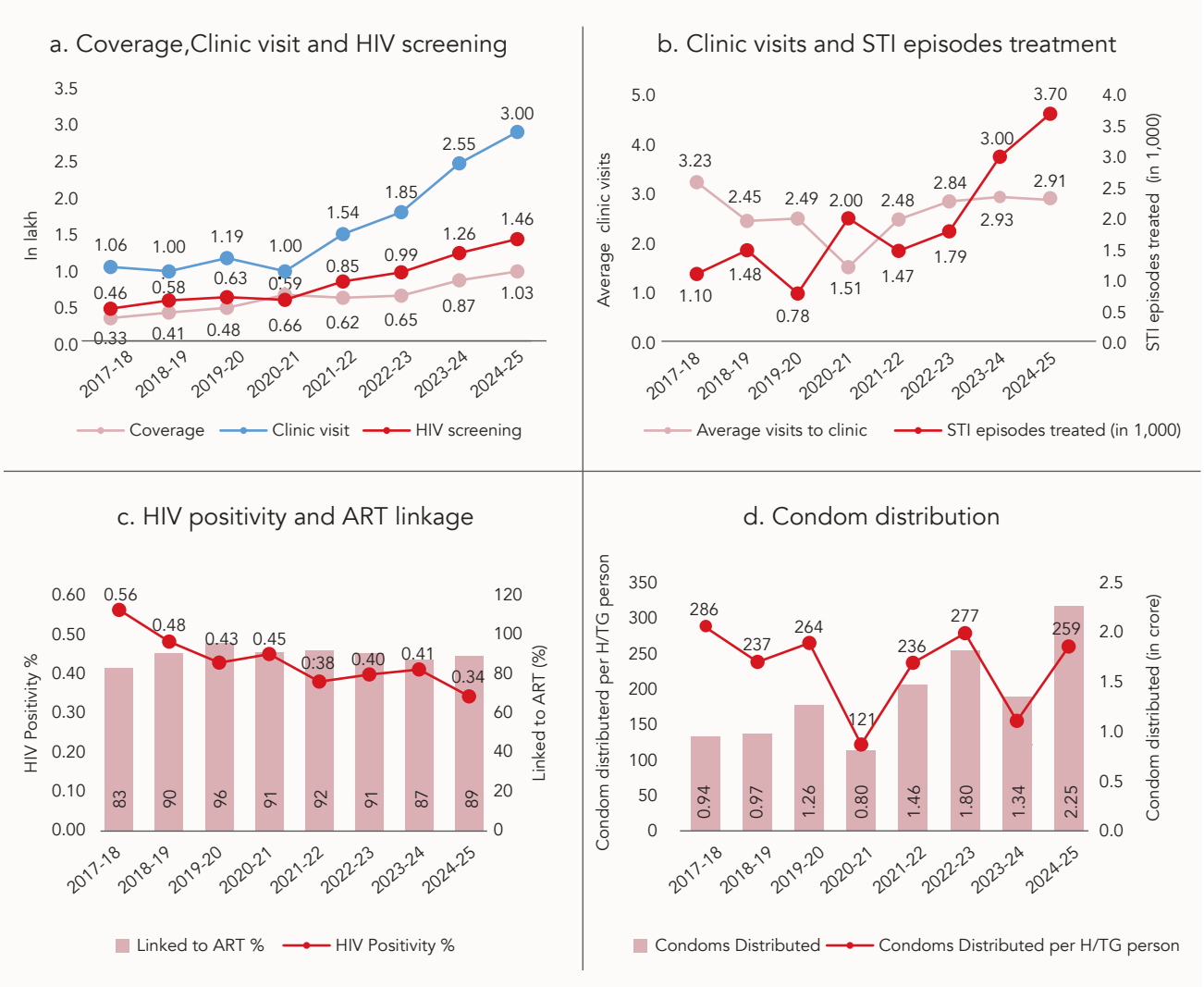


Table 6.8. State/UT-wise coverage of H/TG in key service parameter, FY 2024-25

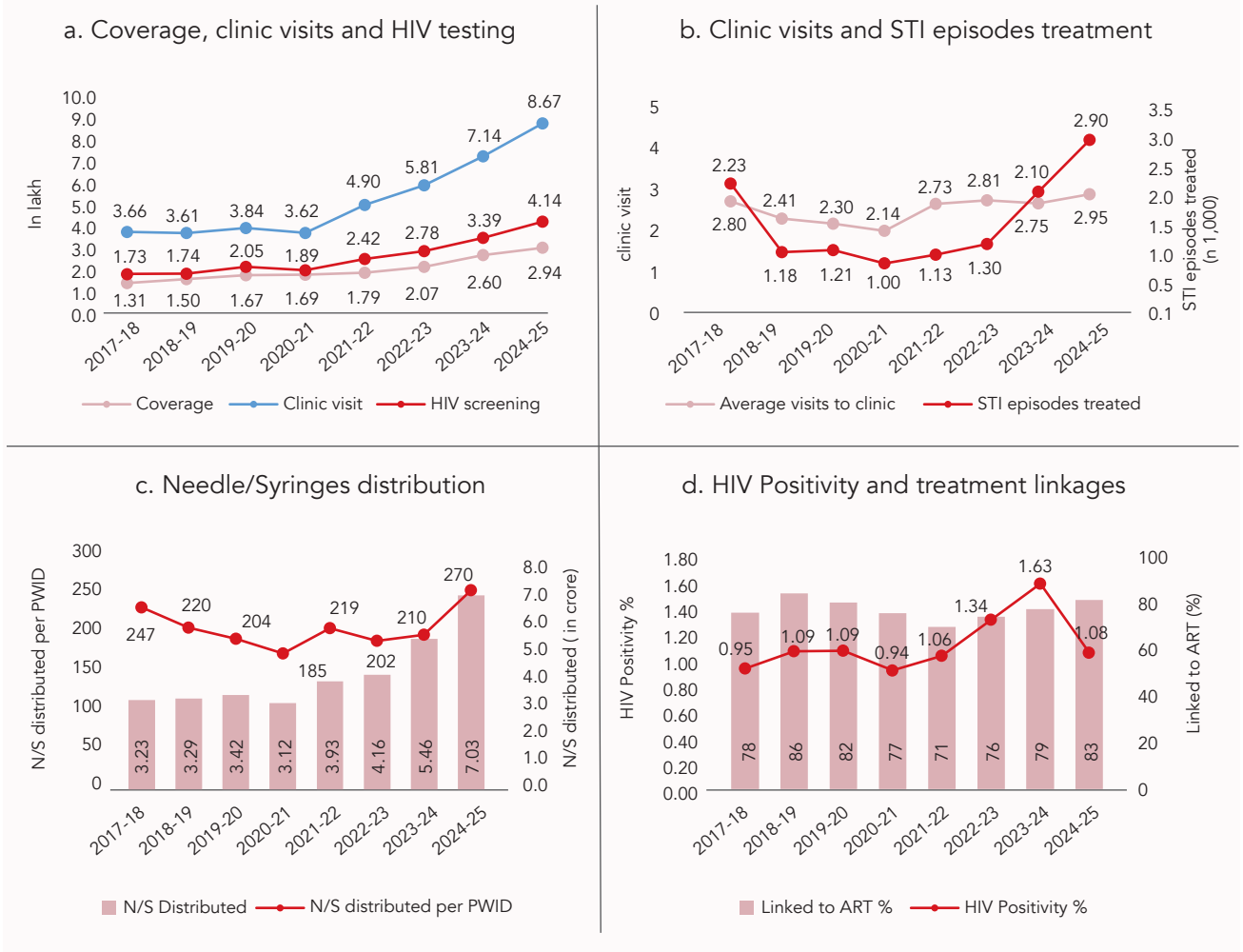
State/UT	Total Coverage	Coverage (%)	Clinic Visit (in lakh)	STI Treated	Syphilis Screening (in lakh)	Syphilis positive Detected	Condom Distribution (in lakh)	HIV screening (in lakh)	HIV Positive detected	Linked to ART	ART Linkages (%)
A&N Islands	11	-	0.00	1	0.00	1	0.00	0.00	-	-	-
Andhra Pradesh	7,705	>95	0.19	61	0.09	11	18.71	0.09	28	18	64
Arunachal Pradesh	177	>95	0.01	-	0.00	2	0.22	0.00	1	1	>95
Assam	940	38	0.03	66	0.02	21	1.58	0.02	3	1	33
Bihar	-	-	-	-	-	-	-	-	-	-	-
Chandigarh	246	>95	0.01	8	0.00	-	0.65	0.00	1	1	>95
Chhattisgarh	1,500	>95	0.05	180	0.03	9	4.35	0.03	18	14	78
DNH & DD	-		-	-	-	-	-	-	-	-	-
Delhi	16,759	94	0.55	219	0.19	23	23.69	0.20	52	38	73
Goa	246	>95	0.01	23	0.00	-	0.50	0.00	-	-	-
Gujarat	2,075	80	0.08	48	0.04	2	4.41	0.04	2	1	50
Haryana	1,089	76	0.03	97	0.02	6	1.74	0.02	14	14	>95
Himachal Pradesh	150	58	0.00	8	0.00	1	0.14	0.00	-	-	-
Jammu & Kashmir Ladakh	-	-	-	-	-	-	-	-	-	-	-
Jharkhand	874	>95	0.03	28	0.02	-	1.02	0.02	1	1	>95
Karnataka	16,576	>95	0.41	276	0.21	44	27.74	0.20	62	62	>95
Kerala	4,425	>95	0.11	45	0.05	10	6.27	0.06	-	-	-
Madhya Pradesh	1,293	80	0.04	60	0.02	19	1.54	0.02	21	21	>95
Maharashtra	12,023	>95	0.42	967	0.21	93	55.15	0.20	108	93	86
Manipur	1,051	>95	0.02	14	0.01	4	1.32	0.01	1	1	>95
Meghalaya	42	38	0.00	-	0.00	1	0.06	0.00	-	-	-
Mizoram	-		-	-	-	-	-	-	-	-	-
Nagaland	174	>95	0.01	3	0.00	1	0.39	0.00	1	1	>95
Odisha	4,950	69	0.16	511	0.07	74	11.43	0.08	38	38	>95
Puducherry	81	40	0.00	4	0.00	-	0.20	0.00	-	-	-
Punjab	1,756	>95	0.05	45	0.02	9	3.30	0.02	19	18	95
Rajasthan	2,128	>95	0.06	50	0.03	5	3.79	0.03	5	5	>95
Sikkim	-		-	-	-	-	-	-	-	-	-
Tamil Nadu	9,944	>95	0.19	176	0.13	135	15.38	0.14	25	21	84
Telangana	5,084	>95	0.16	49	0.08	9	20.98	0.08	25	25	>95
Tripura	166	>95	0.00	1	0.00	-	0.13	0.00	1	1	>95
Uttar Pradesh	8,175	83	0.25	482	0.13	30	16.43	0.12	47	46	>95
Uttarakhand	328	>95	0.01	39	0.01	-	0.78	0.01	4	3	75
India	**1,03,021**	**>95**	**3.00**	**3,653**	**1.45**	**535**	**225.21**	**1.46**	**500**	**444**	**89**

6.6. PWID coverage through TI projects

In 2024-25, around 2.94 lakh PWIDs were covered with an increase of 0.34 lakh PWID compared to total PWIDs covered in 2023-24 (figure 6.5 and table 6.9). Overall coverage of PWID was more than 95 % of total estimated population. The focus of TIs to reach out to unreached, young and new PWIDs, strengthened outreach activities, extended outreach during Integrated Health Campaigns, enhanced social, injecting and sexual networks activities, has led to an increase in the overall coverage of the PWID population with prevention services. The total clinic visits in TIs showed a significant increase from 7.14 lakh in 2023-24 to 8.67 lakh in 2024-25. The average clinic visits by PWID also increased from 2.75 lakh clinic visits in 2023-24 to 2.95 lakh clinic visits in 2024-25. Out of the total clinic visits, around 2,856 visits were treated for STIs during 2024-25. A total of 4.05 lakh syphilis testing was conducted out of which 384 syphilis reactive cases were detected with sero-positivity of 0.09% at the national level. The provision of free Needle/Syringes distribution also increased from 5.46 lakh in 2023-24 to 7.03 lakh in 2024-25.

HIV screening among PWID increased from 3.39 lakh in 2023-24 to 4.14 lakh in 2024-25. Total HIV positive case detected was around 4,456, with sero-positivity at 1.08 % at national level, which decreased from 1.63 % in 2023-24. The percentage of PWID living with HIV linked to ART saw an increase from 79 % in 2023-24 to 83 % in 2024-25, indicating an overall improvement in linkages to treatment services.

Figure 6.5. Key prevention services provided to PWIDs, from FY 2017-18 to FY 2024-25



Twenty Five state/UTs reported at least 95 % coverage against the estimated p-MPSE population, with Jammu & Kashmir at the lowest at 61%. Seven States/UTs achieved 100 % linkages of PLHIVs to ART. Through enhanced peer navigation approach, efforts are being made to link all the identified PLHIVs to ART treatment services. Overall, the data for 2024-25 shows significant progress in coverage, clinic visits, HIV screening and linkage to ART and STI screening and treatment services. The state/UT-wise distribution of coverage of PWID and achievements in key service parameters during 2024-25 are presented in table 6.9.

Table 6.9. State/UT-wise coverage of PWID on key service parameters, FY 2024-25

State / UT	Total Coverage	Coverage (%)	Clinic Visits (in lakh)	STI Treated	Syphilis screening (in lakh)	Syphillis positive Detected	Condom Distribution (in lakh)	Needle Distribution (in lakh)	HIV Testing (in lakh)	HIV Positive detected	Linked to ART	ART Linkage (%)
A&N Islands	-		-	-	-	-	-	-	-	-	-	-
Andhra Pradesh	2,679	>95	0.09	29	0.04	1	3.95	6.06	0.05	2	2	>95
Arunachal Pradesh	8,484	>95	0.19	85	0.13	59	1.94	6.88	0.13	164	137	84
Assam	23,285	89	0.64	104	0.31	40	6.21	46.03	0.31	1,247	1,048	84
Bihar	3,049	66	0.11	55	0.05	6	1.15	13.85	0.05	72	59	82
Chandigarh	2,942	>95	0.09	4	0.04	-	1.32	7.77	0.05	7	6	86
Chhattisgarh	5,134	>95	0.19	308	0.09	24	2.41	8.53	0.09	51	29	57
DNH&DD	-		-	-	-	-	-	-	-	-	-	-
Delhi	25,127	77	0.75	129	0.31	4	2.83	116.02	0.35	260	196	75
Goa	1,111	>95	0.03	57	0.02	-	1.50	2.35	0.02	-	-	-
Gujarat	1,130	>95	0.04	4	0.02	-	0.22	1.85	0.02	4	4	>95
Haryana	12,554	66	0.32	217	0.16	61	2.51	34.39	0.16	432	327	76
Himachal Pradesh	4,185	>95	0.13	13	0.07	3	1.08	7.81	0.07	81	61	75
J&K and Ladakh	6,151	61	0.17	663	0.08	7	0.84	16.22	0.10	25	25	>95
Jharkhand	1,634	>95	0.06	24	0.03	1	0.75	4.63	0.03	10	10	>95
Karnataka	3,215	74	0.11	11	0.06	2	0.49	12.34	0.06	5	5	>95
Kerala	4,519	>95	0.12	1	0.06	1	0.47	7.83	0.06	25	16	64
Madhya Pradesh	12,372	>95	0.37	125	0.19	30	4.99	13.72	0.18	102	94	92
Maharashtra	1,002	91	0.03	16	0.02	1	0.23	0.65	0.01	1	1	>95
Manipur	30,989	>95	0.81	115	0.38	9	22.52	61.92	0.41	87	76	87
Meghalaya	2,411	76	0.07	4	0.03	2	0.58	3.14	0.03	28	16	57
Mizoram	15,125	>95	0.50	58	0.24	32	7.38	25.67	0.17	159	143	90
Nagaland	34,904	>95	0.91	31	0.46	17	15.62	21.49	0.46	167	150	90
Odisha	3,737	83	0.13	102	0.06	5	1.18	4.41	0.06	10	7	70
Puducherry	-		-	-	-	-	-	-	-	-	-	-
Punjab	33,269	74	1.16	100	0.38	34	11.07	63.07	0.48	660	584	88
Rajasthan	2,894	>95	0.08	30	0.04	4	1.15	12.78	0.04	12	11	92
Sikkim	1,514	>95	0.05	2	0.02	1	0.89	3.72	0.02	-	-	-
Tamil Nadu	804	>95	0.02	2	0.01	7	0.18	0.65	0.01	6	5	83
Telangana	1,727	>95	0.06	8	0.03	-	1.19	6.84	0.03	3	3	>95
Tripura	8,670	>95	0.27	3	0.12	3	1.47	13.69	0.09	354	250	71
Uttar Pradesh	33,160	94	0.96	359	0.50	21	6.09	145.92	0.49	355	332	94
Uttarakhand	4,312	>95	0.12	192	0.06	3	1.13	20.58	0.05	91	77	85
West Bengal	1,941	83	0.06	5	0.03	6	0.28	12.37	0.03	45	44	>95
India	**2,94,030**	**>95**	**8.67**	**2,856**	**4.05**	**384**	**103.62**	**703.17**	**4.14**	**4,465**	**3,718**	**83**

6.7. Opioid Substitution Therapy (OST) for PWID

NACP has adopted Opioid Substitution Therapy (OST) as a key harm reduction strategy to prevent HIV and other blood borne infections among PWIDs since 2007. The OST program involves treatment of PWID with opioid dependence with a long-acting opioid agonist medication for a prolonged duration of time through the sublingual route, in a dose which effectively minimizes craving and withdrawals, and thereby enables the patient to stop injecting drugs and regain a stable life. Combined with psycho-social interventions, the OST program has proved to be relatively successful in reducing drug related harms including HIV/HCV transmission and opioid overdose. Evidence has also shown that early enrolment in OST programs remains a key factor in the reduction of new HIV infections among intravenous drug users, increases adherence on ART and improvement in the overall quality of life for the PWIDs.

Under NACP, OST is provided primarily as a "Directly Observed Treatment" in a clinic-based setting known as OST centres under supervision of a Medical Officer. There is also a provision for take home dosage for clinically stable clients satisfying all the criteria. The OST program is provided through three models namely the Collaborative model located at public health facilities, the NGO-based model provided at Targeted Intervention (TI) NGOs, and the Satellite Model which includes Prison and closed settings.

Collaborative Model: In this model, the OST center is located in a government health care facility (medical college hospital, district hospital, sub-divisional hospital, CHC, etc.). It is a full-fledged stand-alone OST centre and the facility staffs consist of a Nodal officer, a Medical Doctor, a Nurse, Counsellor and a Data Manager. The facility staff are tasked with clinical assessment and diagnosis of opioid dependence, prescription of substitution treatment, daily dispensing of the medications, psychosocial counselling, follow-up and referrals and linkages. The OST centre is linked with nearby PWID TI(s) to facilitate the service uptake with demand generation activities and by motivating and referring PWID clients in the project area to the OST centre for treatment.

NGO model: In this model, the OST centre is located within an existing PWID TI project offering the HIV prevention package such as needle syringe exchange program and other clinical and outreach services. In this model, the existing PWID-TI staffs such as Medical Doctor, Nurse, Counsellor, Data Manager and outreach workers (ORWs) are trained for OST service delivery. As in the collaborative model, the NGO OST centre is a full- fledged Stand – alone centre and the facility staffs are tasked with clinical assessment and diagnosis, prescription of substitution treatment, daily dispensing of the medications, psycho- social counselling, follow up and referrals and linkages. In the NGO model, there is a provision for additional Auxiliary Nurse Midwifery (ANM) and ORW to support the staffs outlined above.

Satellite OST model: The Satellite OST center functions as a sub-center of a full-fledged OST centers and is usually located away or at a distance from the main/parent center. The primary objectives of a satellite OST center are to; (a) to increase accessibility of clients residing or congregating at remote locations from the existing parent OST center or clients having difficulty in accessing with a longer travel time e.g., at least an hour or more, and (b) to decongest the main/parent OST center with high daily client load so as to ensure quality service delivery to each individual patient. The satellite OST centers are linked to a parent/main center for technical supervision, monitoring and follow up services.

The coverage of OST clients has increased steadily from 29.1 thousand in 2018-19 to 60.6 thousand in 2024-25 (figure 6.6). This increase is due to the scale up of OST centers from 215 facilities in 2018-19 to 270 over the seven-year period. Overall, 20.6 % of active PWID population were on-OST in 2024-25 (figure 6.7).

Figure 6.6. Year wise establishment of OST centers and client coverage, from FY 2018-19 to FY 2024-25

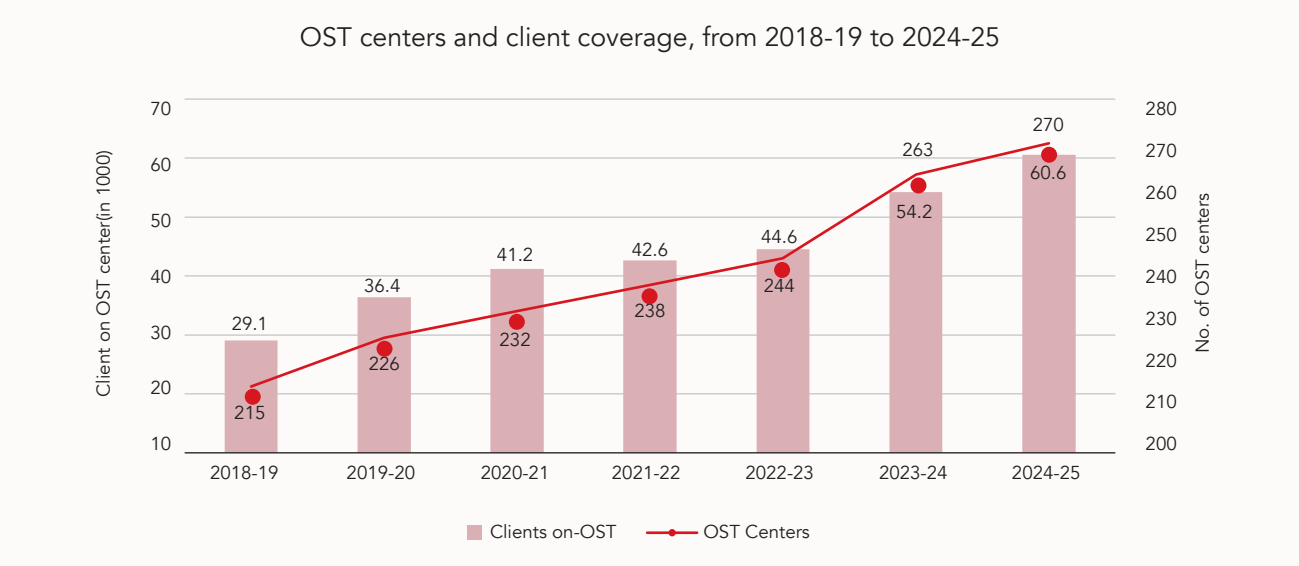
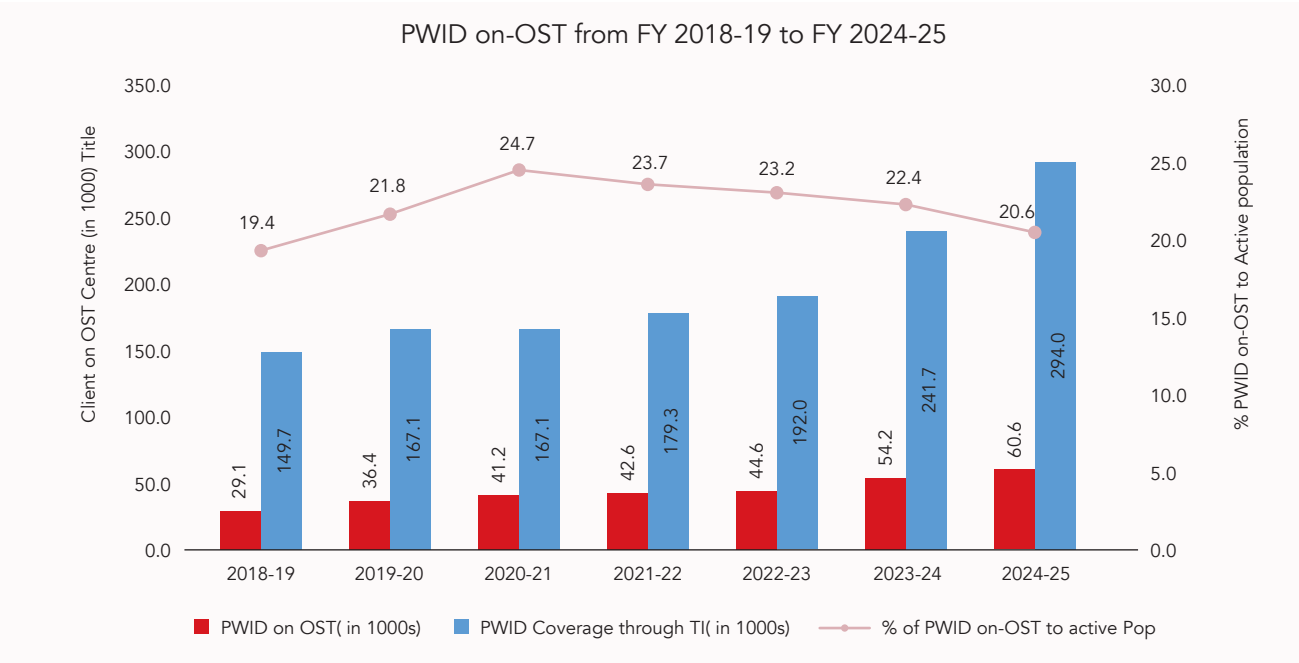


Figure 6.7. Year wise trend on PWID on-OST under TI programme (in 1,000) and % Coverage, from FY 2018-19 to FY 2024-25



The Collaborative or Public health model is the mainstay of the OST program under NACP Phase-V with the majority 221 OST centers (82%) located in public health settings and 49 OST centers (18%) located in the TI NGO settings in 2024-25 (table 6.2 and table 6.10). Additionally, there are 187 satellite OST centers linked to the main OST centers. As shown above, increasing OST coverage has been achieved by scaling up the OST program through the collaborative model and greater integration with the public health delivery systems. Currently, the OST centres are primarily located within national and state Mental health institutes, medical colleges, districts hospitals whereas the Satellite centres are placed within the Community Health Centres, Primary Health Centres and Health and Wellness Centres across the country. The establishment of Satellite OST centers through utilization of the primary health system has proven to be one of the most effective strategies under NACP Phase-V leading to increase in accessibility, coverage and service uptake for OST treatment among the PWID population.

To further the linkages with Mental health and Addiction Treatment programmes, all OST Medical Doctors have been trained on the 'Addiction Rx' App designed by National Institute of Mental Health and Neuro Sciences (NIMHANS) as a treatment accompaniment tool and tele-counselling App for substance use disorders. Tele-Manas, the toll-free Mental health helpline under National Mental Health Program (NMPH) is also included in the service referral directory. There is also close coordination with the Drug Treatment Clinics (DTCs) and Addiction Treatment facilities (ATF) implemented under the Drug De-Addiction Program (DDAP), MOHFW and National Action Plan for Demand Reduction (NAPDDR), MOSJE respectively.

Table 6.10. State/UT-wise (SACS/DACS) distribution of OST centres and active PWID on OST, FY 2024-25

State/UT(SACS/DACS)	OSTc in Public Health Settings	OSTc in NGO Settings	Satellite OSTc	PWID on OST
A&N Islands	-	-	-	-
Andhra Pradesh	2	0	1	727
Arunachal Pradesh	5	0	14	727
Assam	6	0	12	4,047
Bihar	2	0	0	287
Chandigarh	0	4	0	927
Chhattisgarh	6	0	0	1,720
DNH &DD	-	-	-	
Delhi	8	4	0	3,013
Goa	0	1	0	108
Gujarat	2	0	1	96
Haryana	13	0	2	2,237
Himachal Pradesh	2	0	2	303
J&K and Ladakh	6	0	0	866
Jharkhand	3	0	0	128
Karnataka	2	0	0	157
Kerala	7	3	1	640
Madhya Pradesh	14	4	1	2,349
Maharashtra	1	1	0	67
Manipur	19	7	32	5,050
Meghalaya	3	3	5	1,075
Mizoram	13	4	51	3,823
Mumbai	0	1	3	123
Nagaland	27	5	32	10,204
Odisha	4	1	1	472
Puducherry	-	-	-	-
Punjab	26	9	8	10,935
Rajasthan	3	0	0	378

Table continued...

...Table continued

State/UT(SACS/DACS)	OSTc in Public Health Settings	OSTc in NGO Settings	Satellite OSTc	PWID on OST
Sikkim	4	0	3	2,586
Tamil Nadu	1	0	0	89
Telangana	1	0	0	130
Tripura	6	0	11	2,837
Uttar Pradesh	21	0	4	2,726
Uttarakhand	7	1	0	727
West Bengal	7	1	3	1,098
India	**221**	**49**	**187**	**60,652**

During FY 2024-25, NACO collaborated with key health departments under the Ministry of Health and Family Welfare to provide comprehensive health interventions to persons with substance use disorders due to the relatively higher contribution of substance use disorders to morbidity and mortality from infections such as HIV, hepatitis, tuberculosis, mental disorders and other non-communicable disease such as liver cirrhosis, cancer etc. Focus was given to medical treatment for substance use disorder, mental health counselling/psychotherapy and prevention and treatment for HIV/AIDS, Hepatitis B & C, Tuberculosis, Sexually Transmitted Infections (STIs).

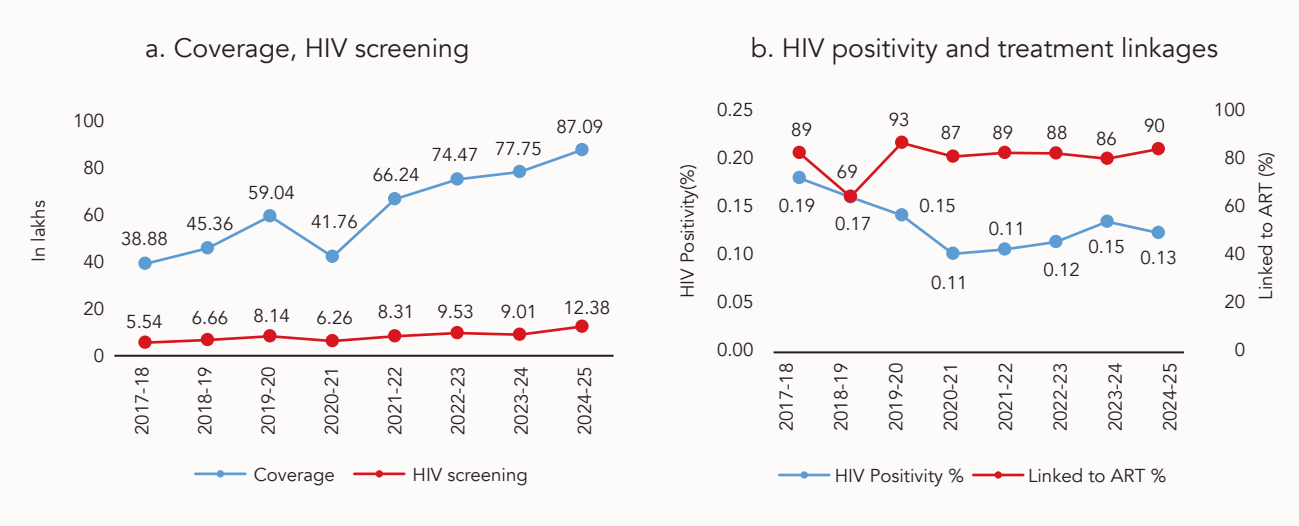
Accordingly, NACO organised a two-day National Consultation on Health Interventions for Substance Use Disorders on 5th and 6th September 2024 at Guwahati, Assam. The National Consultation was attended by dignitaries from various government departments including Narcotics Control Bureau, Ministry of Home Affairs, key officials from State and Central Health Ministry including MD NHM, senior officials from National TB Elimination Program (NTEP), National AIDS Control Program (NACP), National Tobacco Control Program (NTCP), National Mental Health Program (NMHP) Drug De-Addiction Program (DDAP), National Program for Non Communicable Diseases (NPCDCS), National Drug Dependence Treatment Centre (NDDTC), AIIMS, NIMHANS, representatives of UNODC, UNAIDS and WHO, global and national technical experts as well as representatives from civil society organization and beneficiary community members. The National consultation facilitated robust deliberations amongst the eminent officials, experts and practitioners on the global and national trends of substance use disorders, the current policies, strategies, models and best practices for providing a comprehensive health intervention for substance use disorders.

The consultation resulted in a call to action for developing a clear strategic direction and evolve a policy framework for addressing the health needs of people who use drugs and for strengthening the national response for health interventions to address substance use disorders and related comorbidities in coordination with all key stakeholders.

6.8. Migrants' coverage through TI projects

In 2024-25, around 87.09 lakh Migrants were covered through outreach sessions, an increase of 9.33 lakh Migrants from 2023-24 (figure 6.8). Around 12.38 lakh migrants were screened for HIV, which was around 80% of annual HIV testing target given to TIs at national level as per the revised bridge population guidelines. The total HIV case detection among migrants increased to 1,639 cases in 2024-25 from 1,316 cases in 2023-24, with HIV sero-positivity rate at 0.13% at national level. The increase in HIV case detection was due to the introduction of risk assessments followed by HIV screening of bridge population and expanding outreach services as per the revised bridge population guidelines. Around 90% of HIV-positive migrants were linked to ART in 2024-25, which increased from 86% in 2023-24.

Figure 6.8. Key prevention services provided to Migrants from FY 2017-2018 to FY 2024-2025



Twenty States state/UTs reported coverage of 95% or more of the estimated migrant population. The state/UT-wise distribution of coverage of Migrants in key service parameters during 2024-25 is given in table 6.11.

Table 6.11. State/UT-wise coverage of Migrants in key service parameter, FY 2024-25

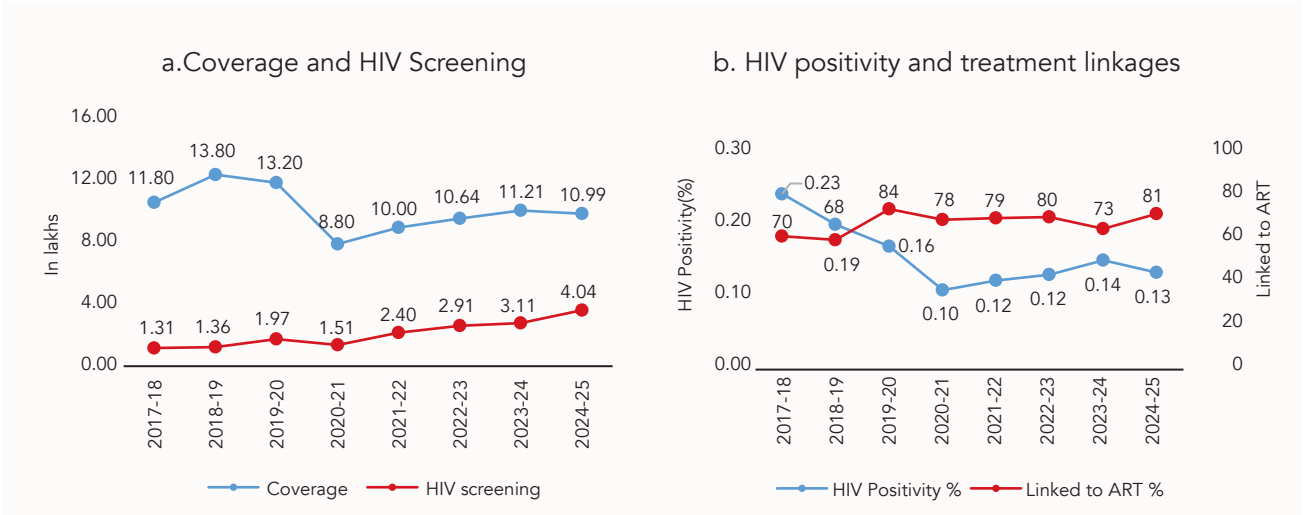
State/UT	Total Coverage	Coverage (%)	HIV Testing (in lakh)	HIV positive detected	Linked to ART	ART Linkage (%)
A&N Islands	2,510	18	0.03	1	-	0
Andhra Pradesh	73,408	21	0.49	22	22	>95
Arunachal Pradesh	83,913	83	0.16	4	3	75
Assam	18,585	27	0.10	54	40	74
Bihar	-	-	-	-	-	
Chandigarh	81,162	>95	0.10	15	12	80
Chhattisgarh	4,39,070	>95	0.70	68	61	90
DNH & DD	-	-	-	-	-	-
Delhi	8,10,371	>95	0.38	99	90	91
Goa	1,07,605	>95	0.18	11	9	82
Gujarat	10,35,280	>95	1.17	93	89	>95
Haryana	2,34,949	>95	0.32	65	65	>95
Himachal Pradesh	1,04,465	>95	0.15	49	45	92
Jammu & Kashmir Ladakh	59,404	53	0.10	12	9	75
Jharkhand	78,884	94	0.10	14	14	>95
Karnataka	5,20,998	>95	0.72	76	74	>95
Kerala	1,43,009	34	0.43	65	55	85
Madhya Pradesh	3,84,955	>95	0.40	40	37	93

State/UT	Total Coverage	Coverage (%)	HIV Testing (in lakh)	HIV positive detected	Linked to ART	ART Linkage (%)
Maharashtra	30,31,179	>95	4.14	528	481	91
Manipur	7,149	17	0.01	10	7	70
Meghalaya	928	33	0.00	-	-	-
Mizoram	27,083	25	0.18	30	29	>95
Nagaland	29,250	>95	0.05	7	5	71
Odisha	2,55,730	91	0.31	49	43	88
Puducherry	57,919	>95	0.07	2	2	>95
Punjab	92,198	94	0.12	25	24	>95
Rajasthan	1,97,240	94	0.25	27	25	93
Sikkim	-	-	-	-	-	-
Tamil Nadu	61,090	29	0.26	59	47	80
Telangana	1,11,145	35	0.74	98	98	>95
Tripura	30,313	>95	0.05	4	3	75
Uttar Pradesh	1,71,682	>95	0.25	56	47	84
Uttarakhand	3,95,325	>95	0.30	42	30	71
West Bengal	62,013	89	0.11	14	14	>95
India	**87,08,810**	**>95**	**12.38**	**1,639**	**1,480**	**90**

6.9. Transport Workers coverage through TI projects

In 2024-25, around 11 lakh transport workers were covered, with slight decline of coverage of around 0.21 lakh from 2023-24, due to closure of few TI projects in the states (figure 6.9). Around 4.04 lakh transport workers were screened for HIV, which was around 74% of annual HIV testing target given to TIs at National level. HIV sero-positivity rate was at 0.13% at national level. Around 81% of HIV-positive transport workers were linked to ART.

Figure 6.9. Key prevention services provided to Transport Workers, FY 2017-2018 to FY 2024-2025.



Twelve state/UTs reported coverage of 95% or more Transport workers, with Goa being the lowest at 43%. Twelve state/UTs achieved ART linkages of 95% or more. The state/UT-wise distribution of coverage of Transport workers in key service parameters during 2024-25 is given in table 6.12.

Table 6.12. State/UT-wise coverage of Transport workers on key service parameter, FY 2024-25

State/UT	Total Coverage	Coverage (%)	HIV Testing (in Lakh)	Total positive detected	Total linked to ART	ART Linkage (%)
A&N Islands	5,000	-	0.02	1	1	>95
Andhra Pradesh	31,500	60	0.19	10	5	50
Arunachal Pradesh	-	-	-	-	-	0
Assam	27,500	>95	0.08	23	19	83
Bihar	10,000	67	0.03	15	15	>95
Chandigarh	10,000	65	0.04	4	4	>95
Chhattisgarh	70,000	>95	0.38	68	45	66
DNH & DD	-	-	-	-	-	0
Delhi	40,000	67	0.07	19	18	95
Goa	10,000	43	0.04	-	-	-
Gujarat	55,000	46	0.24	19	18	95
Haryana	50,000	>95	0.13	62	54	87
Himachal Pradesh	10,000	71	0.05	8	6	75
J&K and Ladakh	35,000	>95	0.10	8	3	38
Jharkhand	32,500	93	0.13	2	2	>95
Karnataka	87,500	>95	0.18	32	19	59
Kerala	30,000	>95	0.11	8	3	38
Madhya Pradesh	74,500	90	0.43	26	21	81
Maharashtra	1,85,000	90	0.73	62	60	>95
Manipur	-	-	-	-	-	0
Meghalaya	-	-	-	-	-	0
Mizoram	-	-	-	-	-	0
Nagaland	10,000	>95	0.03	3	3	>95
Odisha	20,000	>95	0.06	7	6	86
Puducherry	-	-	-	-	-	0
Punjab	25,000	>95	0.04	13	10	77
Rajasthan	20,000	52	0.04	4	4	>95
Sikkim	-	-	-	-	-	0
Tamil Nadu	59,000	>95	0.16	29	24	83
Telangana	47,000	>95	0.24	16	16	>95
Tripura	5,000	>95	0.02	4	4	>95

State/UT	Total Coverage	Coverage (%)	HIV Testing (in Lakh)	Total positive detected	Total linked to ART	ART Linkage (%)
Uttar Pradesh	55,000	76	0.22	38	38	>95
Uttarakhand	45,000	>95	0.08	10	2	20
West Bengal	50,000	83	0.18	21	17	81
India	**10,99,500**	**55**	**4.04**	**512**	**417**	**81**

6.10. Prison Intervention

NACO in collaboration with respective SACS, the State Prison Department (SPD), and the Department of Women and child Development (WCD) has been implementing HIV and TB intervention for inmates in Prisons & Other closed settings including Swadhar, Ujjwala, state-run homes, Child Care Institutions (Juvenile Homes / Observation Homes) and Drug Rehabilitation Centres across all state/ UTs. The number of prisons covered under the programme has increased consistently from 805 in 2018-19 to 1,265 in 2024 (figure 6.10). In 2024, 15.48 lakh Prison inmates were covered through HIV screening, an increase of 1.76 lakh from 2023-24. Overall, a total 5,086 inmates were found HIV positive, with a sero positivity of 0.33%. Among the HIV positive detected, 91% of them were linked to ART centers (table 6.13). Around 7.60 lakh syphilis test was conducted with syphilis sero positivity of 0.27% at national level.

Figure 6.10. Year wise distribution of number of Prisons implementing HIV intervention, from FY 2018-19 to FY 2024-25

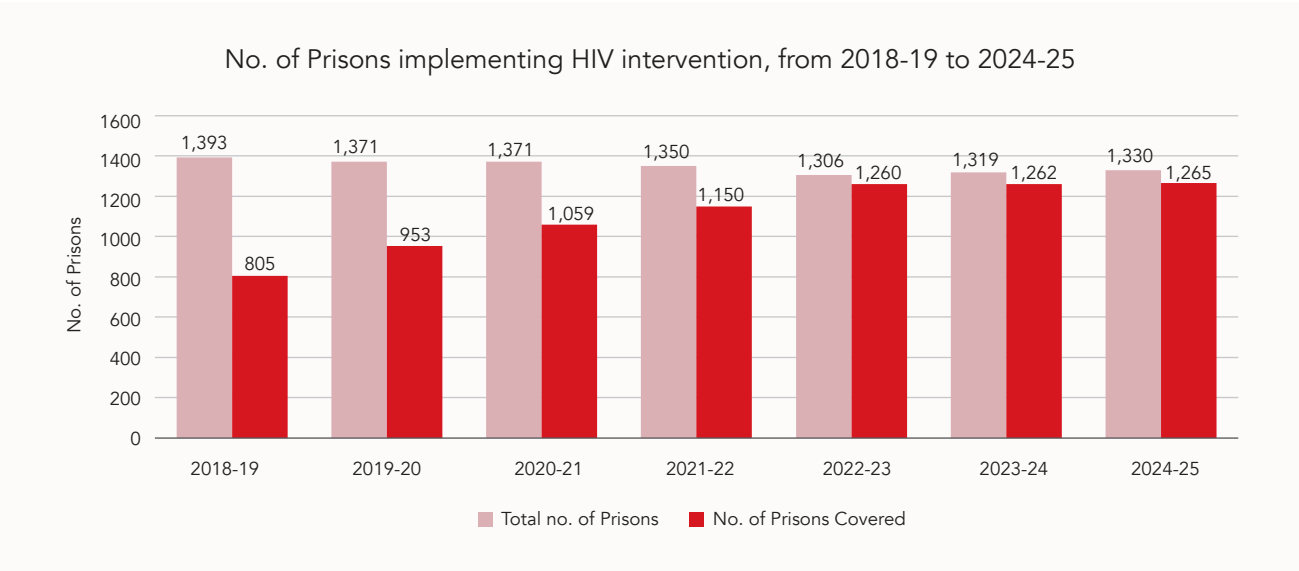


Table 6.13. Prison inmates tested for HIV, diagnosed HIV positive and linked to ART, from FY 2018-19 to FY 2024-25

Indicators	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
Inmates covered	4,12,500	4,13,572	9,06,806	7,08,544	14,24,763	13,72,205	15,48,054
Screened for HIV	2,78,705	2,77,015	4,79,880	6,56,749	12,45,209	13,72,205	15,48,054
HIV positive	1,330	1,728	2,122	2,886	5,894	6,607	5,086
Linked to ART	1,050	1,259	1,814	2,362	5,001	5,912	4,607

The state/UTs-wise coverage of prison inmates in key services parameters for 2024-25 is shown in table 6.14.

Table 6.14. State/UT-wise coverage of Prison Inmates with Key Service Parameters, FY 2024-25

State/UT	Coverage	% Coverage	STI Treated	Syphilis Test	Syphilis Positives	HIV Screening/ Testing	HIV positive	Linked to ART	% ART Link	TB Screen
A&N Islands	951	85.0	5	951	2	951	1	1	>95	938
Andhra Pradesh	58,616	82.6	0	37,287	2	58,616	83	68	81.9	59,728
Arunachal Pradesh	1,112	>95	3	1,115	17	1,112	33	28	84.8	2,260
Assam	18,993	33.1	0	8,463	24	18,993	427	372	87.1	18,814
Bihar	2,25,979	66.8	0	50,586	167	2,25,979	363	310	85.4	2,04,628
Chandigarh	1,320	35.9	0	1	1	1,320	10	5	50.0	1,167
Chhattisgarh	39,665	54.6	1	23,081	66	39,665	60	40	66.7	33,135
DNH & DD	288	46.5	0	288	7	288	1	1	>95	288
Delhi	19,447	31.0	0	14,168	240	19,447	349	307	88.0	22,865
Goa	1367	65.8	0	1,054	2	1,367	5	5	>95	1,367
Gujarat	37,772	44.7	91	29,515	103	37,772	76	66	86.8	37,578
Haryana	53,370	56.9	0	22,216	105	53,370	398	388	>95	53,521
Himanchal Pradesh	7,939	90.2	16	6,407	36	7,939	21	16	76.2	7,634
Jammu & Kashmir	11,821	76.8	0	7,347	14	11,821	6	4	66.7	13,977
Jharkhand	37,702	64.8	4	11,957	9	37,702	26	24	92.3	40,080
Karnataka	48,129	70.2	0	14,881	54	48,129	91	62	68.1	40,748
Kerala	38,318	74.8	8	8,578	14	38,318	69	51	73.9	38,430
Ladakh	109	>95	0	108	6	109	1	1	>95	55
Lakshadweep										
Madhya Pradesh	2,01,741	>95	1,655	1,88,499	315	2,01,741	199	194	>95	2,06,221
Maharashtra	72,535	51.0	286	26,665	226	72,535	239	233	>95	62,244
Manipur	703	36.9	0	406	0	703	4	3	75.0	939
Meghalaya	1,587	57.1	11	1,591	17	1,587	6	3	50.0	2,208
Mizoram	1,491	18.6	20	1,057	8	1,491	35	24	68.6	1,673
Nagaland	1,543	58.4	0	1,214	1	1,543	69	66	>95	1,083
Odisha	42,012	42.9	0	24,923	37	42,012	42	38	90.5	41,757
Puducherry	1,458	63.3	-	1,455	4	1,458	3	3	>95	1,458
Punjab	77,366	83.2	34	40,629	28	77,366	969	961	>95	77,877
Rajasthan	96,623	68.8	96	54,449	97	96,623	261	209	80.1	98,456
Sikkim	658	83.8	0	636	1	658	1	1	>95	651
Tamilnadu	84,263	75.4	70	53,876	176	84,263	141	127	90.1	84,392
Telengana	46,758	88.8	0	6,259	29	46,758	98	97	>95	47,308
Tripura	5,031	76.5	7	4,432	14	5,031	76	71	93.4	5,099
Uttar Pradesh	2,22,888	>95	108	53,166	179	2,22,888	604	543	89.9	2,35,938
Uttarakhand	12,924	54.8	12	3,933	13	12,924	147	138	93.9	14,164
West Bengal	75,575	52.4	14	59,704	30	75,575	172	147	85.5	72,171
India	**15,48,054**	**69.7**	**2,441**	**7,60,897**	**2,044**	**15,48,054**	**5,086**	**4,607**	**90.6**	**15,30,852**

Table 6.15. State/UT-wise coverage of Other Closed Settings Inmates with Key Service Parameters, FY 2024-25

SACS/DACS	Coverage	% Coverage	STI Treated	Syphilis Test	Syphilis Positive	HIV Test	HIV positive	Linked to ART	% ART Link	TB Screened
A&N Islands	-	-	-	-		-	-	-	-	-
Andhra Pradesh	4,744	>95	0	3,134	0	4,744	0	0	0	4,819
Arunachal Pradesh	707	70.7	0	711	6	707	3	3	>95	1136
Assam	155	28.2	0	114	0	155	0	0	0	155
Bihar	1,612	>95	0	654	0	1,612	0	0	0	1,275
Chandigarh	159	31.8	0	135	2	159	1	1	>95	70
Chhattisgarh	329	>95	0	99	1	329	0	0	0	163
DNH&DD	-	-	-	-		-	-	-	-	-
Delhi	26	0.5	0	0	0	26	0	0	0	26
Goa	71	33.8	0	59	0	71	0	0	0	59
Gujarat	698	>95	3	688	3	698	1	1	>95	688
Haryana	453	>95	0	345	0	453	0	0	0	453
Himanchal Pradesh	67	89.3	0	35	0	67	0	0	0	75
Jammu & Kashmir Ladakh	172	28.7	0	111	0	172	0	0	0	515
Jharkhand	382	>95	0	149	0	382	0	0	0	374
Karnataka	1,666	40.8	0	1,339	3	1,666	1	0	0	1,600
Kerala	520	57.8	0	211	0	520	1	1	>95	520
Lakshadweep	-	-	-	-		-	-	-	-	-
Madhya Pradesh	3,351	>95	2	3,122	1	3,351	8	8	>95	4,867
Maharashtra	2,179	18.6	1	778	0	2,179	2	2	>95	942
Mumbai	1,861	52.1	2	1,291	8	1,861	5	5	>95	908
Manipur	2,381	47.6	0	1,547	5	2381	4	4	>95	2,395
Meghalaya	136	>95	1	134	2	136	2	2	>95	152
Mizoram	2022	>95	120	1879	36	2,022	66	66	>95	1803
Nagaland	6	2.4	0	1	0	6	1	1	>95	2
Odisha	1,458	>95	0	1,152	1	1,458	0	0	0	1,479
Puducherry	24	16.0	0	24	0	24	0	0	0	24
Punjab	50	10.6	0	6	0	50	0	0	0	50
Rajasthan	1,249	>95	0	865	0	1,249	0	0	0	1,254
Sikkim	914	>95	0	872	2	914	2	1	50	706
Tamil Nadu	1,496	>95	1	1,342	2	1,496	8	8	>95	1,503
Telengana	1649	89.9	1	488	7	1,649	2	2	>95	1619
Tripura	143	23.8	0	111	0	143	0	0	0	149
Uttar Pradesh	4,973	>95	17	4,221	6	4,973	3	3	>95	4,437
Uttarakhand	403	>95	6	368	28	403	0	0	0	224
West Bengal	1,075	>95	0	824	2	1,075	0	0	0	1,057
India	**37,131**	**77**	**154**	**26,809**	**115**	**37,131**	**110**	**108**	**>95**	**35,499**

Overall, 2024-25 data shows progress in coverage, STI treated, Syphilis screening, HIV screening and ART linkages.

6.11. Other Closed Settings Intervention (OCS)

In 2024-25, a total of 742 OCS including Juvenile Homes and Drug Rehabilitation Centers were covered under the programme in 2024-25. A total of 37,131 inmates in OCS were screened for HIV. Around 110 inmates were identified HIV positive, with sero-positivity rate at 0.30%. Overall, 98% of HIV-positive diagnosed were linked to ART centers. 26,809 inmates undergone syphilis screening, out of which around 115 inmates were found syphilis positive, with sero-positivity at 0.43% at national level. The states/UTs-wise coverage of OCS inmates in key services parameters for 2024-25 is shown in table 6.15.

6.12. Link Workers Scheme (LWS)

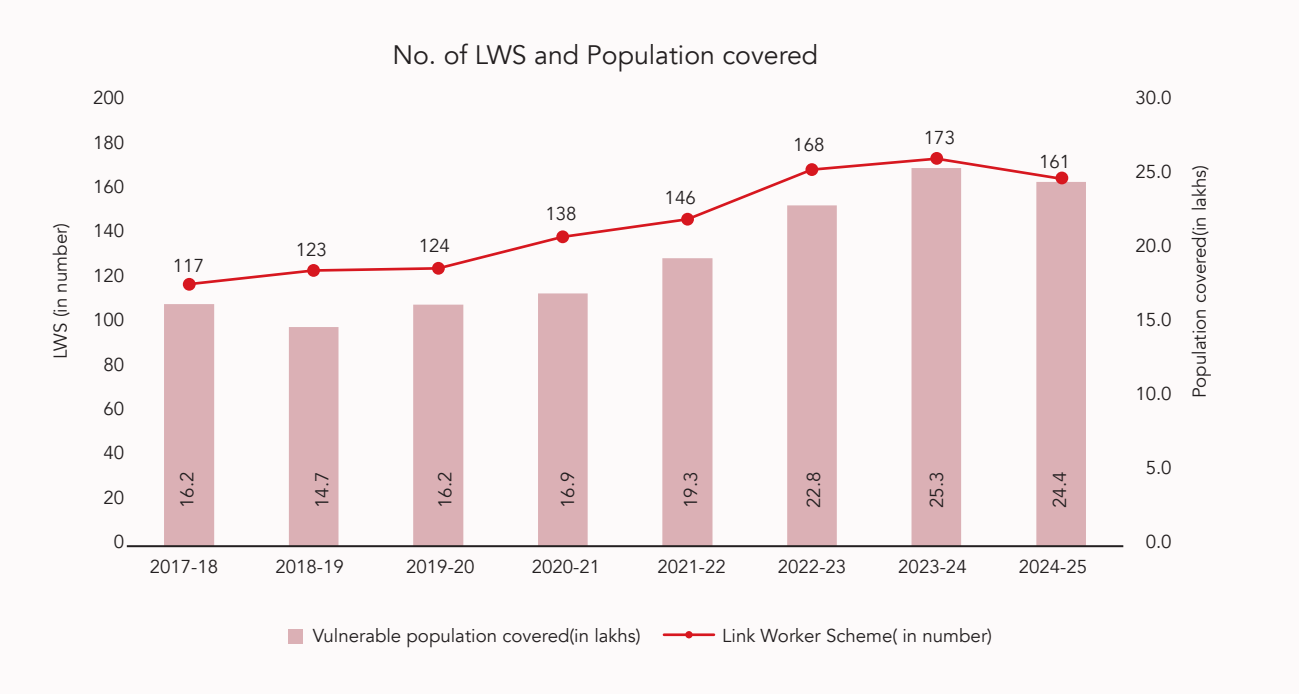
The Link Workers Scheme (LWS) is implemented in the high priority districts and blocks/villages to cover rural HRGs and other vulnerable populations. Population covered under the LWS includes rural FSW, MSM, H/TG, PWID, Migrants, Transport Workers, spouse and partner of HRGs, PLHIV, youth, persons having Tuberculosis (TB) and antenatal mothers. This scheme envisages creation of demand for various HIV/AIDS-related services, linking the target population to existing services, creation of an enabling and stigma-free environment, increasing access to information, and services by linking them other departments/ programmes. However, the scheme itself does not create any service delivery points in the programme villages. One LWS scheme is implemented in one district or more than one district covering approximately 60-100 villages.

With the changing dynamics and the potential exposure of rural population to HIV/AIDS and STI, NACO revised the guidelines for interventions among rural High- Risk Groups and Vulnerable population as Link Worker Scheme 2.0 during 2024-25. The revised guidelines envisaged reaching out to unreached rural population including spouse and partners of rural HRGs, PLHIVs, and HRGs who are active in virtual platforms; spa and massage parlours and to ensure delivery of quality HIV and STI prevention services with strong linkages for access to testing and treatment. The new guidelines highlighted risk assessments of rural population, service delivery through health camp approaches, provisioning commodities and strengthening outreach strategies to reach the last mile. The aforementioned guideline LWS 2.0 was issued to all SACS in January 2025.

In 2024-25, a total of 161 Link Worker Schemes were covering 173 districts, reaching approximately 24.38 lakh population under various service shown in figure 6.11 and table 6.15 below. The figure indicates that there was an overall decrease of 0.97 lakh population in 2024-25 from the previous year due to closure of LWS projects in the State. Total HIV testing has increased by 3.27 lakh cases in 2024-25, with a total HIV case detection of around 3,272 in 2024-25 compared to 2,595 total HIV case detection in 2023-24. ART linkages have increased to 97% in 2024-25 from 69% in 2023-24.

Year-wise progress of on-boarding of number of LWS in states and population covered under various prevention services are presented in the figure 6.11 and table 6.16 below.

Figure 6.11. No. of Link Worker Scheme and Population covered from FY 2017-18 to FY 2024-25



Year wise population coverage under LWS, 2017-18 to 2024-25 is presented in the table 6.16.

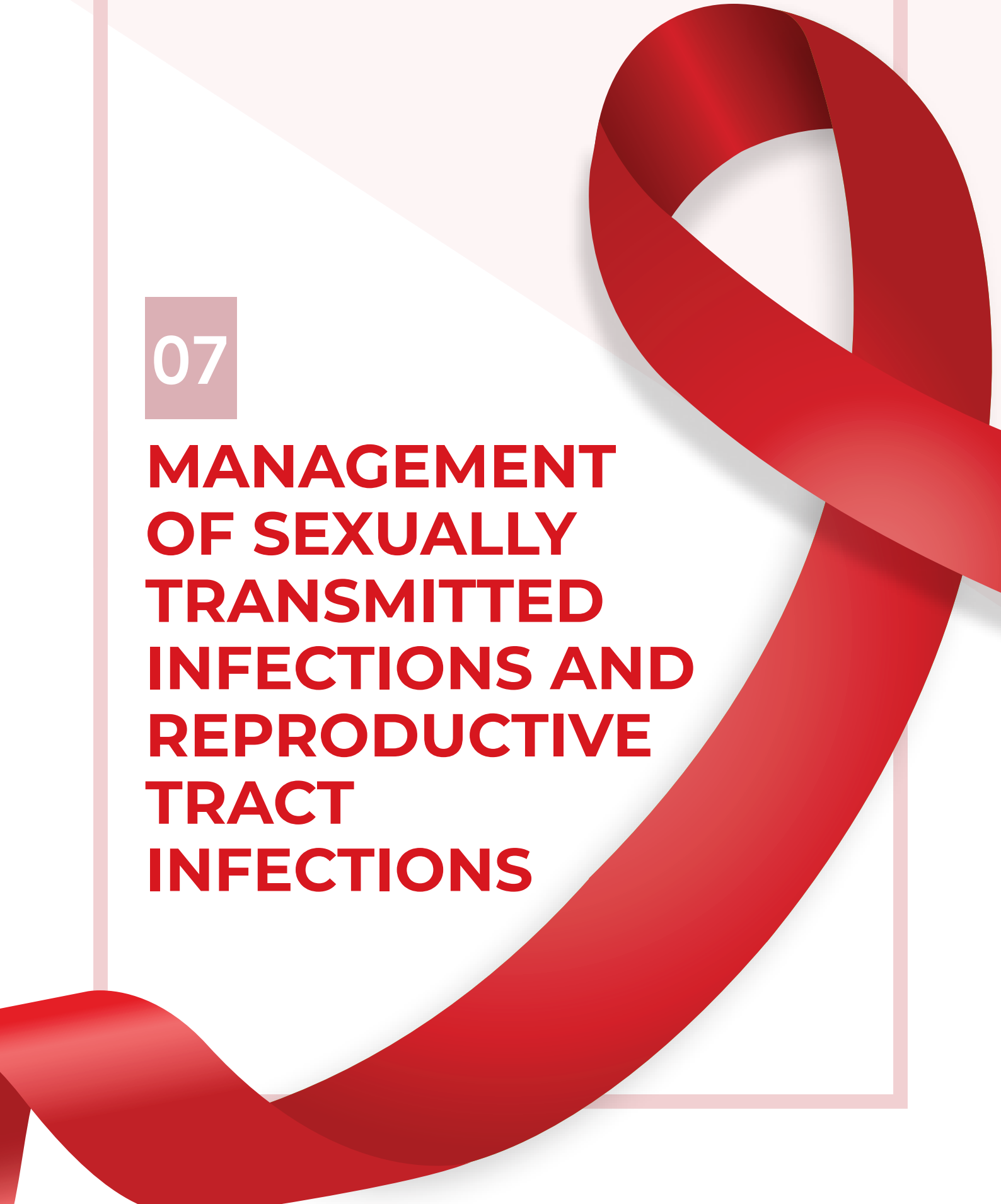
Table 6.16. Year wise coverage of population under LWS, from FY 2017-18 to FY 2024-25

Typology	Coverage								Total tested for HIV							
	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
FSW	67,470	50,311	65,699	69,411	78,528	80,684	74,127	75,889	57,454	37,077	51,692	57,292	6,3652	71,463	65,398	1,01,988
IDU	4,106	4,121	4,564	5,770	10,412	15,658	21,118	17,935	3,696	3,696	4,234	4,603	7,648	9,734	11,277	23,564
MSM	7,247	5,100	7,611	9,850	17,438	12,200	13,228	12,048	5,672	3,373	5,126	7,298	8,835	9,017	5,101	16,850
H/TG	297	226	471	642	1,047	1,021	1,412	1,471	122	139	313	435	634	747	468	2,047
Migrant	6,10,007	5,01,979	4,77,812	5,20,985	5,94,729	6,98,015	8,67,333	7,27,864	3,10,956	2,78,341	2,87,763	2,76,957	3,42,237	4,18,020	3,63,123	4,52,869
Trucker	98,547	78,772	97,539	1,05,600	1,36,551	1,80,664	1,49,931	2,15,079	60,600	53,598	66,036	60,695	74,097	92,703	86,422	1,09,991
OVP	6,41,816	6,44,253	7,17,973	7,26,303	7,97,957	9,69,641	11,49,227	11,12,243	3,20,897	375,968	4,20,402	3,63,878	4,29,297	5,13,145	5,56,477	6,77,066
TB Cases	13,740	12,559	20,241	61,132	17,439	82,703	13,978	74,362	9,317	8,935	16,214	41,350	1,1091	80,153	10,652	71,149
ANC	1,54,349	1,46,981	1,93,795	1,51,561	1,82,478	1,99,232	1,99,353	1,59,529	1,36,134	1,26,559	1,74,690	1,33,853	1,59,010	1,67,187	1,72,832	1,43,482
PLHIV	23,907	21,637	33,511	42,091	41,822	43,276	44,401	42,277								

Typology	Number of HIV positive case detected								Number of HIV+ve linked to ART Centre							
	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
FSW	72	110	132	113	158	203	166	161	64	103	127	109	148	200	158	159
IDU	41	107	178	123	598	956	265	371	30	92	163	113	560	865	242	355
MSM	18	18	43	37	51	62	62	99	15	17	40	35	43	61	60	94
H/TG	8	3	5	7	5	26	21	26	6	2	5	7	5	18	18	25
Migrant	477	500	494	372	463	814	623	923	442	467	463	347	444	789	615	907
Trucker	72	88	117	79	116	178	150	151	69	82	110	71	107	172	146	148
OVP	514	719	915	583	859	1242	1141	1306	469	640	838	541	813	1232	1142	1264
TB Cases	23	55	51	12	25	29	52	88	21	49	31	11	19	21	23	63
ANC	72	65	94	89	108	136	115	147	65	63	90	84	106	132	115	145
PLHIV																

07

MANAGEMENT OF SEXUALLY TRANSMITTED INFECTIONS AND REPRODUCTIVE TRACT INFECTIONS



MANAGEMENT OF SEXUALLY TRANSMITTED INFECTIONS AND REPRODUCTIVE TRACT INFECTIONS

7.1. Background

Sexually transmitted infections (STI) and Reproductive Tract Infection (RTI) pose a significant challenge to sexual health and reproductive health of an individual. Sexually Transmitted Infections are mainly spread through sexual contact and are caused by bacteria, viruses and parasites. There are more than 30 different organisms which are known to be transmitted through sexual route. The infection can be transmitted from one person to another through sexual routes by way of blood, semen, vaginal and other bodily fluids. Some STIs such as Syphilis can also be transmitted through trans-placental route from mother to child during pregnancy and childbirth, but not during breastfeeding.

The reproductive tract infections (RTI) refer to any infection in the reproductive tract of a person. It involves the reproductive tract organs such as fallopian tubes, uterus, and ovaries in females and testes, epididymis, and external genitalia in males. These infections may or may not transmit through sexual route.

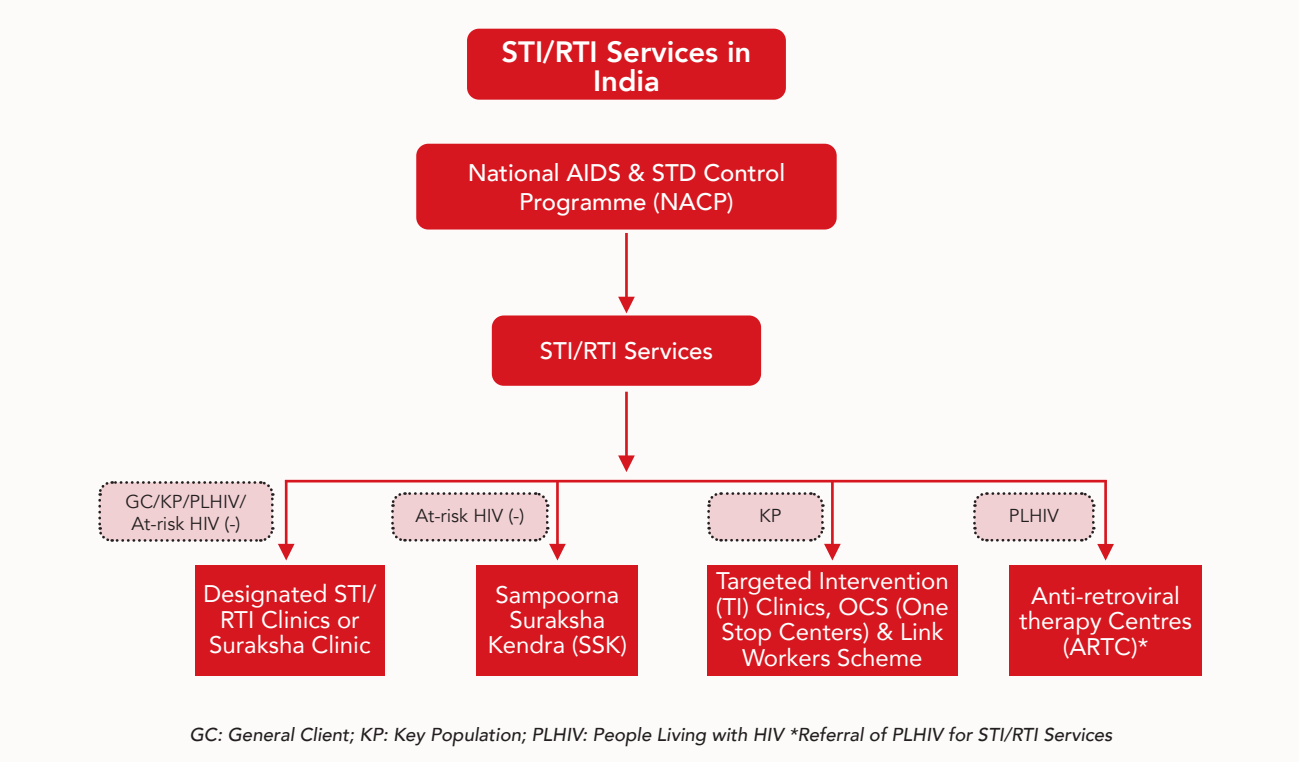
STIs can increase the risk of HIV infection and is one of the major routes of transmission of HIV infection. STIs causes a serious threat leading to sexual and reproductive morbidity such as pelvic inflammatory diseases, infertility and can also lead to cancers. Vertical transmission of STIs can result in stillbirth, neonatal deaths, low birth weights, prematurity, sepsis, neonatal conjunctivitis, and congenital deformities. Hence, the prevention, management, and control of STI and RTI is important to prevent HIV transmission and ensure sound sexual-reproductive health and wellbeing.

Strengthening STI/RTI services is a key component of the National AIDS and STD Control Programme. The NACP-V aims to ensure universal access to quality STI/RTI services for at-risk and vulnerable populations and attainment of dual elimination of vertical transmission HIV and Syphilis in the country.

7.2. Service delivery for STI/ RTI under NACP

In India, STI/RTI services is provided through 1,127 Designated STI/RTI Clinics (DSRCs) branded as Suraksha Clinics which are based at District Hospitals and Medical Colleges under the National AIDS and STD Control Programme. The services below district level are provided through National Health Mission (NHM) at various levels of Community Health Centre (CHCs), Primary Health Centre (PHCs) and Sub-centres (SCs), including Ayushman Arogya Mandir. The STI/RTI services are provisioned for High-Risk Group and Bridge populations through 1,619 Targeted Interventions (TI) clinics and 161 LWS in coordination with the general health system. The STI/RTI services are also included as essential package of services under Sampoorna Suraksha Strategy (SSS) to cater to the needs of 'at-risk HIV Negative' population. The service delivery of STI/RTI services under National AIDS and STD Control Programme is depicted in figure 7.1.

Figure 7.1. STI/RTI Service Delivery Model under NACP



*GC: General Client; KP: Key Population; PLHIV: People Living with HIV *Referral of PLHIV for STI/RTI Services*

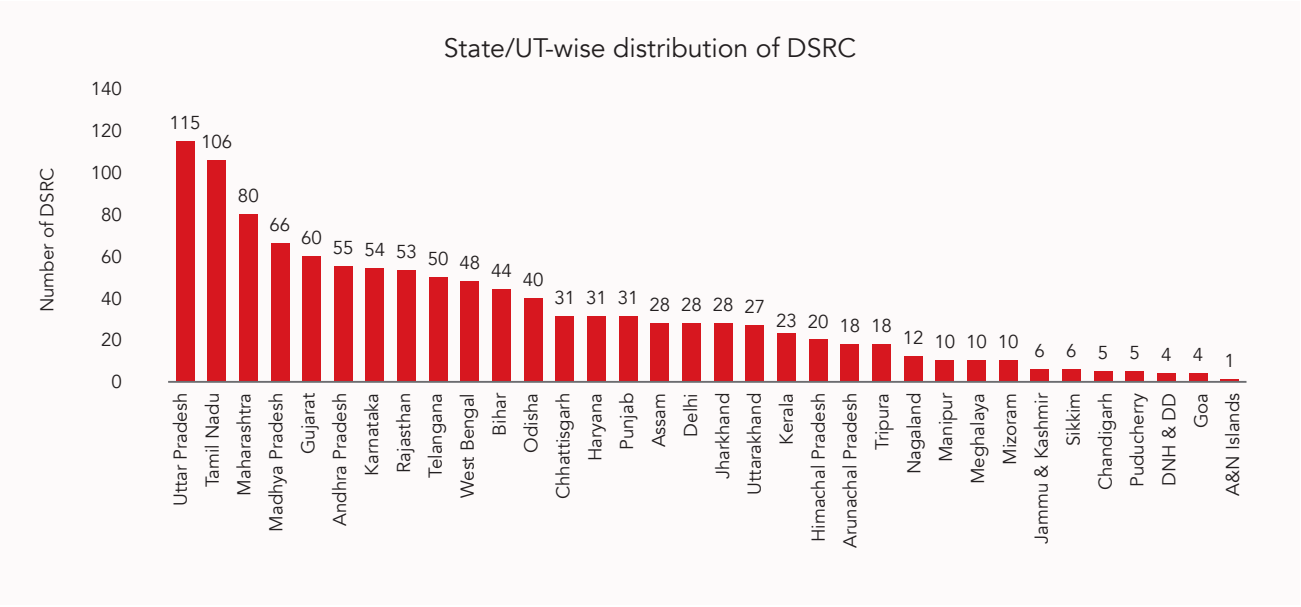
7.3. Designated STI/RTI Clinic/Suraksha Clinics

DSRCs under the NACP are established at 1,127 District Hospitals and Medical Colleges across India. These clinics deliver standardized care for the prevention, diagnosis, and management of STIs and RTIs, ensuring accessible and quality services nationwide. The various STI/RTI services provisioned through DSRC are as below:

1. Management of STIs through syndromic case management approach and colour coded drug kits, promoting treatment completion and follow up.
2. Screening of HIV and STI using Dual HIV-Syphilis Rapid diagnostic test kit.
3. Counselling, Risk assessment and Partner management.
4. Promotion of Condoms and linkage to preventive services.
5. Referral to higher centre in drug resistant & failure cases for further etiological diagnosis.
6. Referral of all at-risk client to Sampoorna Suraksha Kendra to access cyclical preventive services.
7. Provisioning of administration of Injection Benzathine Penicillin G to syphilis reactive patients.

Out of 1,127 DSRCs operational under NACP across the country, more than 75% of DSRCs are located in 15 States – Uttar Pradesh (115), Tamil Nadu (106), Maharashtra including Mumbai (80), Madhya Pradesh (66), Gujarat (60), Andhra Pradesh (55), Karnataka (54), Rajasthan (53), Telangana (50), West Bengal (48), Bihar (44), Odisha (40), Chhattisgarh (31), Haryana (31) and Punjab (31). State/UT-wise distribution of DSRC sis depicted in figure 7.2.

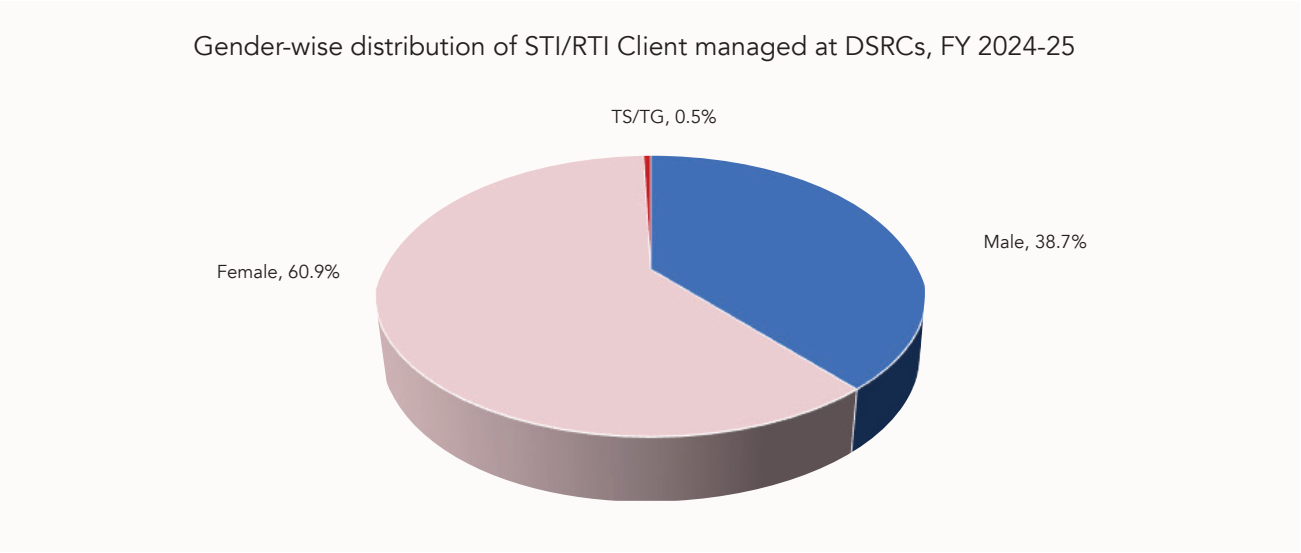
Figure 7.2. Number of DSRCs operational in State/UTs under NACP-V



7.4. STI/RTI Client managed

A total of 111.8 lakhs STI/RTI client were managed in the FY 2024-25. This includes, clients managed at DSRC as well as clients managed by Targeted Intervention sites, Prison and Other Closed Settings. Out of 111.8 lakhs clients, the total number of STI/RTI patients visited at DSRC in the year 2024-25 was 71.95 lakhs. Out of total visits at DSRC, 27.82 lakh were by male clients, 43.81 lakh were by female clients and 0.37 lakh were by H/TG clients. The gender wise percentage distribution of clients managed for STI/RTI service during FY 2024-25 is presented at figure 7.3.

Figure 7.3. Gender-wise distribution of STI/RTI Client managed at DSRCs, FY 2024-25

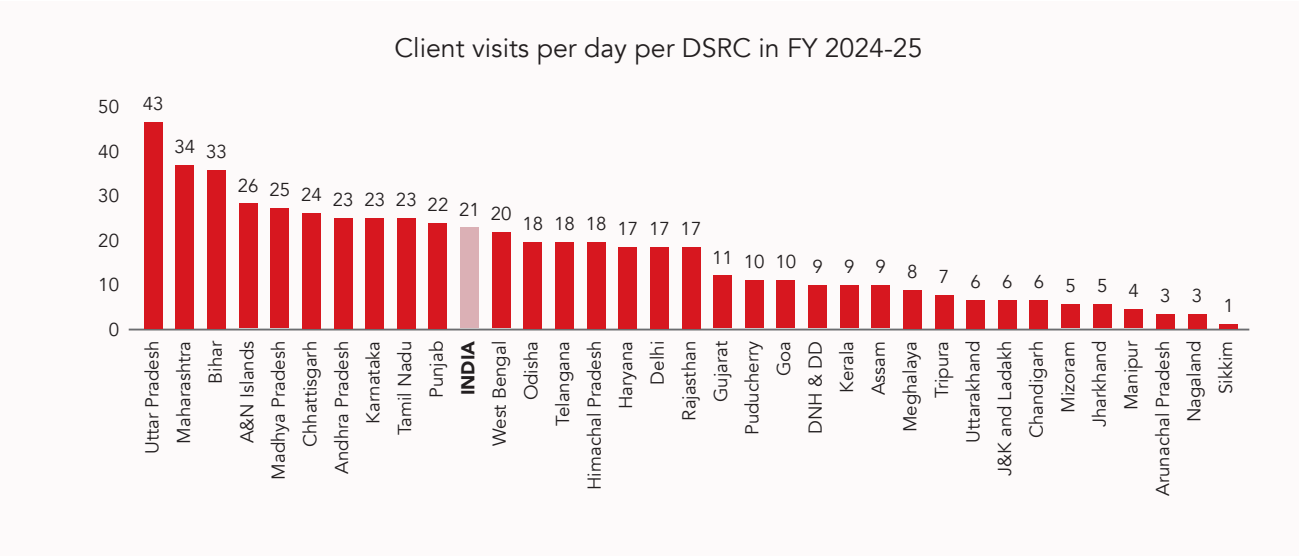


Out of the total client visited, around 75% of the visits were reported from Uttar Pradesh (20.4%), Maharashtra (11.2%), Tamil Nadu (10.3%), Madhya Pradesh (7%), Bihar (6.1%), Andhra Pradesh (5.4%), Karnataka (5.3%), Rajasthan (3.7%), West Bengal (4%).

7.5. Average number of client visits per day per DSRC

The average number of STI/RTI clients managed per day per DSRC across the country in the FY 2024-25 was 21. Nine States reported higher number of clients managed per day against the National figure. These States/UT were Uttar Pradesh (43), Maharashtra (34), Bihar (33), Andaman & Nicobar Islands and Madhya Pradesh (25), Chhattisgarh (24), Andhra Pradesh, Karnataka and Tamil Nadu (23). Less than 10 clients visits per day per DSRC were reported in Assam and Kerala (9), DNH & DD (9), Uttarakhand (8), Meghalaya (8), Tripura (7), Chandigarh, J&K and Uttarakhand (6), Jharkhand (5), Mizoram (5), Manipur (4), Nagaland (3), Arunachal Pradesh (2), Sikkim (1). State/UTs wise distribution of number of STI/RTI client visited per DSRC per day is depicted in figure 7.4.

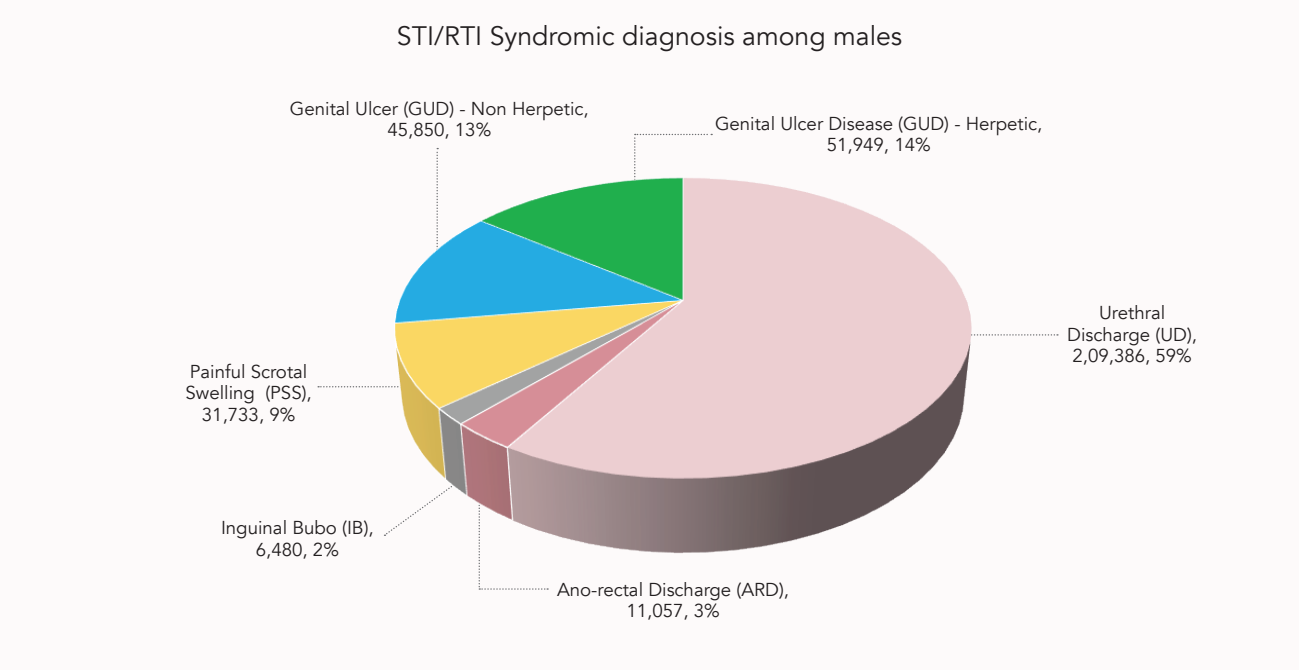
Figure 7.4. Number of Client visits per day per DSRC, FY 2024-25



7.6. Syndromic Case Diagnosed among Males

A STI/RTI syndrome is defined as a group of common symptoms and signs caused by one or more than one sexually transmitted organism. The STI/RTI syndromes reported in males are – Urethral Discharge (UD), Anorectal Discharge (ARD), Genital Ulcer Disease – Non-Herpetic (GUD – NH), Genital Ulcer Disease – Herpetic (GUD – H), Painful Scrotal Swelling (PSS) and Inguinal Bubo (IB). The clients accessing STI/RTI services at DSRC are also screened for genital warts and other STI/RTI. In the FY 2024-25, total around 3.56 lakh syndromes were reported among males. Among the total number of syndromes reported, the highest number of syndromes diagnosed are Urethral Discharge (59%) followed by Genital Ulcer Disease Herpetic (14%) and Genital Ulcer Disease Non-Herpetic (13%). Additionally, around 5.81 lakh other STI's and 0.33 lakh cases of Genital Warts were also reported. The distribution of syndromes reported in males is depicted in figure 7.5.

Figure 7.5. Percentage of STI/RTI Syndromes diagnosed at DSRC among Males, FY 2024-25



Urethral Discharge remained the major syndrome diagnosed in male clients at DSRC. Out of the total no. of syndromic diagnosis of Urethral Discharge reported during FY 2024-25, around two-thirds (65%) were from the five States of Uttar Pradesh (22%), Madhya Pradesh (14%), Karnataka (10%), Odisha (9.5%), and Telangana (7%); this is perhaps on account of higher coverage of STI/RTI services according the total size of population of these States. However, considering the GUD-H as the second predominant syndrome, the state of Uttar Pradesh contributes 15% of the GUD-H case to the total cases reported during the reference period, followed by Gujarat, Karnataka, Maharashtra, and Odisha at 9% each. Moreover, GUD-NH is another predominant syndrome among male, the state of Uttar Pradesh (20%) and Madhya Pradesh (13%) contributed one-third of the total cases reported during the year, these States were followed by Karnataka with 11% of GUD-NH cases among males. Three majors States contributed little more than half (53%) of syndromic diagnosis of Painful Scrotal Syndrome among males, those States were Uttar Pradesh (26%), Odisha (16%) and Karnataka (11%). State/UT-wise wise proportionate distribution of STI/RTI syndromes among males is depicted in figure 7.6.

7.7. Syndromic Case Diagnosed among Females

The STI/RTI syndromes reported in females are – Vaginal/Cervical discharge (VCD), Anorectal Discharge (ARD), Genital Ulcer Disease – Non-Herpetic (GUD – NH), Genital Ulcer Disease – Herpetic (GUD – H), Lower Abdominal Pain (LAP) and Inguinal Bubo (IB). In the FY 2024-25, a total of around 18.9 lakh syndromes were reported in females and the most predominant syndrome reported is Vaginal/Cervical Discharge (VCD) (58%), followed by Lower Abdominal Pain (38%). Additionally, 0.18 lakh cases of Genital Warts and 4.5 lakh other STI/RTI were reported among females. The distribution of syndromes reported in females is depicted in figure 7.7.

Figure 7.6. State/UT-wise proportionate distribution of STI/RTI Syndromes reported among males, FY 2024-25.

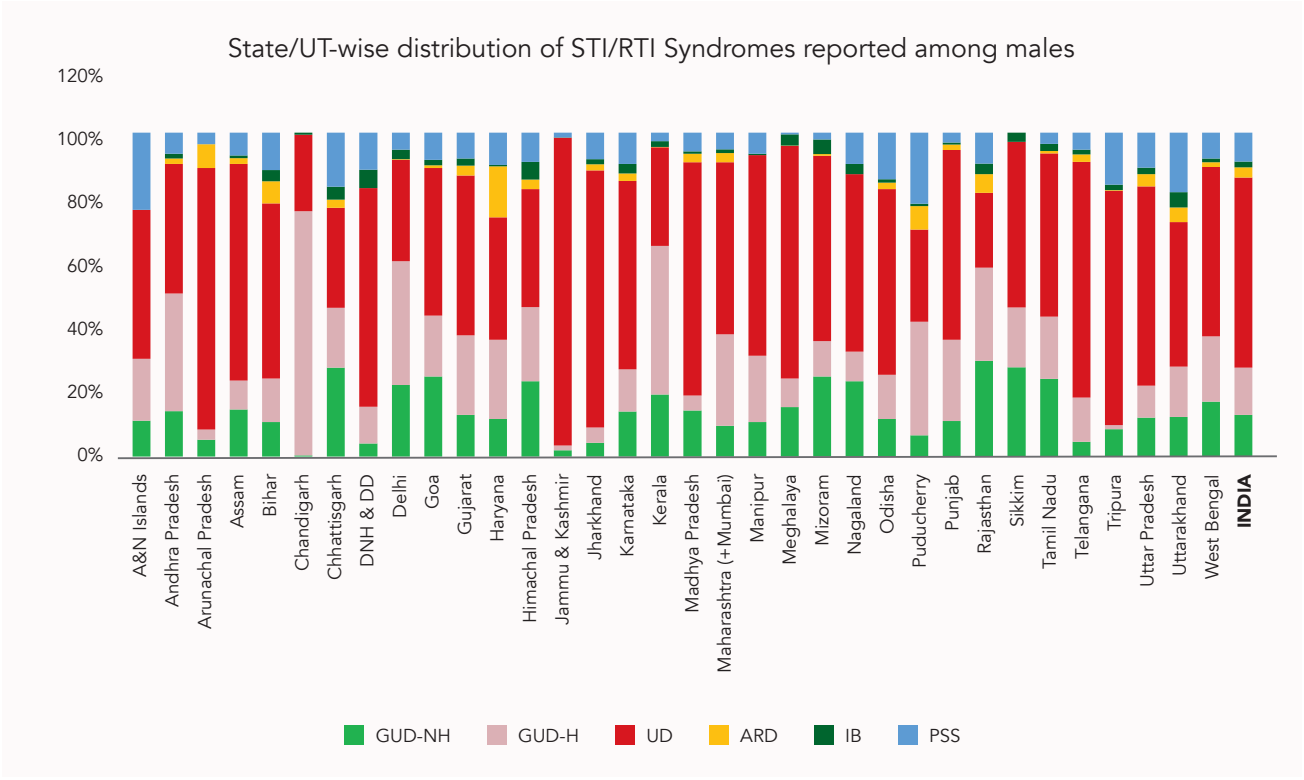
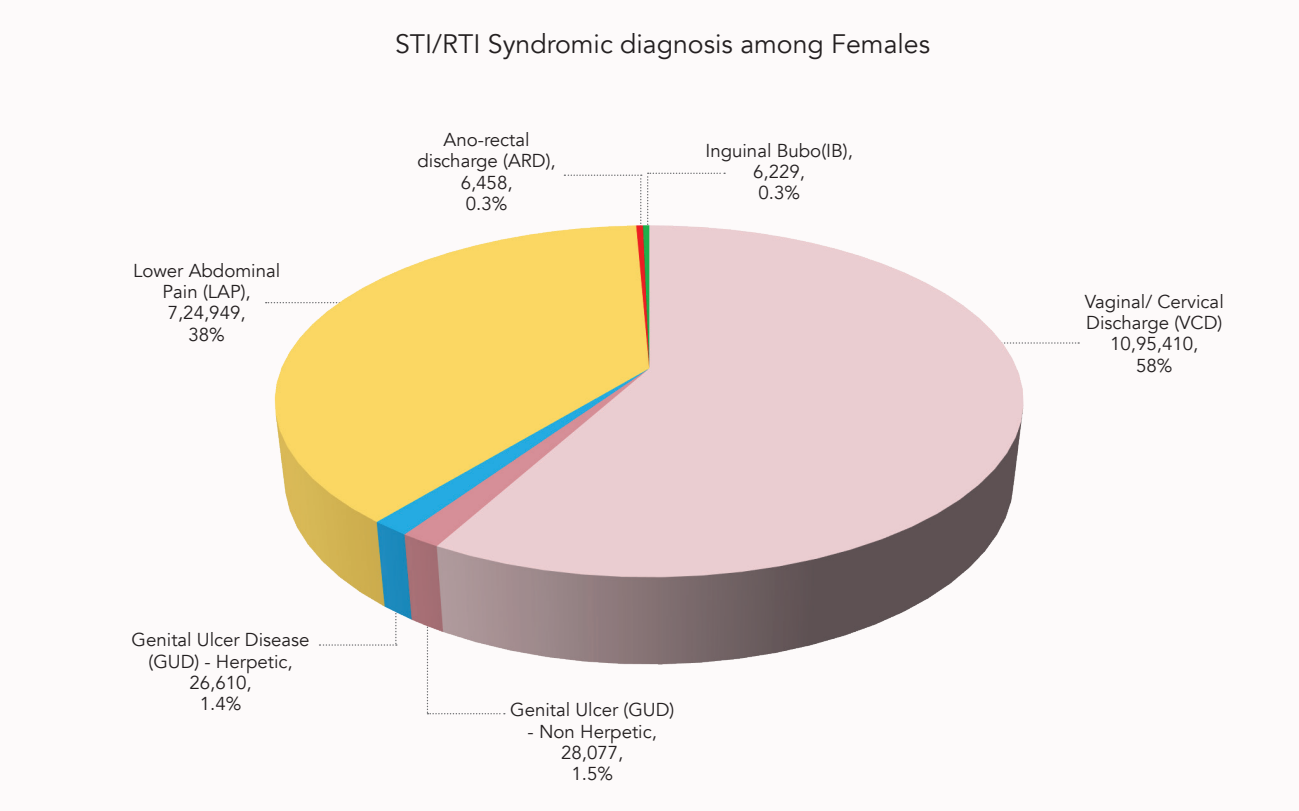
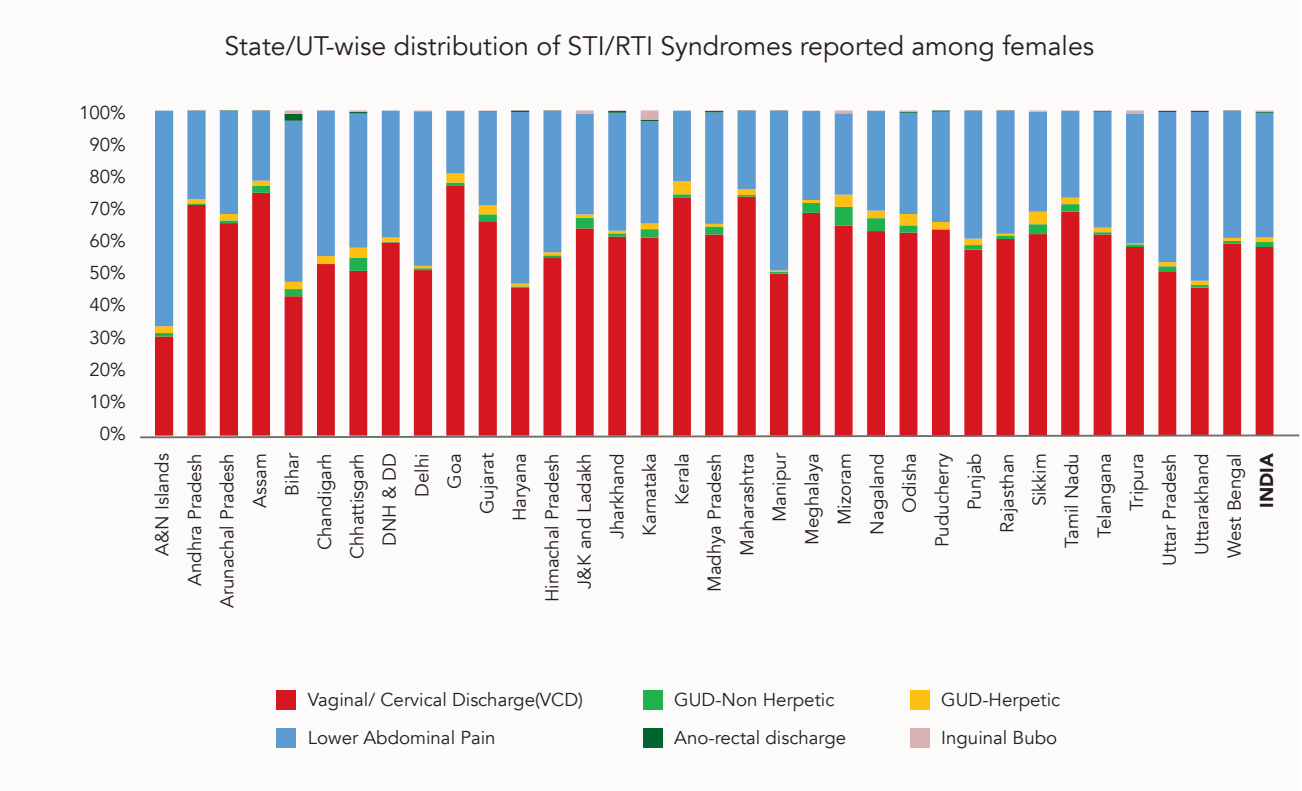


Figure 7.7. Percentage of STI/RTI Syndromes diagnosed at DSRC among females, FY 2024-25



The STI/RTI syndromic diagnosis reported among females during the FY 2024-25, Vaginal/Cervical Discharge (VCD) has remained the predominant syndrome diagnosed in females attending at DSRC, followed by Lower Abdominal Pain (LAP) and Genital Ulcer Disease-Non-Herpetic (GUD-NH). States of Uttar Pradesh (20%), Madhya Pradesh (12%), Andhra Pradesh (8%) followed by Karnataka and Rajasthan (7%) contributed 55% of the total VCD reported in the country during the FY 2024-25. Similarly, more than two-thirds of the reported LAP cases among females were from States of Uttar Pradesh (28%), Madhya Pradesh (10%), Rajasthan (7%), Bihar, Karnataka, Haryana (6%) each and West Bengal (5%). The higher proportion of the STI/RTI syndromes reported from these States are perhaps to the coverage of STI/RTI services. State/UT-wise proportionate distribution of various syndromes in females for FY 2024-25 is demonstrated in figure 7.8.

Figure 7.8. State/UT-wise proportionate distribution of STI/RTI Syndromes reported among females, FY 2024-25



7.8. HIV and Syphilis screening among DSRC attendees

STI/RTI pose a major threat in spreading HIV among the those infected and serves as a major route of transmission of infection and therefore HIV screening among DSRC attendees is essential for all the clients who have visited DSRC for seeking any form of STI/RTI treatment. During the FY 2024-25, a total of 71.9 lakh episodes were managed at DSRC and 43.9 lakh HIV tests were done. The national positivity of HIV among the STI/RTI clients was found to be of 0.3% Gender-wise distribution of HIV testing and positivity is depicted in table 7.1.

Table 7.1. Gender-wise distribution of HIV Screening and positivity among DSRC attendees, FY 2024-25

Indicator	Males	Females	H/TG	Total
Total number of HIV screening done	17,90,806	25,86,200	17,613	43,94,619
Total number of tests reactive	7,266	5,305	202	12,773
% Test positivity	0.41%	0.21%	1.15%	0.29%

Syphilis is one of STI which can be present in the body for a long time and it can also be transmitted from mother to child during the peri-partum stage leading to birth of syphilis exposed babies and congenital syphilis. Syphilis is treated using Injection Benzathine Penicillin as the drug of choice. In the year FY 2022-24, around 1.13 lakh injection Benzathine Penicillin G 2.4 MU were procured through NACO for treatment of syphilis for two years. In the FY 2024-25, a total of 71.9 lakh clients visited DSRC out of which 46.1 lakh clients were screened for Syphilis, among which around 0.43 lakh clients were found reactive with a national positivity of 0.9%. The gender-wise distribution of Syphilis testing and positivity is depicted in table 7.2.

Table 7.2. Gender-wise distribution of Syphilis screening and positivity among DSRC attendees, FY 2024-25

Indicator	Males	Females	H/TG	Total
Total number of syphilis screening done	19,26,779	26,66,414	22,355	46,15,548
Total number of tests reactive	29,717	12,845	920	43,482
% Test positivity	1.54%	0.48%	4.12%	0.94%

During the FY 2024-25, the highest HIV reactivity among DSRC attendees was seen in the States of Goa (3.4%), Jammu & Kashmir (2.8%) and Meghalaya and Mizoram 2.5% each against the national average of 0.3%. Whereas the States with highest syphilis positivity is reported among the North-East states, especially Arunachal Pradesh (14%), Sikkim (11%), Meghalaya (7%) and Mizoram (4%) against the national average of 0.9%. State/UT-wise data on HIV and syphilis screening and reactivity is depicted in table 7.3.

Table 7.3. State/UT-wise distribution of HIV and Syphilis screening and reactive at DSRCs, FY 2024-25.

State/UT	STI/RTI Client Managed at DSRC	Percentage of STI/RTI Client screened for HIV out of the total visited at DSRC	HIV positivity out of total screened	Percentage of STI/RTI Client screened for Syphilis out of the total visited at DSRC	Syphilis positivity out of total screened
A&N Islands	7,732	100%	0.05%	100%	1.72%
Andhra Pradesh	3,87,391	73%	0.10%	60%	0.33%

Table continued...

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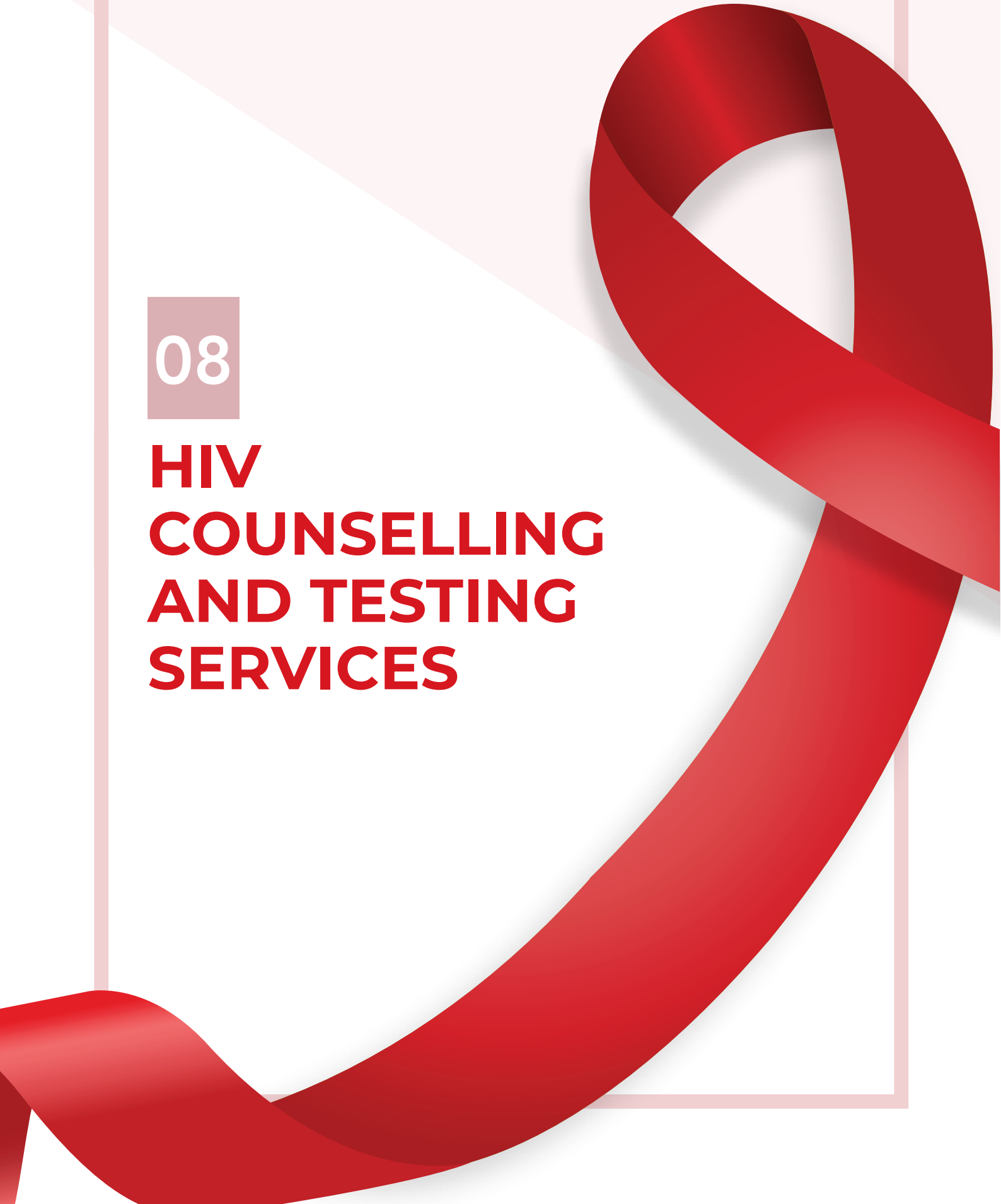
State/UT	STI/RTI Client Managed at DSRC	Percentage of STI/RTI Client screened for HIV out of the total visited at DSRC	HIV positivity out of total screened	Percentage of STI/RTI Client screened for Syphilis out of the total visited at DSRC	Syphilis positivity out of total screened
Arunachal Pradesh	16,658	39%	0.08%	33%	14.21%
Assam	75,690	16%	0.76%	31%	2.74%
Bihar	4,38,690	77%	0.19%	57%	0.70%
Chandigarh	8,626	90%	0.22%	87%	1.54%
Chhattisgarh	2,25,071	28%	0.45%	90%	1.06%
DNH & DD	11,282	64%	0.01%	64%	1.23%
Delhi	1,40,048	47%	0.39%	38%	2.96%
Goa	11,476	14%	3.38%	35%	1.81%
Gujarat	1,92,456	81%	0.30%	89%	2.15%
Haryana	1,60,646	98%	0.37%	98%	0.68%
Himachal Pradesh	1,05,149	76%	0.04%	83%	0.41%
J&K and Ladakh	10,965	13%	2.75%	75%	0.66%
Jharkhand	38,231	47%	0.42%	43%	0.52%
Karnataka	3,79,366	43%	0.16%	70%	0.54%
Kerala	63,129	94%	0.07%	70%	3.29%
Madhya Pradesh	5,00,805	32%	0.15%	58%	1.09%
Maharashtra	8,07,173	95%	0.63%	67%	0.94
Manipur	12,938	51%	0.38%	53%	1.92%
Meghalaya	25,260	42%	2.52%	81%	7.09%
Mizoram	15,610	92%	2.45%	99%	4.16%
Nagaland	10,409	100%	0.30%	99%	1.93%
Odisha	2,19,525	54%	0.33%	67%	1.53%
Puducherry	14,986	59%	0.17%	80%	1.68%
Punjab	2,04,096	51%	0.33%	63%	1.08%
Rajasthan	2,63,949	53%	0.44%	78%	0.96%
Sikkim	2,117	80%	0.12%	98%	10.69%
Tamil Nadu	7,40,421	84%	0.06%	95%	0.51%
Telangana	2,65,670	52%	0.33%	62%	0.55%
Tripura	37,411	46%	0.70%	98%	0.19%
Uttar Pradesh	14,69,693	46%	0.16%	38%	0.44%
Uttarakhand	49,718	47%	0.15%	51%	0.93%
West Bengal	2,82,850	49%	0.29%	68%	1.73%
India	**71,95,237**	**61%**	**0.29%**	**64%**	**0.94%**

7.9. STI/RTI in Hijra/ Transgender persons

One of the components of DSRC clinic is to provide the STI/RTI services to the H/TG persons. All the services detailed above are provided to them through Suraksha Clinic. Sometimes, they are also referred from TI sites to DSRC in case of treatment failure or in cases of complications in management of STI/RTI. In the FY 2024-25, a total of 36,779 visits were made by H/TG persons to DSRC for seeking the STI/RT services. A total of 22,355 syphilis screening was done among DSRC attendees with 4.12% positivity, much higher than the national average of 0.94%.Total number of HIV screening done among DSRC H/TG attendees was 17,613 out of which 202 clients were found to be screened reactive with a positivity rate of 1.15% against the national average of 0.29%.Out of the total STI syndromes reported among H/TG, the highest proportion of STI/RTI reported was Urethral Discharge (31%) followed by Ano-rectal discharge (23%) and Genital Ulcer Disease-Non herpetic at around 17% respectively.

08

HIV COUNSELLING AND TESTING SERVICES



HIV COUNSELLING AND TESTING SERVICES

8.1. Background

Integrated Counselling and Testing Centres (ICTCs), launched in 1997, continue to serve as the primary entry point for HIV counselling and testing services in India. They play a critical role in facilitating early diagnosis and ensuring linkage to HIV prevention, care, treatment, and support services. Over the years, programmatic evidence has shown that while India remains a low-prevalence country, the epidemic is concentrated among key populations. At the same time, it was observed that a segment of the population that does not self-identify as key population groups, but demonstrates behavioural risk factors for HIV or STIs in themselves or their partners, is also at increased risk of acquiring HIV and other STIs.

To address this programmatic need, NACP V introduced the Sampoorna Suraksha Strategy (SSS), aimed at reaching individuals who may not identify as part of high-risk groups but are nevertheless vulnerable due to their risk behaviours. The strategy focuses on ensuring that HIV counselling and testing services are more inclusive, client-centric, and responsive to these emerging risk dynamics. This shift is consistent with the National HCTS Guidelines 2024, which explicitly outline priority testing approaches for both key populations and at-risk populations outside of traditional high-risk categories.

The programme emphasises moving beyond a volume-driven approach to a yield-focused approach. Programmatic data demonstrated that increased testing volumes did not necessarily result in higher HIV case detection. Therefore, the strategy now prioritises high-yield testing modalities that optimise resource use and maximise HIV case identification. These include: Index Testing Services – offering HIV testing to spouses, biological children and partners of people living with HIV. Social Network Strategy (SNS) – engaging social, sexual and needle/syringe sharing networks of individuals at risk to expand reach for HIV testing. Provider-Initiated Testing and Counselling (PITC) – offering HIV testing to clients presenting with conditions, behaviours, or exposures associated with a higher likelihood of HIV infection. Mobile and bike outreach to reach the last mile and bring services closer to the hard-to-reach populations.

By integrating SSS, index testing, SNS, mobile outreach and PITC, India's HIV testing strategy under NACP V strengthens the national response by ensuring equitable access, prioritisation of high-risk and at-risk populations, and alignment with global evidence-based standards. This integrated approach enhances the efficiency of HIV case detection while reinforcing the continuum of prevention, care, and treatment services.

HIV counselling and testing services under the NACP are provided to two main groups: pregnant women and clients other than pregnant women. While the latter group (clients other than pregnant women) is discussed in this section, and the content on the pregnant women is covered in the chapter 11.

8.2. HIV Counselling and Testing Service (HCTS) Uptake

Prior to 2019, HIV testing under NACP was primarily offered at ICTCs and selected facilities in the general health system through Facility Integrated Counselling and Testing Centres (FICTCs). At these sites, HIV screening was conducted using the Whole Blood Finger Prick Test (WBFPT). With the inclusion of HIV in the National Essential Diagnostics List (NEDL) in 2019, HIV screening using WBFPT was scaled up and decentralised to sub-centres and

peripheral health facilities, thereby enhancing accessibility at the community level.

In addition to facility-based services, HIV screening is also extended to high-risk and at-risk populations through NACP-supported service delivery points, including Targeted Intervention (TI) sites, Designated STI/RTI Clinics (DSRCs), Opioid Substitution Therapy (OST) centres, Prisons, and Other Closed Settings (OCS). Dual screening is offered both at these facilities and through community-based testing and lay provider approaches. NACO has introduced HIV/Syphilis dual test kits, which allow simultaneous screening for both infections and improve efficiency in identifying cases.

Individuals who test reactive at screening sites are referred to ICTCs for confirmatory diagnosis using the standard three-test strategy, in accordance with national algorithms. Effective HIV management begins with rapid linkage to care, treatment, and support services immediately following diagnosis, ensuring continuity across the HIV care cascade.

HIV screening and testing data are routinely reported through the Health Management Information System (HMIS). In addition, ICTCs also report individual level data through the SOCH platform. However, as reporting through HMIS and SOCH continues to be strengthened, the primary source of programmatic data currently remains the Excel-based Monthly Progress Reports submitted by respective SACS. Strengthening data systems for timely, accurate, and integrated reporting remains a priority to improve programme monitoring and decision-making. The primary source of data presented in this chapter is the Excel-based Monthly Progress Reports submitted by SACS, unless otherwise specified.

Figure 8.1. Trend in HIV testing from FY 2017-18 to FY 2024-25

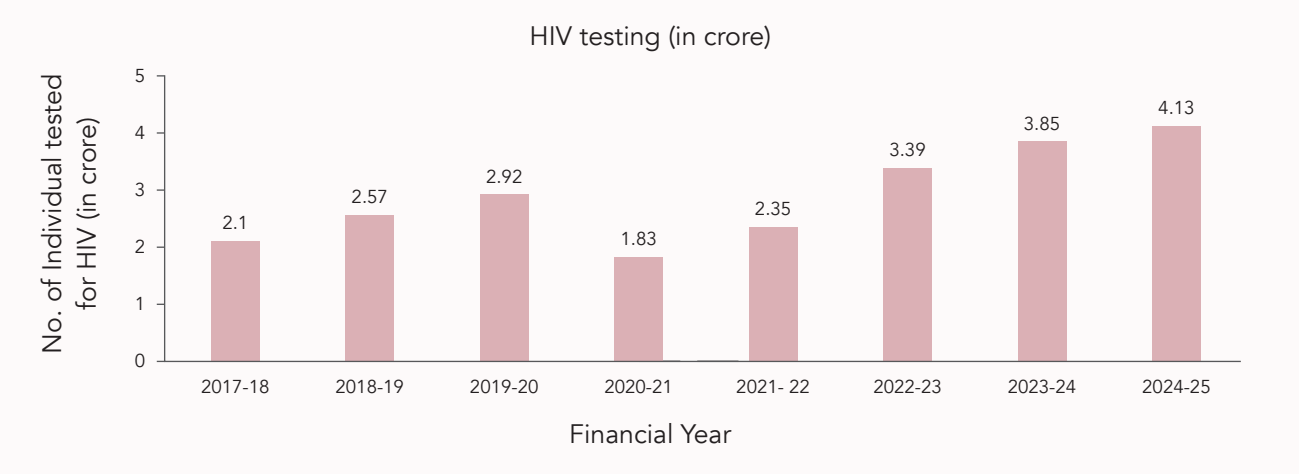
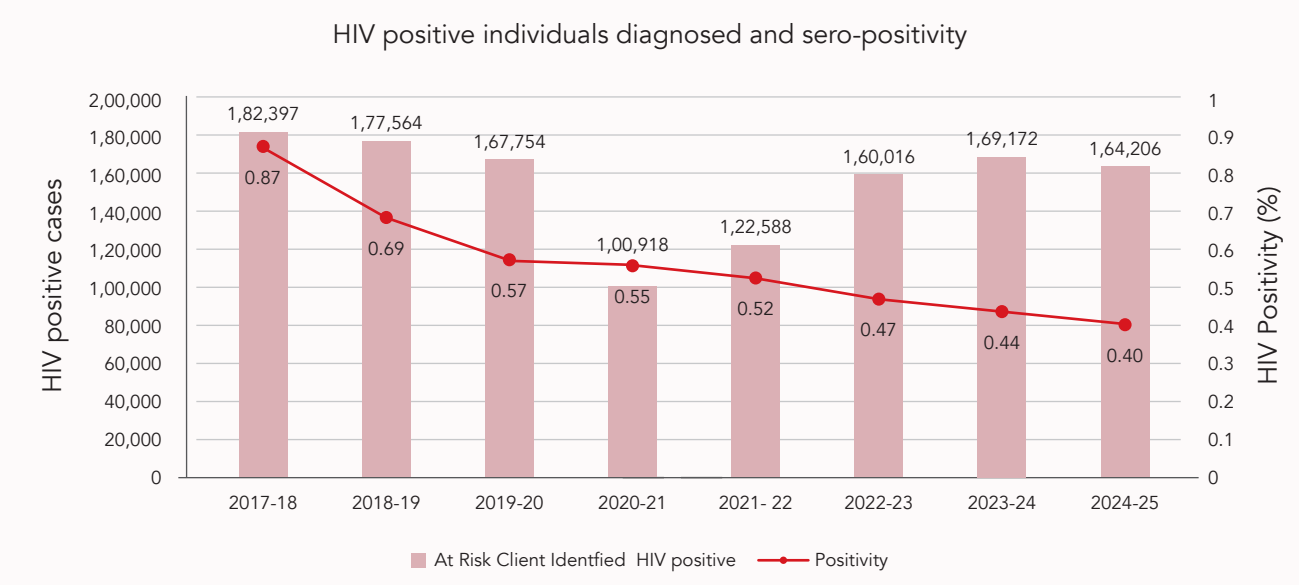


Figure 8.2. Trend in identification of HIV positive individuals and sero-positivity from FY 2017-18 to FY 2024-25



Figures 8.1 and 8.2 demonstrate steady expansion of HIV testing services in India. Between FY 2017–18 and FY 2024–25, the annual number of tests nearly doubled from 2.1 crore to 4.1 crore. During the same period, sero-positivity declined from 0.87% to 0.40%, and the number of HIV-positive cases identified reduced slightly from 1.8 lakh to 1.6 lakh. These trends reflect both the wider population coverage achieved and the country's progress as a low-prevalence setting moving closer to elimination. In such a context, identifying each additional case naturally requires greater effort and more focused outreach. The programme's success in scaling up testing now provides a strong foundation to further optimise impact through high-yield strategies tailored for at-risk populations, thereby sustaining momentum towards national elimination goals.

8.3. Walk-in-client Vs Provider Initiated Testing

At ICTCs (HCTSc), clients who are tested for HIV belong to two major categories—walk-in clients who came voluntarily, and provider-initiated clients referred by healthcare providers. Most screening sites, located within the general health system, primarily cater to provider-referred clients. Figure 8.3 presents the state-wise distribution of these categories, and table 8.1 provides their respective yields.

Of the total HIV tests conducted, 43% were at screening sites, though with a lower reactivity of 0.19%. At ICTCs, provider-initiated testing accounted for 43% of all tests with a positivity of 0.57%, while walk-in clients represented 14% of tests but contributed the highest positivity at 1.1%. This demonstrates the critical role of emphasising counselling efforts on clients who proactively seek testing based on their own risk perception.

The lower yield from provider-initiated testing largely reflects that the testing in this group comprises routine screening before medical or surgical procedures, offered to all out patient and in patient attendees. Moving forward, the programme is focusing on strengthening risk awareness and demand generation among at-risk populations so that more individuals voluntarily access HIV testing services, targeted outreach and mobile strategies actively seek out individuals at risk and we also funnel risk through our communication efforts. As highlighted in Chapter 5, the Sampoorna Suraksha Strategy (SSS) has been scaled up to specifically reach such at-risk clients. Leveraging these approaches will help improve overall yield, sustain prevention gains, and ensure timely linkage to care and treatment services.

Figure 8.3. State/UT-wise breakup of HIV testing by category of clients HCTS Service uptake, FY 2024-25.

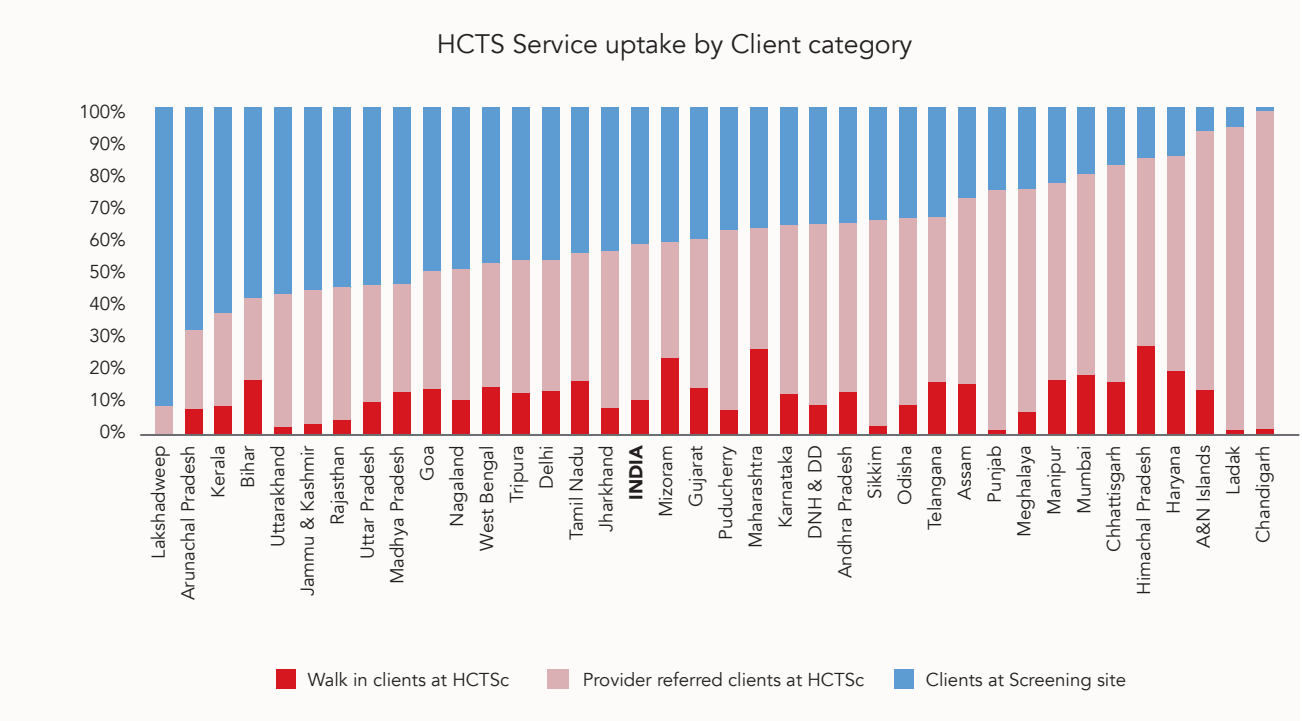


Table 8.1. State/UT-wise HIV Counselling and Testing Service uptake, FY 2024-25

S. No.	State/UT(SACS/ DACS)	HIV Tested/Screened					Percentage			HIV Positive			Positivity				Reactivity at Screening sites	
		CI -ICTC	PI -ICTC	Total ICTC	Screening Sites	Total	CI -ICTC	PI -ICTC	Screening Sites	CI -ICTC	PI -ICTC	Total	CI -ICTC	PI-ICTC	Exclusively for ICTC	Overall total Positivity	Reactive	Reactivity
	India	57,23,388	1,77,90,038	2,35,13,426	1,78,04,370	4,13,17,796	14%	43%	43%	63,096	1,01,110	1,64,206	1.10	0.57	0.70	0.40	33,219	0.19
1	A&N Islands	4,149	23,863	28,012	2,186	30,198	14%	79%	7%	8	35	43	0.19	0.15	0.15	0.14	2	0.09
2	Andhra Pradesh	2,52,794	10,07,130	12,59,924	6,89,330	19,49,254	13%	52%	35%	3,513	9,658	13,171	1.39	0.96	1.05	0.68	591	0.09
3	Arunachal Pradesh	6,365	20,384	26,749	56,927	83,676	8%	24%	68%	106	429	535	1.67	2.10	2.00	0.64	419	0.74
4	Assam	64,275	2,35,187	2,99,462	1,15,307	4,14,769	15%	57%	28%	4,044	2,439	6,483	6.29	1.04	2.16	1.56	1,498	1.30
5	Bihar	3,40,314	5,06,132	8,46,446	11,88,219	20,34,665	17%	25%	58%	5,724	3,625	9,349	1.68	0.72	1.10	0.46	5,577	0.47
6	Chandigarh	1,695	97,768	99,463	1,043	1,00,506	2%	97%	1%	68	550	618	4.01	0.56	0.62	0.61	16	1.53
7	Chhattisgarh	93,279	3,89,794	4,83,073	1,02,042	5,85,115	16%	67%	17%	1,254	1,890	3,144	1.34	0.48	0.65	0.54	235	0.23
8	DNH &DD	5,244	31,662	36,906	20,537	57,443	9%	55%	36%	44	77	121	0.84	0.24	0.33	0.21	14	0.07
9	Delhi	1,53,500	4,64,438	6,17,938	5,38,477	11,56,415	13%	40%	47%	2,538	3,813	6,351	1.65	0.82	1.03	0.55	1,131	0.21
10	Goa	18,338	47,220	65,558	65,830	1,31,388	14%	36%	50%	85	157	242	0.46	0.33	0.37	0.18	64	0.10
11	Gujarat	2,92,269	9,41,561	12,33,830	8,30,258	20,64,088	14%	46%	40%	3,692	4,070	7,762	1.26	0.43	0.63	0.38	700	0.08
12	Haryana	1,68,808	5,75,479	7,44,287	1,30,165	8,74,452	19%	66%	15%	2,505	3,480	5,985	1.48	0.60	0.80	0.68	246	0.19
13	Himachal Pradesh	94,493	2,02,378	2,96,871	54,158	3,51,029	27%	58%	15%	200	555	755	0.21	0.27	0.25	0.22	29	0.05
14	Jammu & Kashmir	10,312	1,31,522	1,41,834	1,80,146	3,21,980	3%	41%	56%	116	294	410	1.12	0.22	0.29	0.13	142	0.08
15	Jharkhand	37,413	2,20,744	2,58,157	2,02,447	4,60,604	8%	48%	44%	643	1,447	2,090	1.72	0.66	0.81	0.45	163	0.08
16	Karnataka	4,73,652	20,09,925	24,83,577	13,93,217	38,76,794	12%	52%	36%	2,359	10,094	12,453	0.50	0.50	0.50	0.32	874	0.06
17	Kerala	1,52,751	4,96,400	6,49,151	11,04,729	17,53,880	9%	28%	63%	345	853	1,198	0.23	0.17	0.18	0.07	78	0.01
18	Ladak	75	5,479	5,554	352	5,906	1%	93%	6%	0	5	5	0.00	0.09	0.09	0.08	0	0.00
19	Lakshadweep	0	283	283	2,963	3,246	0%	9%	91%	0	0	0	0.00	0.00	0.00	0.00	0	0.00
20	Madhya Pradesh	2,76,012	7,01,572	9,77,584	11,40,821	21,18,405	13%	33%	54%	2,165	4,395	6,560	0.78	0.63	0.67	0.31	3,593	0.31
21	Maharashtra	11,92,538	16,98,178	28,90,716	16,98,433	45,89,149	26%	37%	37%	7,413	5,552	12,965	0.62	0.33	0.45	0.28	1,340	0.08
22	Mumbai	1,11,069	3,79,488	4,90,557	1,24,298	6,14,855	18%	62%	20%	1,522	1,552	3,074	1.37	0.41	0.63	0.50	391	0.31
23	Manipur	21,427	77,889	99,316	29,882	1,29,198	17%	60%	23%	316	453	769	1.47	0.58	0.77	0.60	79	0.26
24	Meghalaya	6,884	68,286	75,170	25,012	1,00,182	7%	68%	25%	275	870	1,145	3.99	1.27	1.52	1.14	309	1.24
25	Mizoram	25,063	37,654	62,717	43,985	1,06,702	23%	35%	41%	846	1,065	1,911	3.38	2.83	3.05	1.79	218	0.50
26	Nagaland	18,427	70,238	88,665	86,339	1,75,004	11%	40%	49%	658	1,258	1,916	3.57	1.79	2.16	1.09	967	1.12
27	Odisha	1,34,018	8,42,568	9,76,586	4,98,933	14,75,519	9%	57%	34%	820	2,736	3,556	0.61	0.32	0.36	0.24	884	0.18
28	Puducherry	13,122	94,548	1,07,670	64,427	1,72,097	8%	55%	37%	55	110	165	0.42	0.12	0.15	0.10	68	0.11
29	Punjab	12,230	6,63,378	6,75,608	2,27,035	9,02,643	1%	73%	25%	1,139	10,412	11,551	9.31	1.57	1.71	1.28	668	0.29
30	Rajasthan	97,544	8,96,776	9,94,320	12,08,620	22,02,940	4%	41%	55%	2,077	4,614	6,691	2.13	0.51	0.67	0.30	1,794	0.15
31	Sikkim	912	21,226	22,138	11,635	33,773	3%	63%	34%	16	38	54	1.75	0.18	0.24	0.16	3	0.03
32	Tamil Nadu	5,97,463	14,39,720	20,37,183	16,46,435	36,83,618	16%	39%	45%	3,138	3,941	7,079	0.53	0.27	0.35	0.19	791	0.05
33	Telangana	2,06,473	6,55,855	8,62,328	4,32,848	12,95,176	16%	51%	33%	3,494	5,440	8,934	1.69	0.83	1.04	0.69	1,795	0.41
34	Tripura	18,480	59,774	78,254	68,285	1,46,539	13%	41%	47%	596	755	1,351	3.23	1.26	1.73	0.92	681	1.00
35	Uttar Pradesh	4,41,481	15,59,771	20,01,252	23,95,123	43,96,375	10%	35%	54%	8,105	9,236	17,341	1.84	0.59	0.87	0.39	5,788	0.24
36	Uttarakhand	7,734	1,40,949	1,48,683	1,99,337	3,48,020	2%	41%	57%	354	1,067	1,421	4.58	0.76	0.96	0.41	744	0.37
37	West Bengal	3,72,785	9,74,819	13,47,604	12,24,589	25,72,193	14%	38%	48%	2,863	4,145	7,008	0.77	0.43	0.52	0.27	1,327	0.11

CI- ICTC:- Client Initiated Clients/Walk in Clients at ICTC, PI-ICTC:- Provider Initiated Clients / Provider Referred Clients at ICTC

Table 8.1 provides the state-wise uptake of HIV counselling and testing services (HCTS) for FY 2024–25. The data highlight wide variation in service delivery patterns across the country. The proportion of walk-in clients across states ranged from 1% in Punjab to 27% in Himachal Pradesh, with a national average of 14%. Similarly, the share of tests conducted at screening sites varied from 1% in Chandigarh to 68% in Arunachal Pradesh with a national average of 43%, reflecting differences in how states have integrated HIV screening within their health systems.

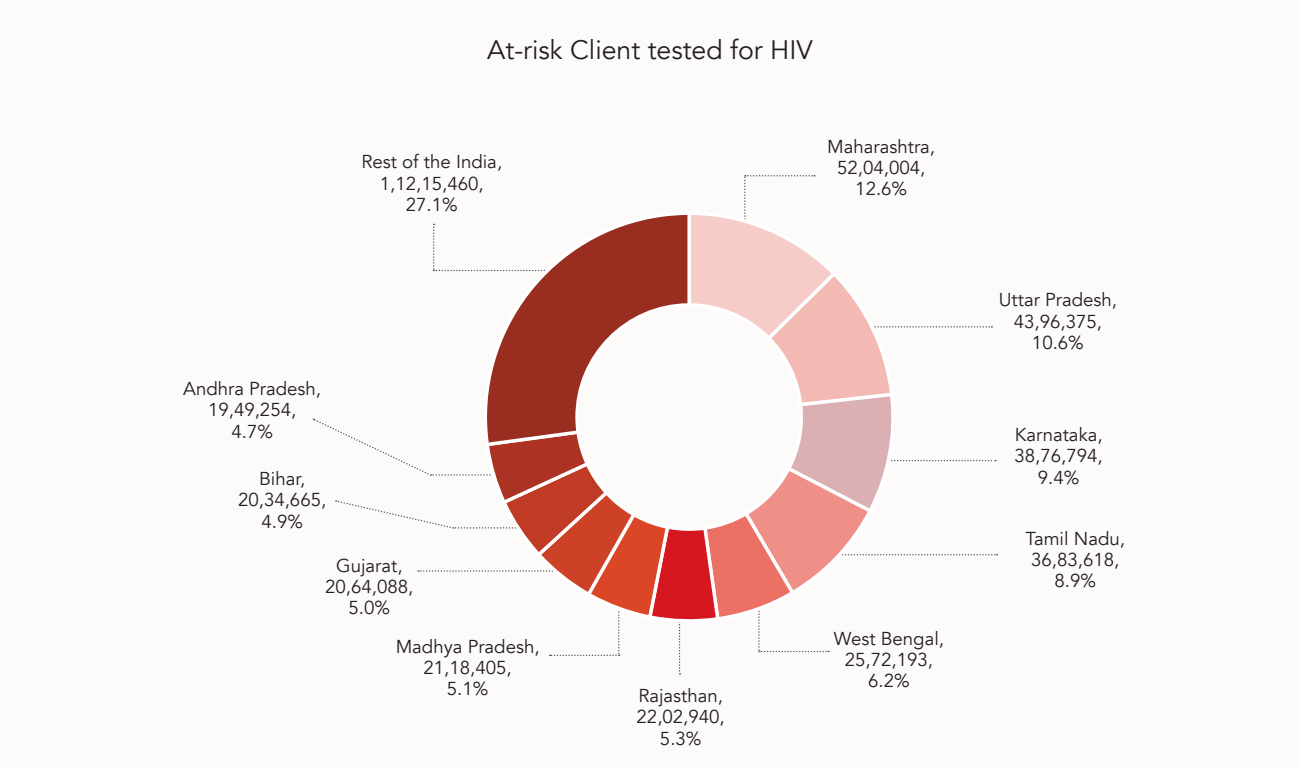
These variations point to the need for a balanced approach—expanding decentralised screening facilities while ensuring that ICTCs remain focused on at-risk clients who benefit most from comprehensive counselling and follow up. States are encouraged to strengthen demand generation through dissemination of HIV/STI-IEC materials so that vulnerable populations are motivated to proactively access services.

As discussed in Chapter 5, risk assessment at ICTCs is a critical tool for identifying at-risk clients. Fast-tracking routine, low-risk referrals through decentralised screening sites allows ICTC counsellors to dedicate more time to in-depth counselling for high-risk individuals

8.4. HIV Sero-positives and Yield trends

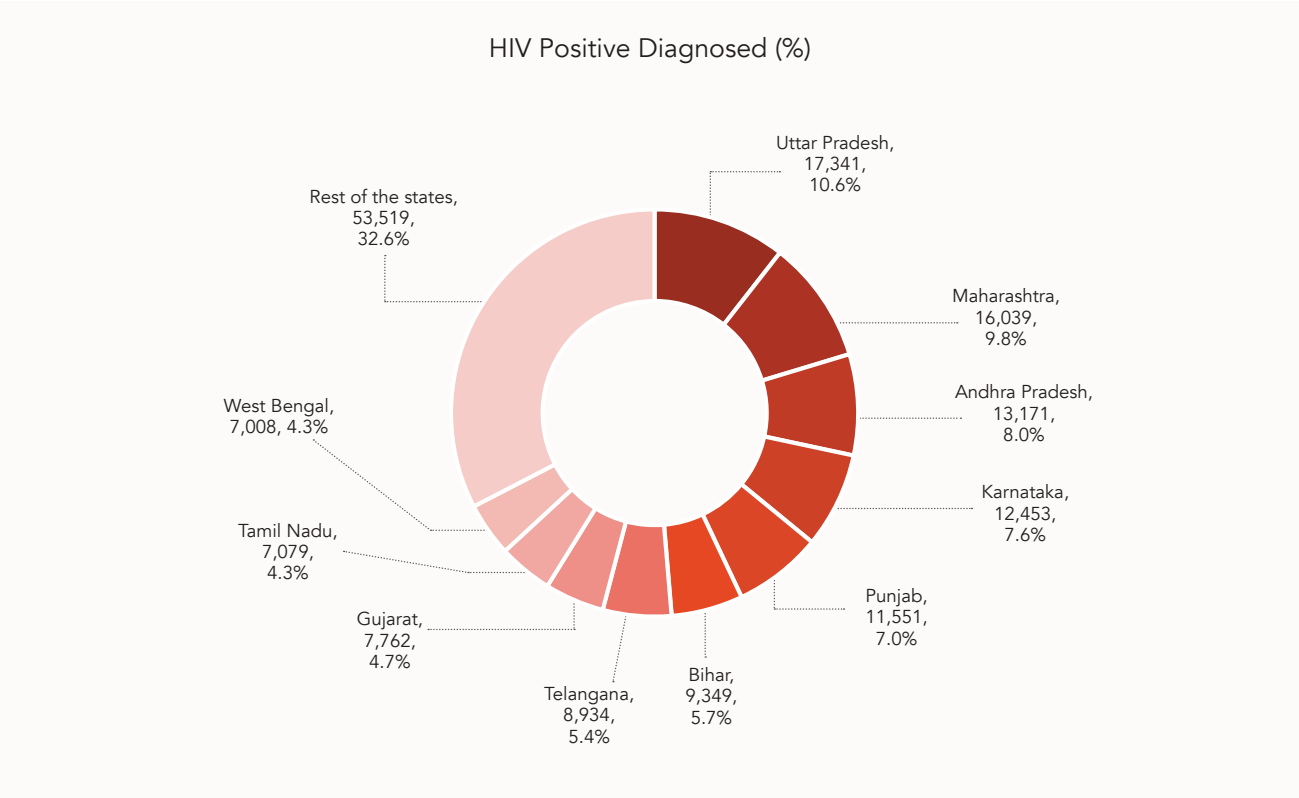
During FY 2024–25, India's HIV counselling and testing programme sustained its momentum, building on the gains reported in FY 2023–24. A total of 1,64,206 HIV-positive cases were newly identified, maintaining a national sero-positivity rate of 0.40%. This is consistent with the trend of declining positivity seen over the past decade, reflecting India's status as a low-prevalence country and steady progress toward the first 95 target. Understanding this, NACO has directed states on various key strategies/activities such as Integrated Health Campaign, Intensified IEC Campaign, campaign in prison and other close settings, index testing campaign etc.

Figure 8.4. Proportionate distribution of HIV testing among State/UTs to the total HIV testing reported, FY 2024-25



Figures 8.4 and 8.5 illustrate the state-wise distribution of HIV testing and detection respectively. The top ten states together accounted for 67% of all newly identified HIV cases, led by Uttar Pradesh (11%), Maharashtra (10%), Andhra Pradesh (8%), Karnataka (8%), Punjab (7%), Bihar (6%), Telangana (5%), Gujarat (5%), Tamil Nadu (4%), and West Bengal (4%). Among all States and UTs, 11 recorded year-on-year increases in the identification of PLHIV during FY 2024–25. The most significant relative growth was observed in Dadra & Nagar Haveli (up 44%), followed by Himachal Pradesh (21%), Jharkhand (20%), and Jammu & Kashmir (12%). Larger states such as Uttar Pradesh (from 15,693 to 17,341), Chhattisgarh (from 2,854 to 3,144), Madhya Pradesh (from 6,078 to 6,560), West Bengal (from 6,678 to 7,008), Delhi (from 6,135 to 6,351), Gujarat (from 7,655 to 7,762) and Odisha (from 3,516 to 3,556) also reported incremental gains. Together, these 11 states and UTs contributed an additional 4,797 newly identified PLHIV cases compared to the previous year.

Figure 8.5. Proportionate distribution of HIV diagnosis among State/UTs to the total cases diagnosed, FY 2024-25



As shown in table 8.1, the national HIV sero-positivity rate for FY 2024–25 stands at 0.40%, though considerable variation is observed across states and UTs. The lowest rate was reported in Kerala (0.07%), while Mizoram (1.79%) recorded the highest. Several state/UTs reported positivity rates above the national average, including Mizoram, Assam, Punjab, Meghalaya, Nagaland, Tripura, Telangana, Haryana, Andhra Pradesh, Arunachal Pradesh, Chandigarh, Manipur, Delhi, Chhattisgarh, Bihar, Jharkhand, and Uttarakhand.

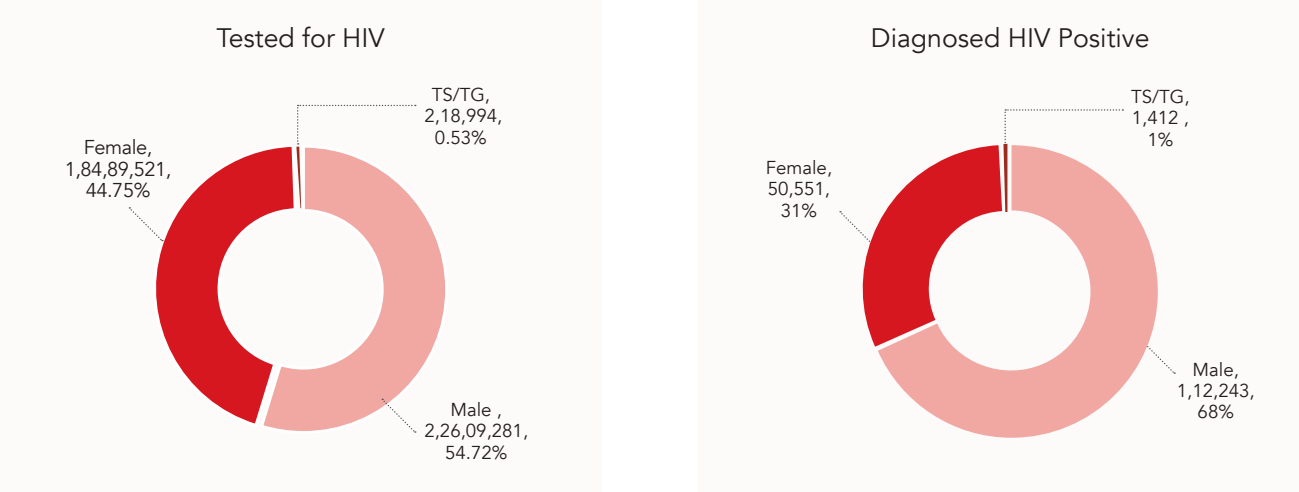
In general, higher positivity parallels states with a larger share of total testing, with a few exceptions. In Punjab, positivity is disproportionately high despite lower overall testing volumes, reflecting high-risk behaviours, particularly injecting drug use. By contrast, in Madhya Pradesh and Rajasthan, the yield remains low due to a largely routinized approach to testing. This variation underscores the need for state-specific strategies. In high-burden states, focused interventions are required to sustain early detection and timely linkage to treatment, while in low-prevalence states, the emphasis remains on maintaining vigilance through risk-based screening and prevention.

8.5. Gender difference in HIV testing:

Figure 8.6 presents the gender-wise distribution of HIV testing and detection. Among males, HIV testing increased from 2.12 crore in FY 2023–24 to 2.26 crore in FY 2024–25. During this period, 1,12,243 males were identified as HIV-positive, slightly lower than the 1,15,825 detected in the previous year. Among females, testing rose from 1.72 crore in FY 2023–24 to 1.85 crore in FY 2024–25. A total of 50,551 HIV-positive females were identified, compared to 52,013 in the previous year. The positivity rate among females decreased from 0.30% to 0.27%.

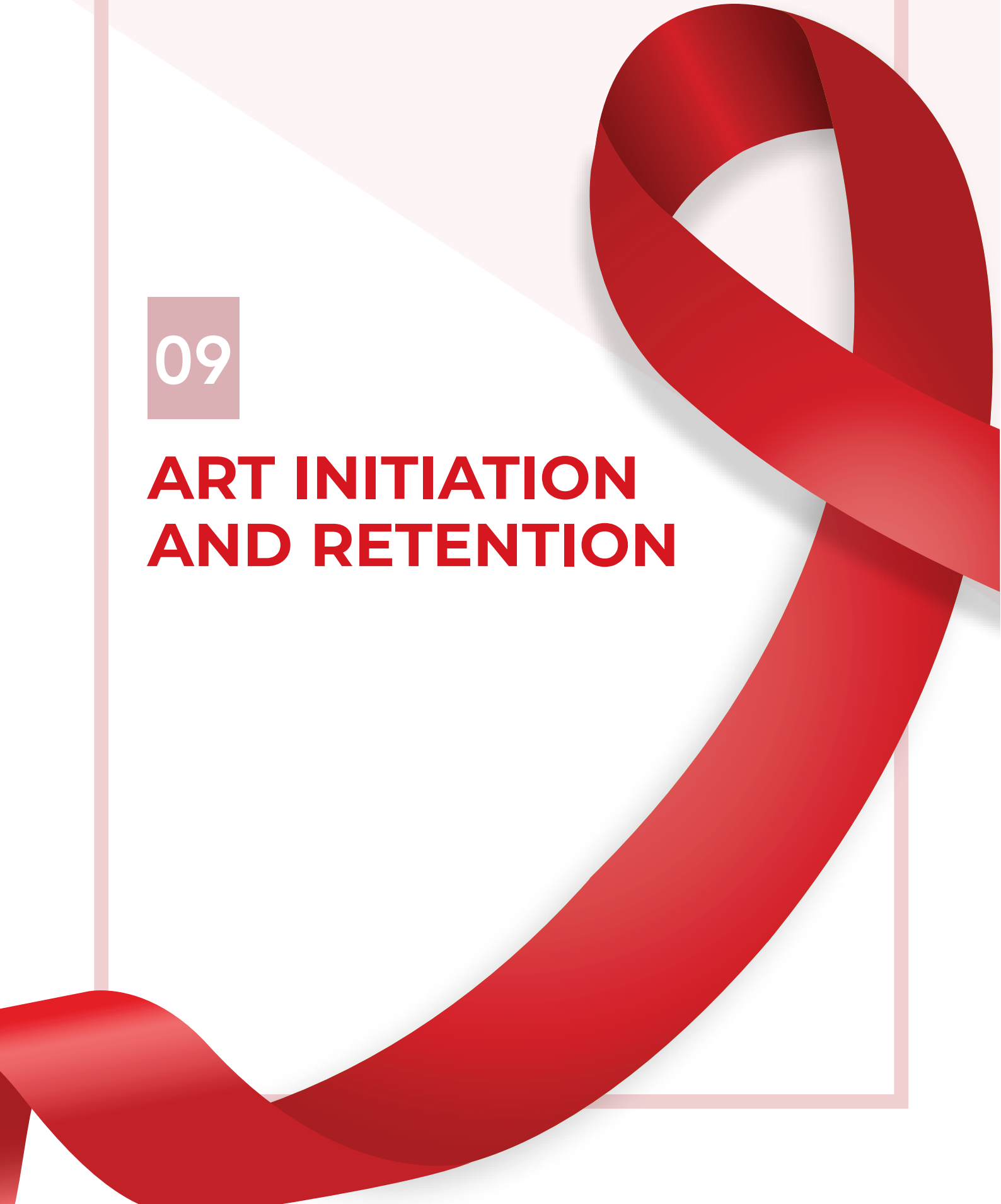
For transgender persons (TS/TG), HIV testing nearly doubled from 1.22 lakh in FY 2023–24 to 2.19 lakh in FY 2024–25, reflecting an intensified programme focus on this population and capture of gender disaggregated data. Although the positivity rate declined from 1.09% to 0.64%, the total number of HIV-positive TS/TG clients identified increased to 1,412 from 1,334 in the previous year, indicating a net gain in absolute numbers. This underscores the programme's expanded outreach and strengthened testing and identification efforts among key populations.

Figure 8.6. Gender difference in HIV testing and Positive diagnosis, FY 2024-25



09

ART INITIATION AND RETENTION



ART INITIATION AND RETENTION

9.1. Background:

Care, support, and treatment have been at the heart of India's response to AIDS since the early years of NACP Phase-II, with a strong emphasis on lifelong retention and sustained viral load suppression. Initiation and retention on antiretroviral therapy (ART) are critical components of HIV care and essential for achieving long-term viral suppression and improved health outcomes. Since the global rollout of ART in the early 2000s, India has made significant strides in providing free ART to people living with HIV (PLHIV), starting in 2004 under the National AIDS & STD Control Programme (NACP). Early initiation of ART has been shown to reduce HIV-related morbidity and mortality, prevent the progression of HIV to AIDS, and significantly lower the risk of transmitting the virus to others. The "test and treat" policy, adopted in recent years, emphasizes the immediate initiation of ART upon HIV diagnosis, regardless of CD4 count or disease stage, ensuring PLHIV receive timely treatment.

Despite the progress in initiating ART, retention in treatment remains a significant challenge. Sustained retention on ART is essential for maintaining viral suppression, preventing drug resistance, and improving long-term health outcomes. However, several factors can impede retention, including socio-economic barriers, stigma, and difficulties in accessing healthcare services, particularly in resource-limited settings. Non-adherence to ART and subsequent loss to follow-up can lead to viral rebound, treatment failure, and increased transmission risks. To address these challenges, NACP has implemented differentiated service delivery models, such as multi-month dispensing (MMD) and decentralized care through community-based ART refill groups (CARGs), to make ART more accessible and convenient for patients.

Retention on ART is also closely tied to the broader support systems for PLHIV, including addressing social determinants of health such as poverty, access to nutrition, mental health, and the presence of co-infections like tuberculosis (TB) and non-communicable diseases (NCDs). In recent years, the focus has shifted towards integrating HIV care with other health services to provide comprehensive care for PLHIV, recognizing that improving quality of life is key to retention. The ongoing challenge is to ensure that individuals remain engaged in care throughout their lives, which requires continuous monitoring, robust support systems, and the adaptation of healthcare delivery to meet the needs of diverse populations.

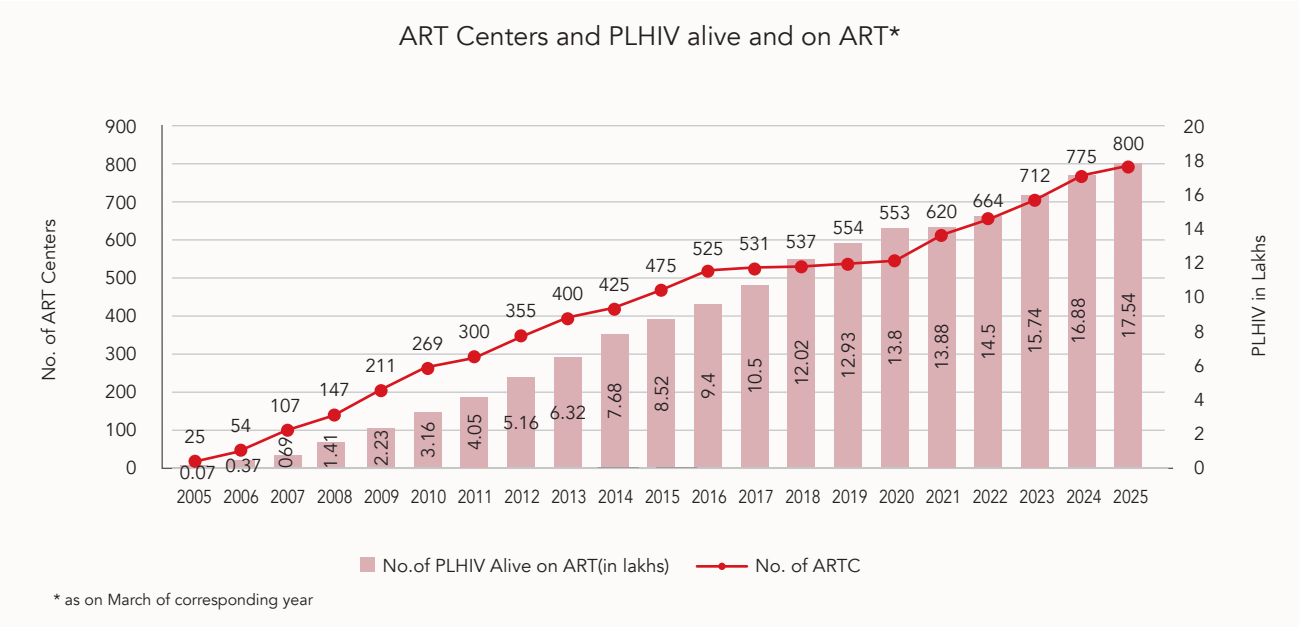
NACP Phase-V is dedicated to ensuring that all PLHIV have universal access to life-saving antiretroviral therapy (ART), prioritizing lifelong retention and consistent viral load suppression. PLHIV have access to free diagnostic services, first-line, second-line, and third-line ART, as well as comprehensive services for the prevention, diagnosis, and management of opportunistic infections, including tuberculosis (TB) through a single-window approach. The program remains committed to integrated service delivery, fostering linkages with other national health programs, particularly in the management of non-communicable diseases (NCDs). Furthermore, establishment of ART Centre under NMC to ensure that every medical college establishes an ART centre that adheres to national guidelines in providing these essential services.

9.2. Facilities

The NACP has been instrumental in transforming the landscape of HIV care in India, particularly through its emphasis on expanding access to antiretroviral therapy (ART). Since its inception, NACP has prioritized the establishment of a robust network of ART centres, which has seen a remarkable increase from just 25 centres in March 2005 to 800 centres by March 2025. The program's strategic focus on early initiation of ART and sustained viral load

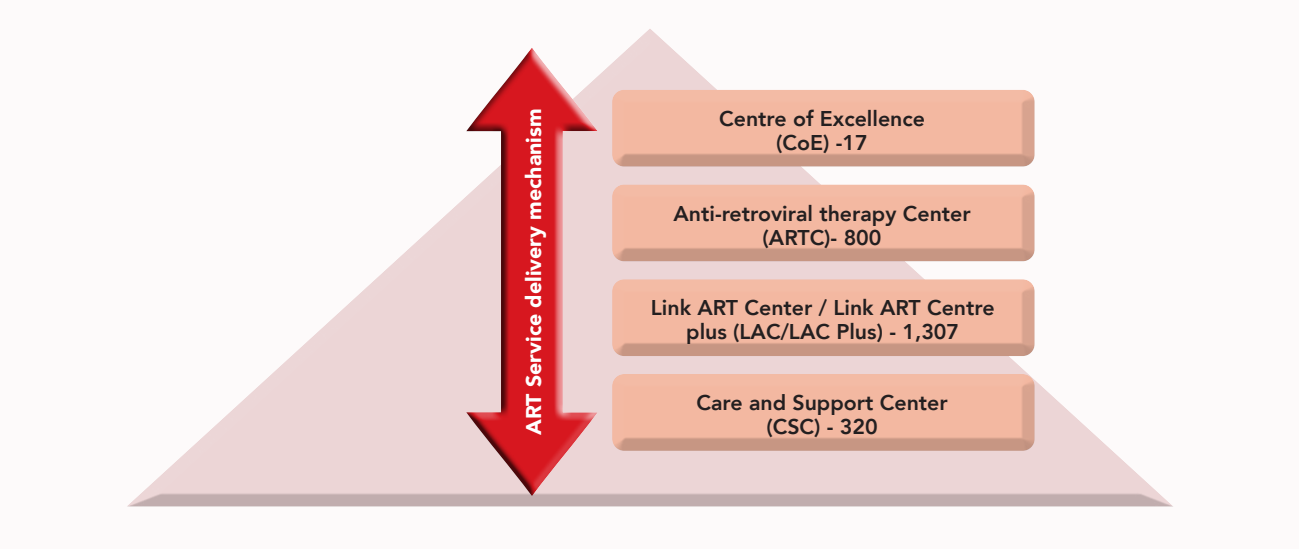
suppression is evident in the growing number of PLHIV receiving treatment, which rose from 0.07 lakh to approximately 17.54 lakhs over the same period. In the last four years, more than 200 ART centres have been added. There were 553 ART centres providing ART services in March 2020 which have been significantly scaled up to 800 ART centres as on March 2025 (figure 9.1.) reflecting an increase of more than 200 ART centres in last four years.

Figure 9.1. Scale-up of ART Centers under NACP and PLHIV on ART, as on March 2025



Currently, the decentralization of services is bolstered by the establishment of 1,307 Link ART Centers (LAC) including LAC Plus and 320 Care and Support Centre (CSC), including 9 funded by the State Government and 83 supported through the domestic budget. This extensive network improves access to critical services, enhancing treatment adherence and reducing stigma and discrimination related to HIV care.

Figure 9.2. ART service delivery mechanism, March 2025

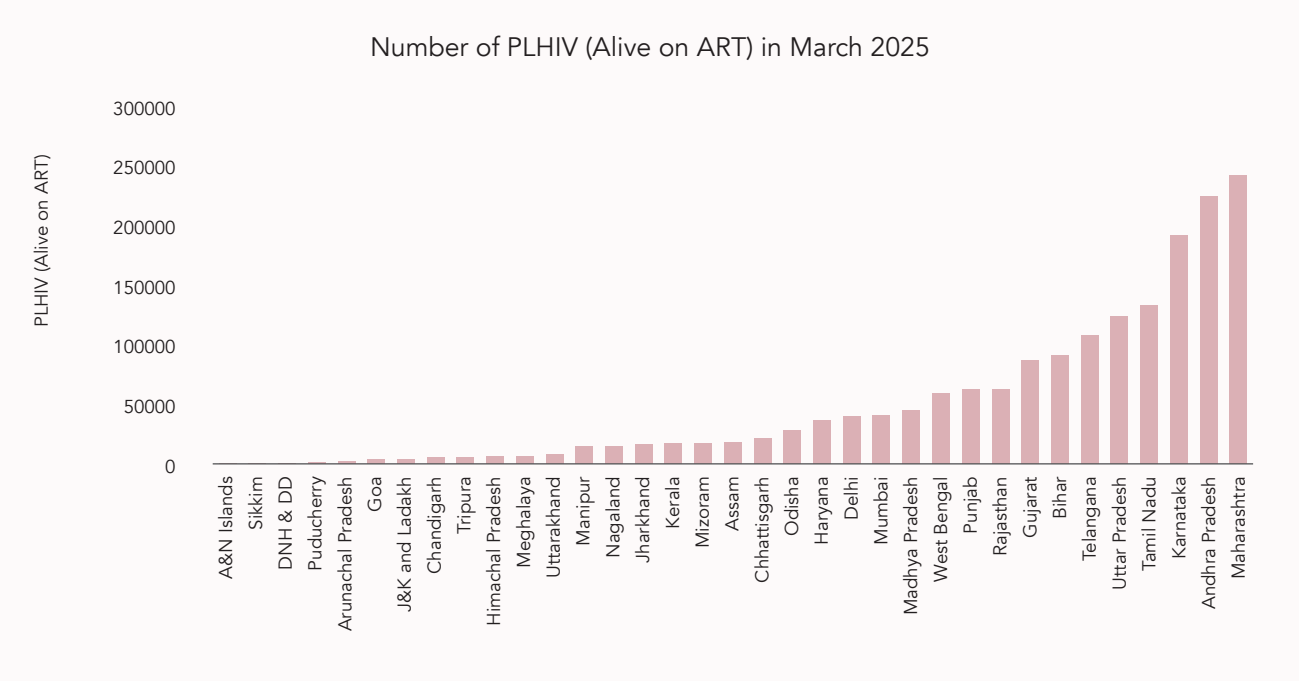


9.3. PLHIV on ART

As on March 2025, a total of 17.54 lakh PLHIV were alive and on ART across 800 ART centres under NACP. Additionally, around 1.06 lakh PLHIV are estimated to be taking treatment from the private health care sector.

Of the 17.54 lakh PLHIV availing treatment form ART centres under NACP as on March 2025, approximately 8.67 lakh are males, 7.98 lakh females, 7,000 are H/TG people, and around 80,000 were children living with HIV. Considerable variation exists in the number of PLHIV accessing care, support and treatment services from ART centres across all States. Maharashtra has the highest number of PLHIV (2.44 lakh), followed by Andhra Pradesh (2.26 lakh), Karnataka (1.93 lakh), Tamil Nadu (1.34 lakh), Uttar Pradesh (1.25 lakh) and Telangana (1.08 lakh) - these 6 states together contribute around 51.6% of the total number of PLHIV on ART in the country. States like Bihar (0.92 lakh), Gujarat (0.87 lakh), Rajasthan (0.63 lakh), Punjab (0.62 lakh), West Bengal (0.59 lakh) had more than 50,000 cumulative PLHIV alive on-ART.

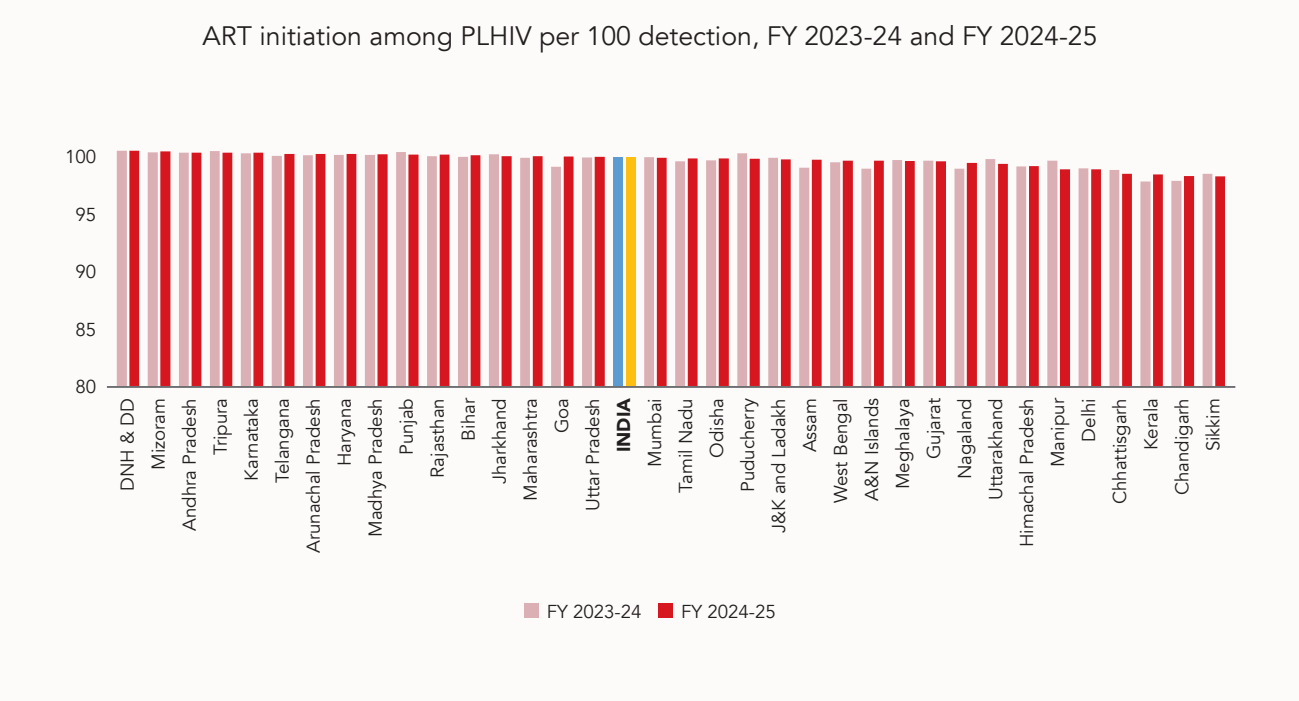
Figure 9.3. State/UTs (SACS/DACS) wise Number of PLHIV (Alive on ART) in March 2025



9.4. ART initiation

At national level ART initiation in FY 2024–25 remained consistent at 97% in comparison to FY 2023–24, with most states showing either sustained performance or marginal improvements. States such as Andhra Pradesh, Arunachal Pradesh, Haryana, Karnataka, Madhya Pradesh, Telangana, Mizoram, Tripura, and Dadra & Nagar Haveli maintained initiation rates of ≥99% in both years, reflecting strong treatment linkages. Noticeable improvements were recorded in Goa (93% to 98%), Assam (93% to 96%), Kerala (87% to 90%), and Andaman & Nicobar Islands (92% to 96%), highlighting strengthened efforts in ensuring timely initiation of treatment among diagnosed PLHIV. However, a few states showed slight declines compared to last year, including Chhattisgarh (92% to 90%), Jharkhand (99% to 98%), Puducherry (99% to 97%), Punjab (99% to 98%), Uttarakhand (96% to 94%), Manipur (96% to 92%), and Sikkim (90% to 89%). Despite these minor dips, initiation rates in almost all states remain relatively high-generally above 90% underscoring the overall consistency and robustness of ART initiation across the country (figure 9.4).

Figure 9.4 State/UTs wise distribution of ART initiation among PLHIV per 100 detection, FY 2023-24 and FY 2024-25

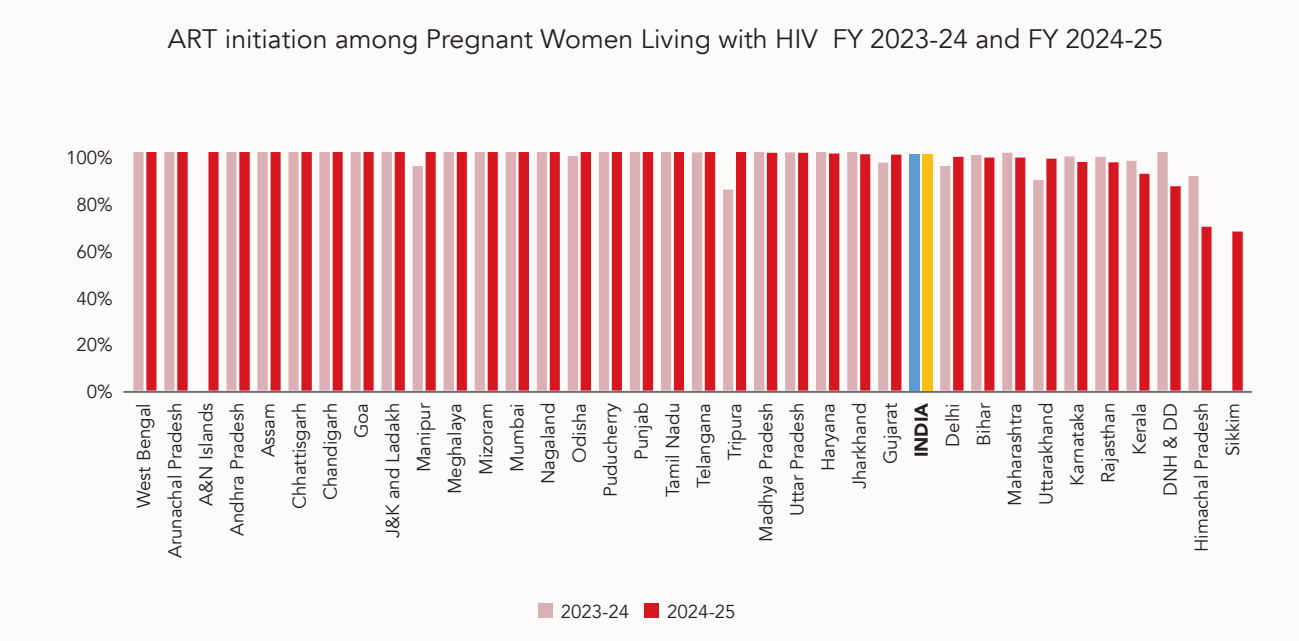


9.5. ART initiation among Pregnant Women Living with HIV (PWLHIV)

At the national level, ART initiation among PWLHIV remain consistent at 99% over the last two consecutive financial years. Andhra Pradesh, Assam, Chhattisgarh, Chandigarh, Goa, J&K, Madhya Pradesh, Mumbai, Nagaland, Puducherry, Punjab, Tamil Nadu, Telangana, and West Bengal reported 100% ART initiation among PWLHIV, reflecting robust treatment linkages for HIV-positive pregnant women. Notable improvements were observed in Delhi (94% → 98%), Gujarat (95% → 99%), Manipur (94% → 100%), Odisha (98% → 100%), Tripura (84% → 100%), and Uttarakhand (88% → 97%), reflecting strengthening in FY 2024-25.

However, decline in ART initiation among PWLHIV were observed in the states/UTs Himachal Pradesh (90% → 69%), Dadra & Nagar Haveli (100% → 86%), Kerala (96% → 91%), Rajasthan (98% → 96%), Maharashtra (100% → 98%), Bihar (99% → 98%), and Haryana (100% → 99%) reported decline. Exceptionally in Arunachal Pradesh reported >100% initiation, likely due to inclusion of cases registered late from the previous year or data reporting overlaps (figure 9.5).

Figure 9.5. State/UTs wise distribution of ART initiation among Pregnant Women Living with HIV, FY 2023-24 and FY 2024-25



9.6. Lost to follow-up (LFU)

The analysis of State/UT-wise On-ART LFU per 100 PLHIV for the year 2024–25 demonstrates marked inter-state variability in treatment retention across India. The highest LFU (figure 9.6) were observed in Delhi, Assam, and Tripura, indicating substantial proportions of PLHIV experiencing treatment interruption despite being recorded as on-ART. Increased LFU levels were also noted in Punjab, Meghalaya, Mumbai, and Chhattisgarh (ranging from 20–30 per 100). In contrast, several states—like Gujarat, Maharashtra, Chandigarh, Arunachal Pradesh, Madhya Pradesh, and Uttar Pradesh—reported LFU rates below 10 per 100, reflecting comparatively stronger adherence and follow-up mechanisms. The lowest LFU (<3 per 100) was reported in Puducherry, Himachal Pradesh, and Dadra & Nagar Haveli, indicating robust retention systems. Nationally, the median LFU rate appears to cluster around 10–15 per 100 PLHIV.

9.7. Differentiated care model

Differentiated care is a patient-focused approach that simplifies HIV care to meet the specific needs of PLHIV while reducing strain on healthcare systems. It adjusts care based on a patient's clinical condition, the population group they belong to, and the context of their living environment. The goal is to improve the patient experience and achieve better treatment outcomes, ensuring care remains both medically sound and efficient. Models like Multi-Month Dispensing (MMD), Link ART Centre (LAC), and Community ART Refill Groups (CARG) are being expanded under NACP Phase V to bring services closer to PLHIV, ease the burden on ART centres, and enhance treatment adherence. These models empower patients to take more control of their care, improve access to treatment, and help achieve viral load suppression.

Figure 9.6. State/UT wise On-ART LFU per 100 on ART PLHIV, 2024-25

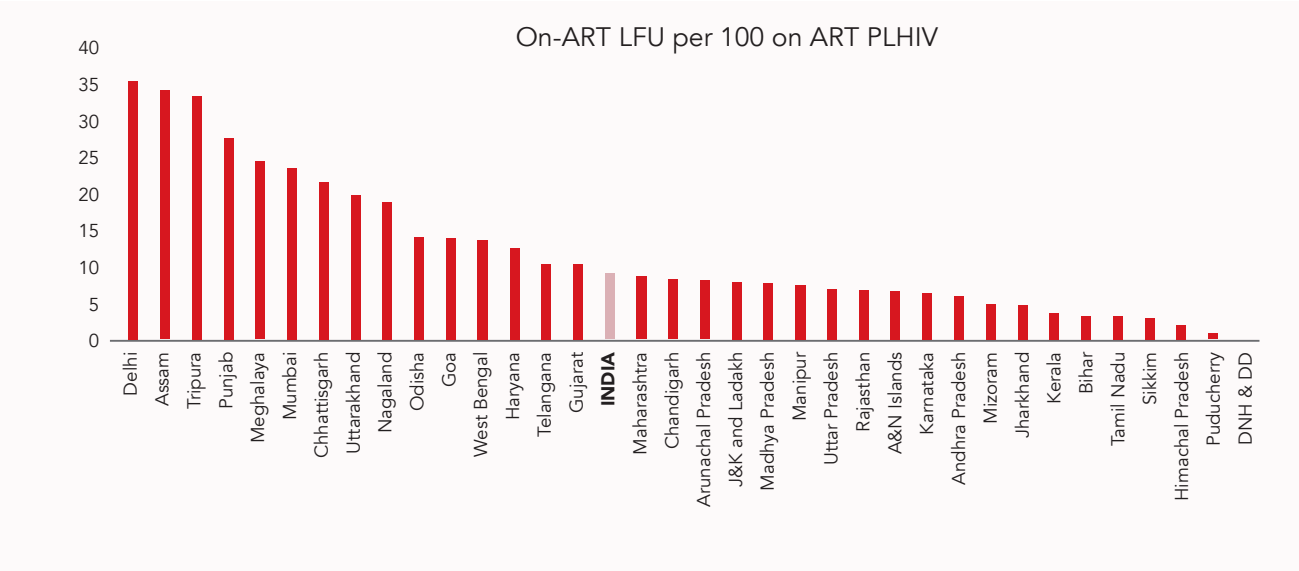


Figure 9.7. ART initiation and LFU; FY 2017-18 to FY 2024-25

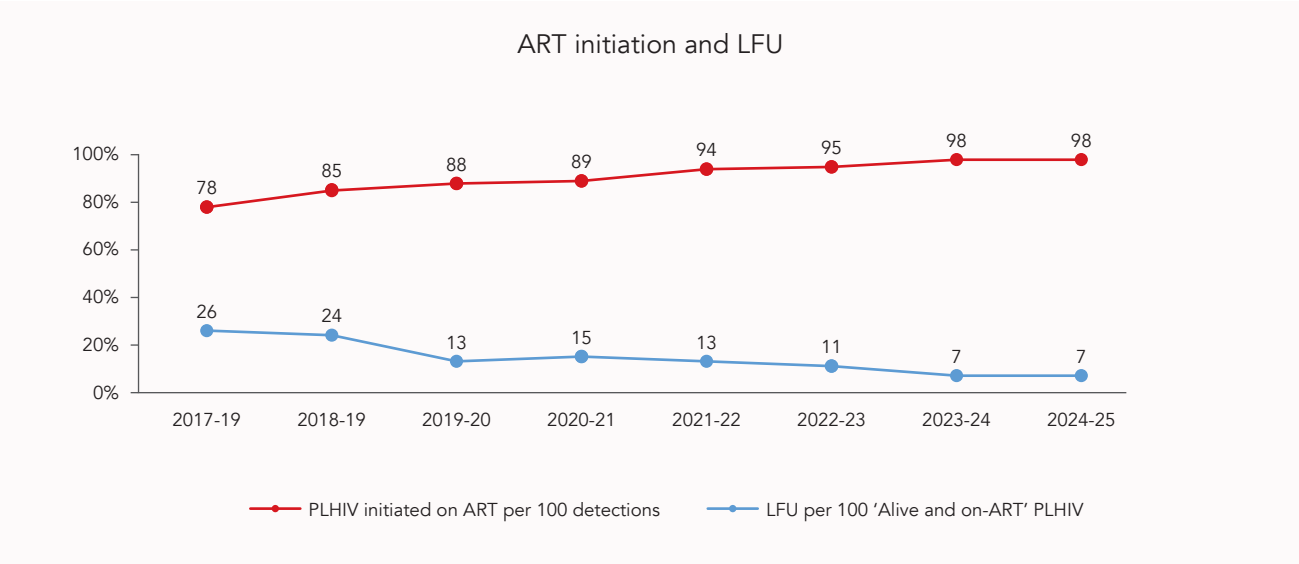


Table 9.1. State/UT-wise progress on ARV treatment services, March 2025

State/UT(SACS/DACS)	Number of ART Centres	Number of PLHIV Alive and On-ART (under NACP)	PLHIV status reported as LFU (2017-March 2025)
A&N Islands	1	239	18
Andhra Pradesh	60	2,26,703	14,745
Arunachal Pradesh	2	1,835	158
Assam	9	17,980	6,970
Bihar	28	92,154	5,457

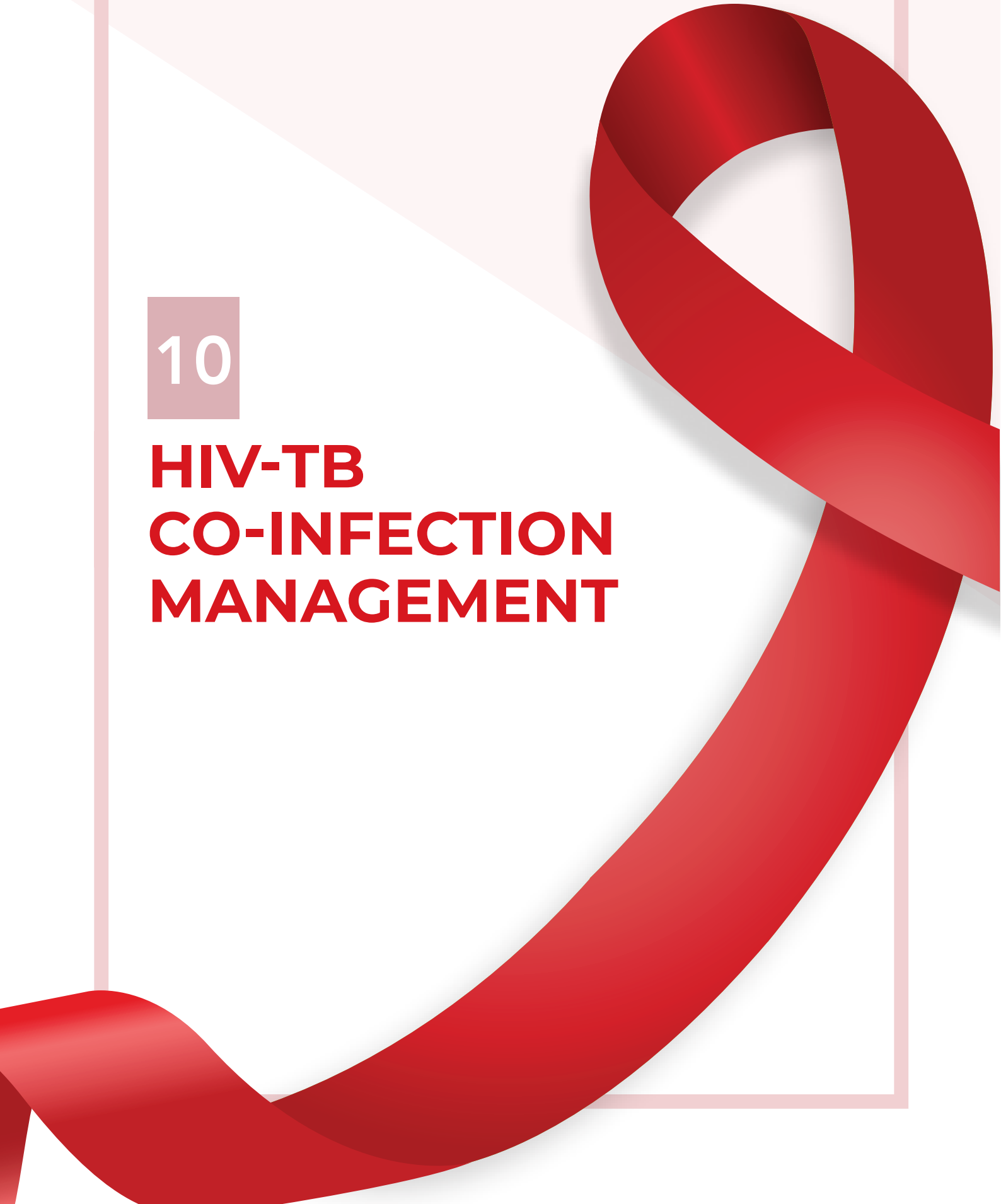
Table continued...

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State/UT(SACS/DACS)	Number of ART Centres	Number of PLHIV Alive and On-ART (under NACP)	PLHIV status reported as LFU (2017-March 2025)
Chhattisgarh	8	21,559	5,655
Chandigarh	2	5,214	471
Delhi	12	40,442	19,527
DNH & DD	1	603	0
Goa	2	3,498	561
Gujarat	48	87,259	10,625
Haryana	27	36,915	4,819
Himachal Pradesh	7	6,149	138
Jharkhand	13	16,894	915
Karnataka	89	1,93,347	16,225
Kerala	18	17,212	842
Maharashtra	85	2,44,535	32,922
Manipur	12	14,532	1,317
Meghalaya	4	6,414	1,743
Mizoram	14	17,443	914
Madhya Pradesh	33	45,667	4,976
J&K and Ladakh	3	3,931	380
Mumbai	20	41,275	11,428
Nagaland	12	14,846	3,328
Odisha	20	28,238	4,268
Puducherry	1	1,478	28
Punjab	25	62,874	18,676
Rajasthan	36	63,191	5,548
Sikkim	1	381	13
Telangana	30	1,08,780	13,266
Tamil Nadu	76	1,34,628	5,087
Tripura	3	5,565	1,868
Uttar Pradesh	59	1,25,238	9,496
Uttarakhand	13	7,613	1,670
West Bengal	26	59,849	10,655
India	**800**	**17,54,481**	**2,14,709**

10

HIV-TB CO-INFECTION MANAGEMENT



HIV-TB CO-INFECTION MANAGEMENT

10.1. Background

Tuberculosis (TB), caused by Mycobacterium tuberculosis (MTB), remains one of the most significant opportunistic infections (OIs) among People Living with HIV (PLHIV) in India. The dual burden of HIV and TB continues to be a major public health challenge, as coinfection substantially increases the risk of illness and death if not detected and treated promptly. TB can manifest as Latent TB Infection (LTBI), in which the infection is asymptomatic and inactive, or as Active TB Disease, which presents with symptoms and requires immediate medical intervention. Active TB may affect the lungs (pulmonary TB) or spread beyond the lungs to involve the lymph nodes, pleura, abdomen, central nervous system, bones, joints, or skin (extrapulmonary TB).

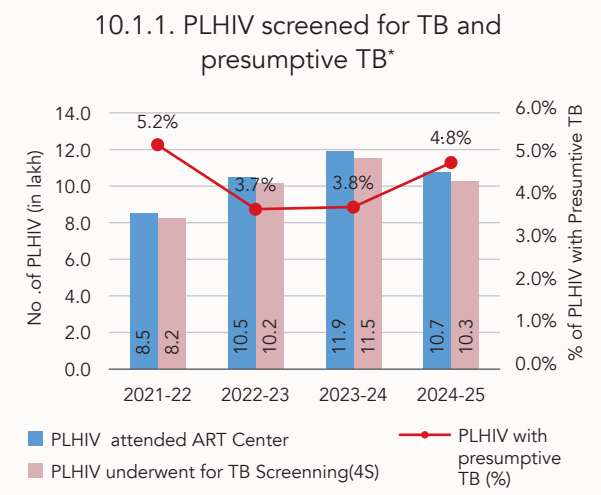
Recognizing the impact of this dual epidemic, the National AIDS Control Organisation (NACO) has implemented several strategic measures to effectively address HIV-TB coinfection across the country. A cornerstone of this effort is the integration of HIV and TB services, aimed at ensuring comprehensive, patient-centred care. Under this model, all PLHIV attending ART Centres are routinely screened for TB symptoms, while all TB patients are tested for HIV to enable early diagnosis and timely treatment of both conditions.

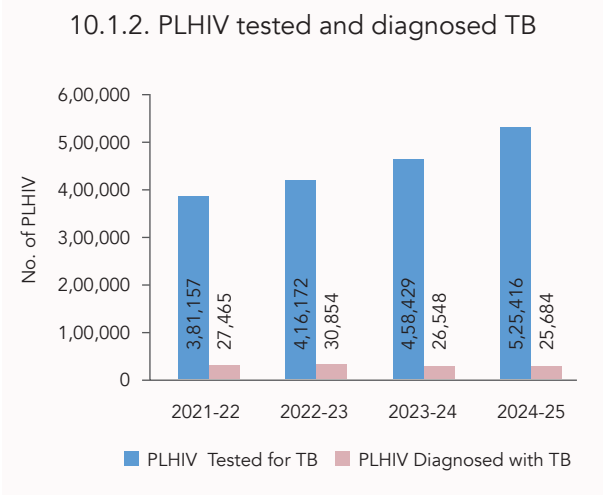
To operationalize this integrated approach, NACO, in collaboration with the National Tuberculosis Elimination Programme (NTEP), launched the Single Window Service Delivery Model in December 2016. This model ensures that PLHIV with presumptive TB are referred to co-located or linked TB diagnostic centres for rapid testing and drug-resistance assessment. Once diagnosed—either microbiologically or clinically—TB treatment is initiated immediately at the ART Centre, while drug-resistant cases are referred to designated NTEP sites for specialized management.

10.2. TB Screening and Diagnosis among PLHIV attending ART centre on monthly basis

During the period from FY 2021-22 to 2024-25, the proportion of PLHIV screened for TB remained consistently high at 95% or more, reflecting strong adherence to TB screening and effective implementation of testing services (figure10.1). However, TB diagnosis among PLHIV from FY 2021-22 to FY 2024-25 showed a gradual decline over the same period from 7.2% in FY 2021-22 and 2022-23 to 5.8% in 2023-24, and further to 4.9% in 2024-25. This trend indicates a reduction of TB infection in new HIV detections, which may be attributed to enhanced prevention efforts and treatment coverage leading to decrease in transmission.

Figure 10.1. Total PLHIV Screened for TB, Presumptive TB (%), Tested and TB diagnosis, from FY 2021-22 to FY 2024-25





*value representing March of corresponding year

Figure 10.2. State/UT(SACS/DACS)-wise TB Screening (%) among PLHIV at ART Centre, FY 2024-25

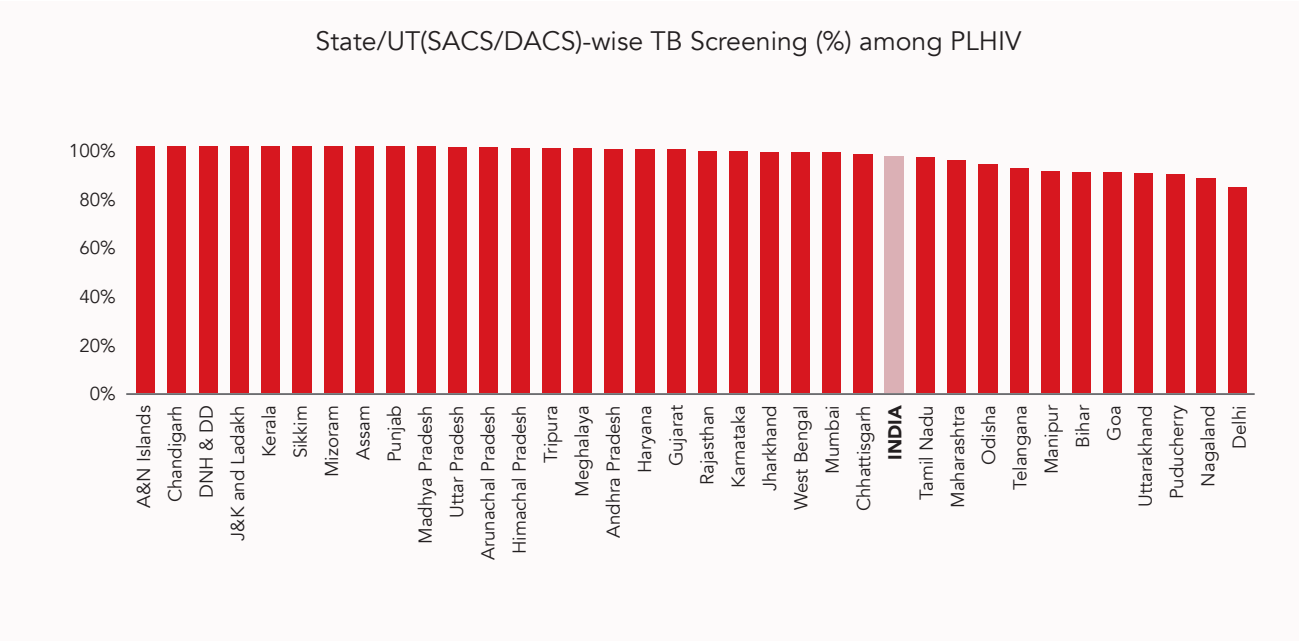


Figure 10.2 above illustrates TB screening among ART attendees was suboptimal in several States: Delhi (83%), Nagaland (87%), and Puducherry, Uttarakhand, Goa and Bihar (each around 89%). As part of HIV–TB co-infection management, 100% of PLHIV should be screened for TB symptoms (4S). The national average was around 96% for FY 2024-25.

10.3. Pulmonary TB and Extra Pulmonary TB - Diagnosis among PLHIV

The TB Diagnosis among PLHIV is classified into Pulmonary TB and Extra Pulmonary TB. The following figures represent the types of TB diagnosis reported in India among PLHIV during the FY 2024-25. As evident, the pulmonary TB was predominant form of TB among PLHIV (71%). Microbiologically confirmed TB-diagnosis constitutes 56% of total diagnosis during the FY 2024-25 (figure 10.3).

Figure 10.3. TB Diagnosis among PLHIV, FY 2024-25

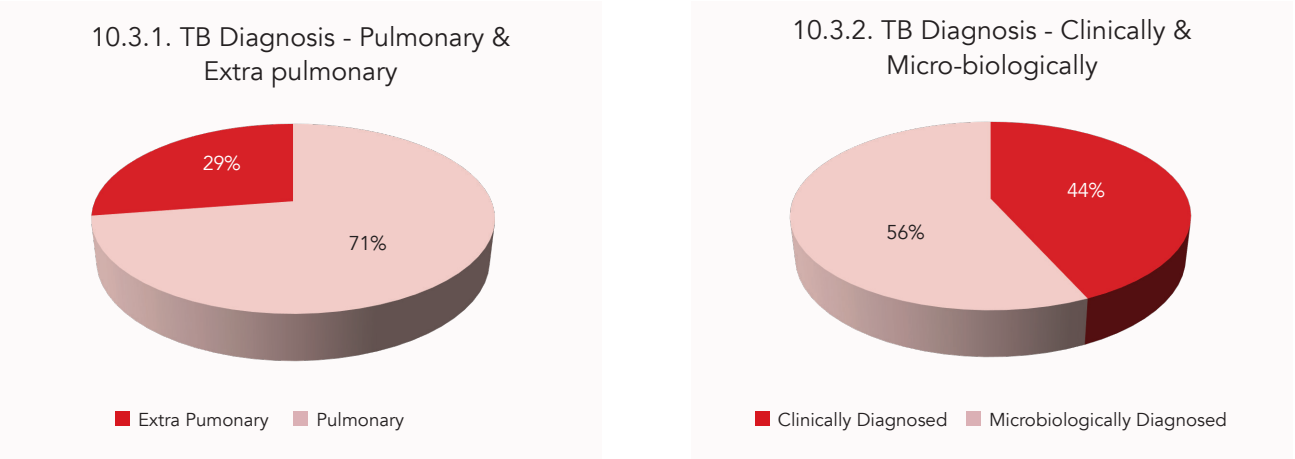


Figure 10.4. State/UT(SACS/DACS)-wise distribution (%) of Pulmonary and Extrapulmonary TB Diagnosis among PLHIV, FY 2024-25

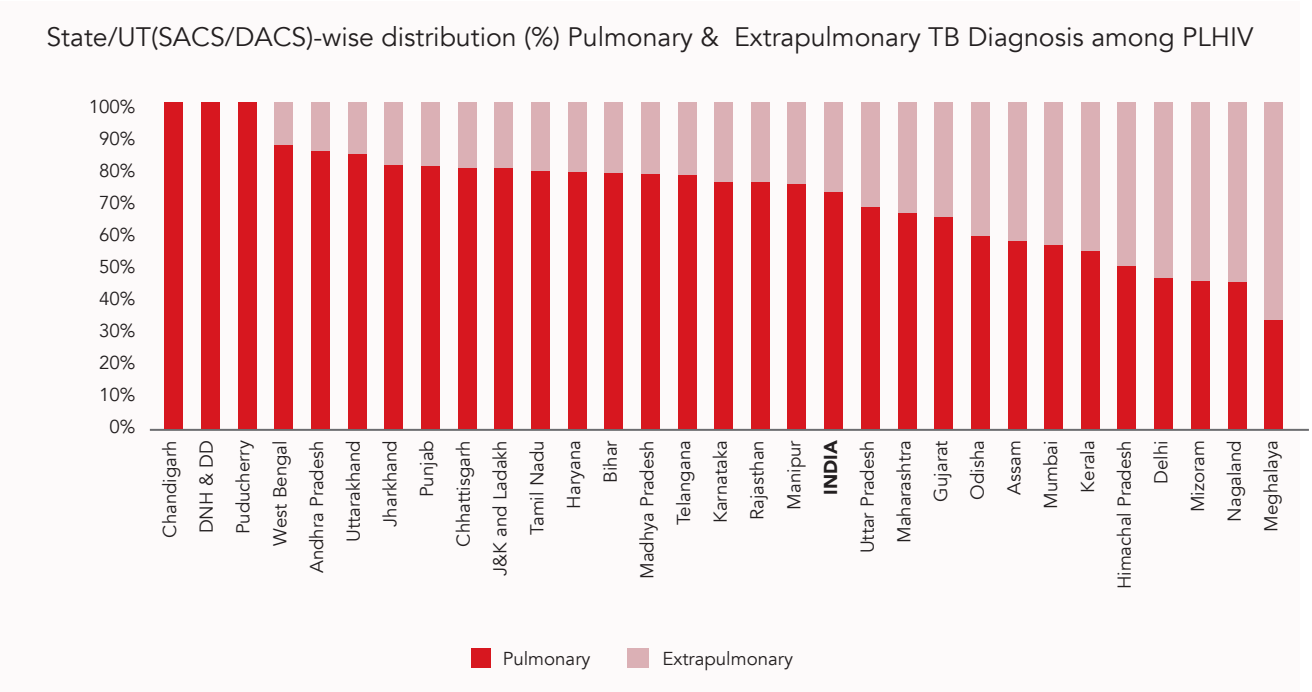


Figure 10.4 provides State/UT- wise proportionate distribution of pulmonary and extra-pulmonary TB diagnosis among PLHIV during FY 2024-25.

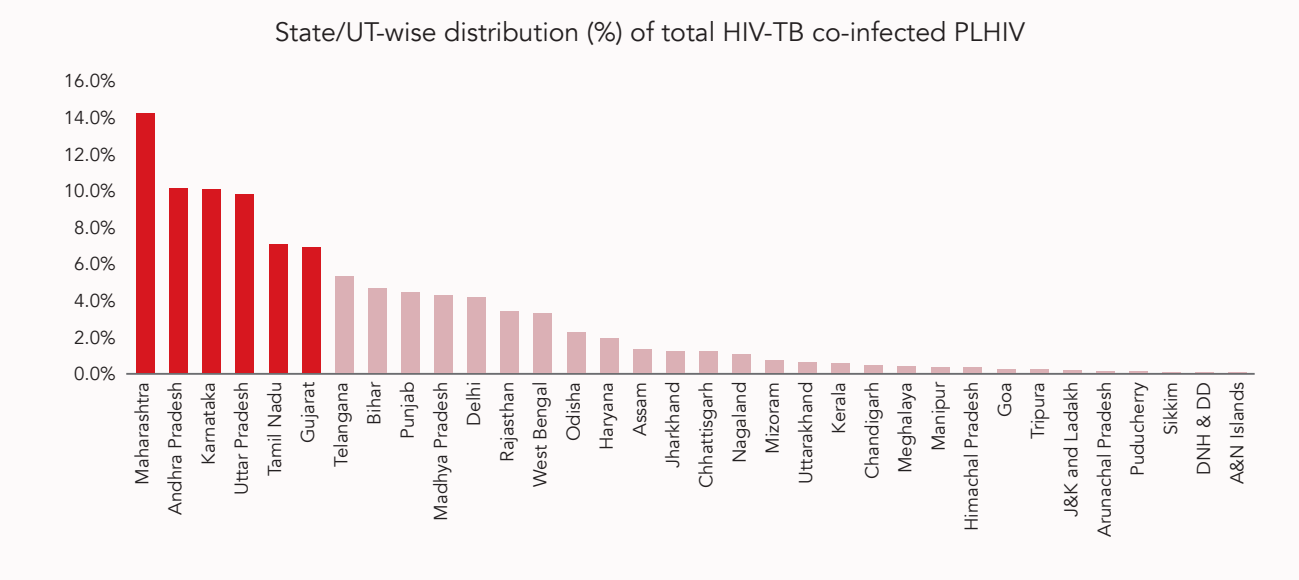
No TB cases diagnosed in Andaman and Nicobar Islands, Arunachal Pradesh, Goa, Sikkim and Tripura among PLHIVs during FY 2024-25. Similarly, UTs of Chandigarh, DNH & DD and Puducherry have no reported cases of Extra pulmonary TB during the reference period. The state/UTs of West Bengal, Andhra Pradesh, Uttarakhand, Jharkhand, Punjab, Chhattisgarh and J&K and Ladakh have highest proportion (80% or higher) of PLHIV with pulmonary TB. The States of Meghalaya, Nagaland, Mizoram, Delhi and Himachal Pradesh reported 50% or more cases of extra pulmonary TB cases out of total co-infected cases.

10.4. HIV-TB Co-infection management

Overall, 32,296 PLHIV found to be co-infected with TB and enrolled in the HIV-TB register during FY 2024-25. The states of Maharashtra (14%), Andhra Pradesh (10%), Karnataka (10%), Uttar Pradesh (10%), Tamil Nadu (7%) and Gujarat (7%) together contributed to about more than half (58%) of the

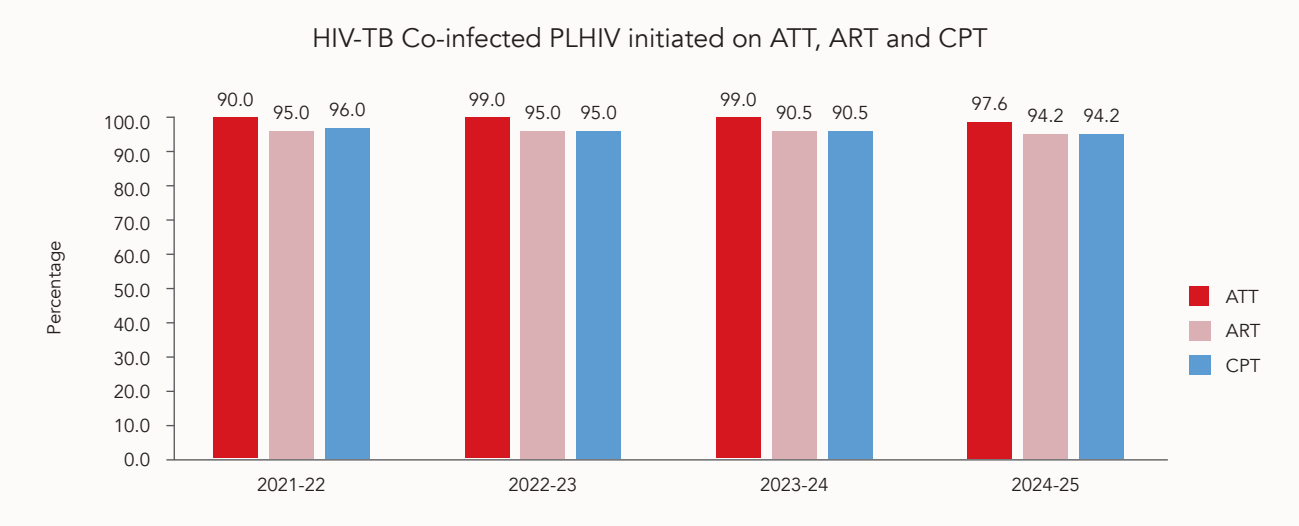
of the total HIV-TB co-infected cases reported in the country during FY 2024-25. Other states with significant proportion included Bihar (5%), and Telangana (5%), reflecting a higher burden in these regions. States of Delhi, Madhya Pradesh, and Punjab contributed around 4% each. In total, these 11 states were contributed 80% of total HIV-TB co-infected PLHIV during FY 2024-25, while several smaller state/UTs such as Arunachal Pradesh, Sikkim, Dadar & Nagar Haveli and Daman and Diu, Puducherry, and Andaman & Nicobar Islands contributed less than 1% of total cases (figure 10.5).

Figure 10.5. State/UT-wise distribution (%) of total HIV-TB co-infected PLHIV, FY 2024-25.



The combined use of Antiretroviral Therapy (ART) and Anti-Tuberculosis Treatment (ATT) plays a crucial role in reducing the impact of active TB among PLHIV by improving survival outcomes and preventing further transmission. As per the National Guidelines for HIV Care and Treatment (2021), ART should be initiated as early as possible, ideally within two weeks of starting TB treatment, irrespective of CD4 cell count (except for cases of TB meningitis). In 2024-25, out of the 32,296 PLHIV registered in the HIV-TB register, 98% were initiated on ATT, and 94% each were initiated on Cotrimoxazole Preventive Therapy (CPT) and ART (figure 10.6). This demonstrates strong programmatic linkage and effective coordination between HIV and TB services, ensuring that the vast majority of co-infected patients receive timely and comprehensive care.

Figure 10.6. Year-wise trend on initiation of ATT, CPT and ART (in %) among HIV-TB co-infected PLHIV, FY 2021-22 to FY 2024-25.



In 2024-25, the contribution of ART Centres in total newly diagnosed HIV-TB cases showed a slight decline, from 68% in 2021-22 to 64% in 2024-25 (figure 10.7). At the same time, the proportion of cases already reported to ARTC as previously diagnosed TB cases increased from 32% to 36%, likely reflecting improved reporting and tracking systems, as more previously diagnosed TB cases are now documented, leaving fewer undiagnosed cases for ARTC to identify. This trend suggests strengthened coordination between HIV and TB services, enabling better case management and minimizing duplication in reporting. Among co-infected PLHIV, 98% were initiated on TB treatment at government institutions, while initiation in private institutions increased marginally from 1% to 2% during the same period. These findings indicate that government facilities continue to serve as the primary provider for TB treatment among PLHIV, with a small but gradually increasing contribution from private institutions, reflecting efforts to engage the private sector in TB/HIV care (figure 10.8).

Figure 10.7. Year wise proportionate contribution of co-infected PLHIV diagnosed by ARTC out of total registered at ARTC from FY 2021-22 to FY 2024-25

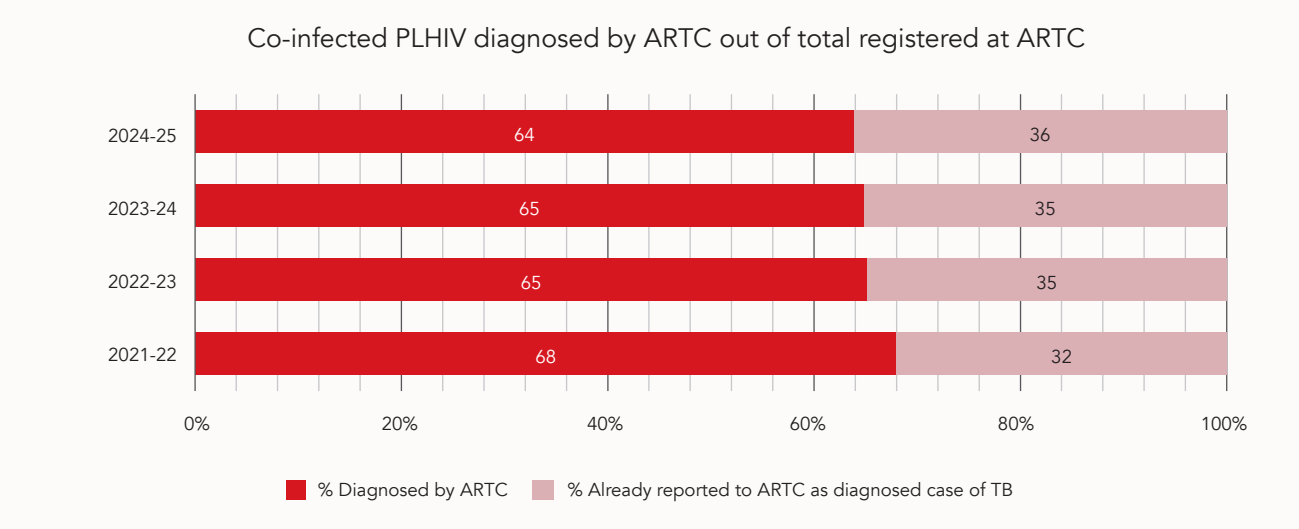
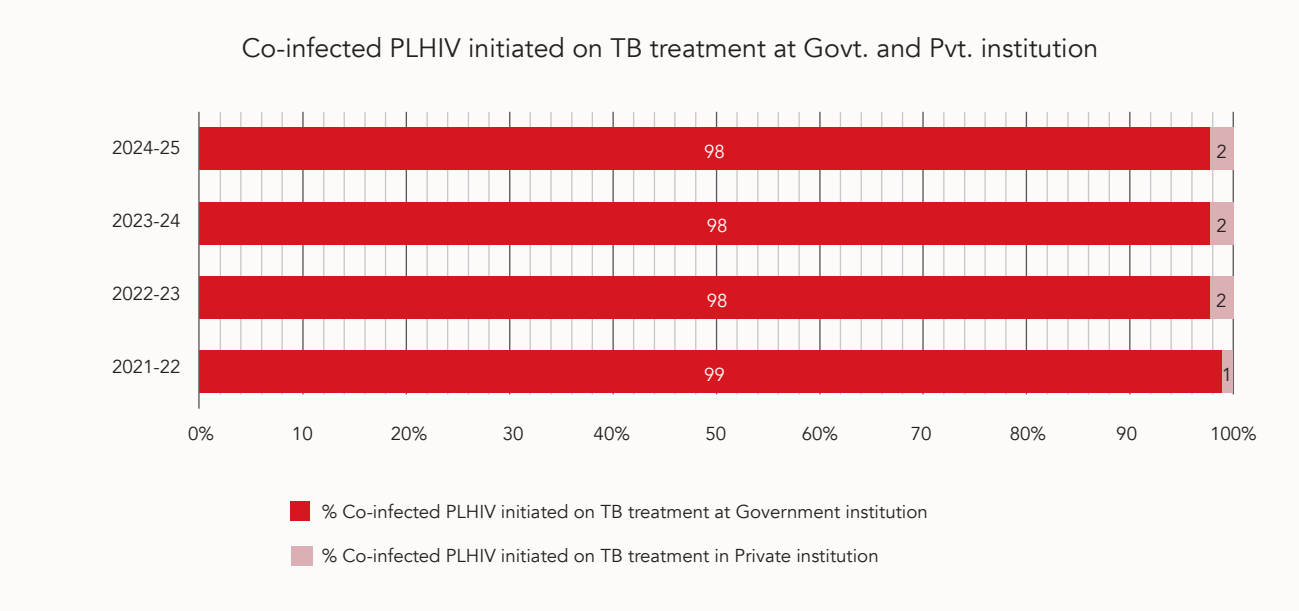


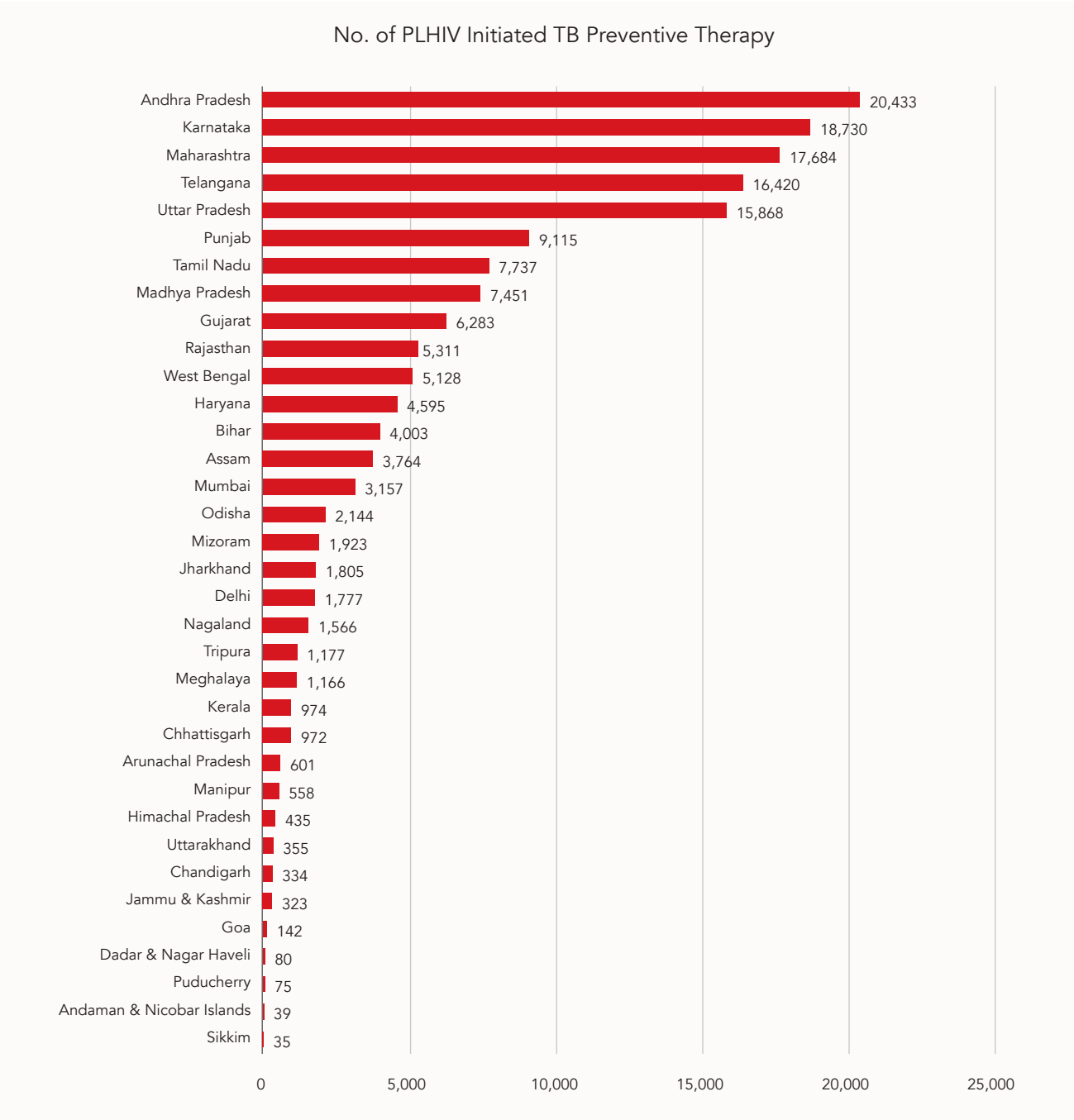
Figure 10.8. Year wise proportionate distribution of Co-infected PLHIV initiated on TB treatment at Government and Private institution from FY 2021-22 to FY 2024-25



10.5. TB Preventive Therapy (TPT) among PLHIV

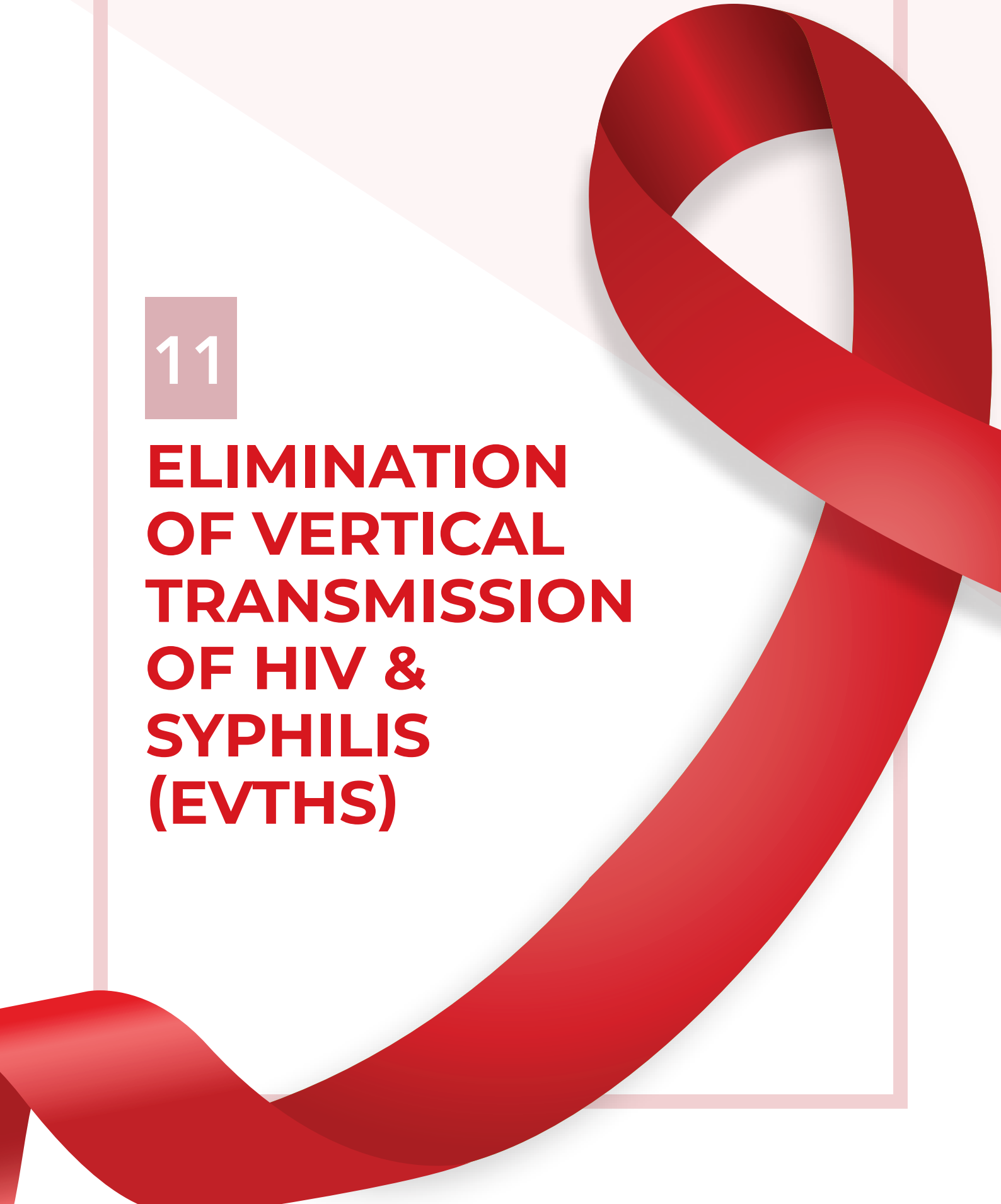
In 2024-25, TPT initiation across state/UT reflects significant variations. States with more than 15,000 initiations included Andhra Pradesh, Karnataka, Maharashtra, Telangana, and Uttar Pradesh (figure 10.9). Those reporting between 5,000 and 10,000 initiations were Punjab, Tamil Nadu, Madhya Pradesh, Gujarat, Rajasthan, and West Bengal. States in the 3,000–5,000 range included Haryana, Bihar and Assam. A moderate range of 1,000–3,000 initiations was observed in Odisha, Mizoram, Jharkhand, Delhi, Nagaland, Tripura, and Meghalaya. States reporting below 1,000 initiations included Kerala, Chhattisgarh, Arunachal Pradesh, Manipur, Himachal Pradesh, Uttarakhand, Chandigarh, Jammu & Kashmir and Ladakh, and Goa. Among the smaller union territories, Dadra & Nagar Haveli and Daman and Diu, Puducherry, Andaman & Nicobar Islands, and Sikkim recorded minimal TPT Initiation.

Figure 10.9. State/UT-wise TPT initiation, FY 2024-25



11

ELIMINATION OF VERTICAL TRANSMISSION OF HIV & SYPHILIS (EVTHS)



ELIMINATION OF VERTICAL TRANSMISSION OF HIV & SYPHILIS (EVTHS)

11.1. Background

Elimination of Vertical Transmission of HIV and Syphilis has emerged as a pivotal framework in India's efforts towards ending of the HIV/AIDS as a public health threat by 2030. The response towards the elimination of vertical transmission of HIV and Syphilis started building on the momentum by the launch of Prevention of Parent-to-Child Transmission (PPTCT) programme in 2002. Over successive phases of the National AIDS and STD Control Programme (NACP), this vision has matured, with NACP-V identifying elimination of vertical transmission as a central objective under Goal 3. To drive this agenda, NACO convened a task force in 2022 to revise the EVTHS guidelines and laid out a phased pathway for implementation.

The National Guidelines for Elimination of Vertical Transmission of HIV and Syphilis was released on 1st December 2024. The guidelines were formulated under the Technical Working Group (TWG) was constituted with representation from Public Health Experts, relevant divisions of MoHFW, Clinical Experts, academicians, Laboratory Experts, Public health Scientists/Researchers, SACS representative, implementing partners and other bilateral agencies, PLHIV networks and community representatives, Professional Medical Associations.

The training material in line with EVTHS guidelines were developed for NACP and Non NACP facility and managerial level staff and the training was rolled out across the country in close coordination between NACO, RMNCAH+N, Adolescent Health Division, Family Planning, Maternal Health, Child Health, Statistics Division and other major stakeholders under NHM on 16th June 2024 in virtual mode.

A dedicated EVTHS module was integrated into the SOCH platform for streamlined reporting and monitoring of the core EVTHS cascade. A two-day National Capacity Building Meeting with all States & UTs on Elimination of Vertical Transmission of HIV and Syphilis during January/February 2024 at Patna, Bihar on 12-13 February, 2025. The training comprised of participants from NACO, SACS and EID Lab Experts. The objective of the meeting was to review the status of implementation of EVTHS interventions and capacity building of SACS officials and EID Lab Experts on EVTHS data capturing mechanism. This was followed by Training of Master Trainer for SOCH EVTHS modules and cascade down training of field level staff from ICTC, DSRC, ARTC, EID Lab. etc.

Further, in order to ensure uniform understanding and effective implementation of the revised national guidelines in the field, a Virtual Dissemination Series comprising 12 sessions has been launched to provide an overview of the National Guidelines on Elimination of Vertical Transmission of HIV and Syphilis (EVTHS) 2024 to NACP staff through the NDLS platform beginning April to October 2025.

In an endeavour of the Government of India to improve maternal and infant health outcome by reducing the related morbidity and mortality

among HIV and syphilis-exposed infants, a communication letter was sent by Additional Secretary and Director General of NACO to all the Additional Chief Secretaries of State for Mission Mode Implementation of EVTHS interventions. This communication intended to also improve the coordination between RMNCHA+ under National Health Mission and the National AIDS Control Program to strengthen the implementation of interventions under EVTHS and its regular review. Mission Mode implementation focuses on strengthening service delivery, enhancing provider capacity, ensuring uninterrupted supplies, and instituting regular progress reviews.

In close collaboration with the National Health Mission (NHM), the state have procured the HIV–syphilis dual rapid diagnostic test (RDT) kits for screening of the pregnant women by utilizing their NHM budget allocated through the Programme Implementation Plan (PIP). This strategic initiative is designed to strengthen the availability of testing services across healthcare facilities and Village Health, Sanitation, and Nutrition Day (VHSND) sites. By ensuring wider distribution and access to these kits, the approach aims to significantly improve the routine screening of pregnant women for both HIV and syphilis, thereby enabling early detection, timely management, and reduction of mother-to-child transmission risks.

This PAN-India implementation of EVTHS interventions in FY 2024–25 demonstrated clear gains in the care cascade, including improved screening, timely case detection, and better care for HIV- and syphilis-infected pregnant women and exposed infants. To measure progress towards EVTHS, NACO monitors various impact and process indicators. The State/UT wise summary of key indicators is provided in table 11.1.

11.2. Coverage of ANC registration, HIV Testing and Syphilis Testing among pregnant women

Over the years, India has expanded the reach of ANC and integrated dual HIV–syphilis testing into routine maternal health services. Monitoring trends in ANC registration, HIV testing, and syphilis testing coverage provides vital insights into program performance, service delivery gaps, and readiness for EMTCT validation. Figure 11.1 presents the national trends in these indicators over the past seven years, reflecting progress toward universal testing and sustained elimination targets.

Figure 11.1. Year wise coverage (in %) of EVTHS Process Indicators from FY 2017-18 to FY 2024-25

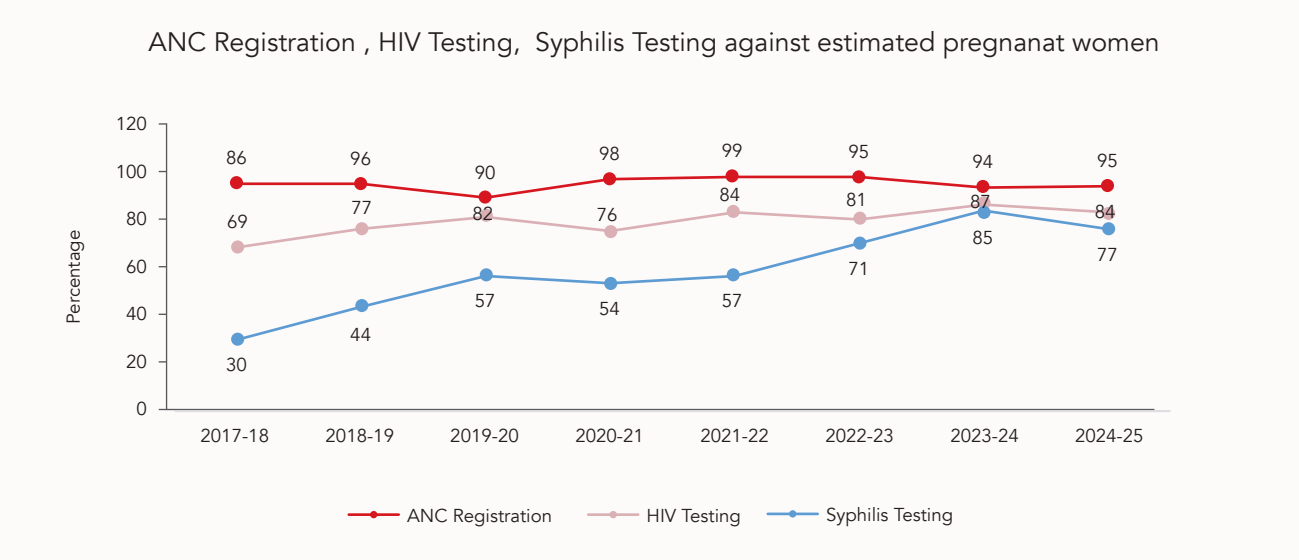


Table 11.1. State/UT-wise summary of EVTHS process indicators, FY 2024-25

S.N	State/UT	Estimated # of annual pregnancies	HMIS ANC regn.	% ANC covered against estimated	HIV tested	% ANC HIV tested against estimated	EVTH need	PW positive*	Initiated on ART	ART coverage (facility Level denominator)	ART coverage (Popn. level denominator)	Syphilis tested	% ANC syphilis tested against estimated	Syphilis reactive	Syphilis treated	Syphilis treatment coverage
1	A&N Islands	4,016	3,902	97%	3,250	81%	4	6	5	83%	125%	3,911	97%	8	8	100%
2	Andhra Pradesh	8,39,160	8,05,331	96%	6,77,761	81%	1,686	1,460	1,401	96%	83%	7,08,163	84%	93	81	87%
3	Arunachal Pradesh	27,817	27,132	98%	20,878	75%	25	20	19	95%	76%	28,872	104%	537	338	63%
4	Assam	7,32,178	6,37,436	87%	2,99,549	41%	262	269	229	85%	87%	3,35,264	46%	258	234	91%
5	Bihar	35,59,146	34,34,808	97%	32,66,467	92%	1,389	1,252	980	78%	71%	22,90,064	64%	517	505	98%
6	Chandigarh	15,372	27,177	177%	18,073	118%	20	50	47	94%	235%	19,433	126%	45	44	98%
7	Chhattisgarh	7,44,239	6,11,185	82%	5,28,408	71%	390	372	362	97%	93%	4,32,622	58%	501	358	71%
8	DNH & DD	14,372	11,585	81%	19,902	138%	9	9	10	111%	111%	22,270	155%	9	9	100%
9	Delhi	3,70,321	4,86,550	131%	3,33,973	90%	377	360	356	99%	94%	3,22,616	87%	150	145	97%
10	Goa	17,759	20,817	117%	14,808	83%	28	17	17	100%	61%	18,418	104%	10	10	100%
11	Gujarat	13,46,089	13,04,846	97%	11,21,289	83%	979	1,029	958	93%	98%	12,68,228	94%	1,013	984	97%
12	Haryana	6,06,650	5,62,859	93%	5,42,033	89%	579	635	592	93%	102%	8,07,712	133%	204	195	96%
13	Himachal Pradesh	1,05,951	98,233	93%	63,542	60%	32	38	32	84%	100%	70,947	67%	33	29	88%
14	Jammu & Kashmir	2,20,305	2,48,716	113%	1,49,709	68%	29	32	29	91%	100%	39,677	18%	-	-	0%
15	Jharkhand	10,20,306	10,06,356	99%	6,25,648	61%	307	280	282	101%	92%	7,38,437	72%	116	114	98%
16	Karnataka	10,95,291	11,32,428	103%	9,64,977	88%	1,306	1,356	1,349	99%	103%	11,65,529	106%	169	167	99%
17	Kerala	3,73,288	3,49,301	94%	3,57,289	96%	72	65	58	89%	81%	4,52,290	121%	32	32	100%
18	Ladak	3,882	4,592	118%	1,710	44%	-	1	-	0%	0%	1,173	30%	2	2	100%
19	Lakshadweep	837	916	109%	514	61%	-	-	-	0%	0%	622	74%	-	-	0%
20	Madhya Pradesh	21,53,045	17,98,746	84%	14,22,135	66%	782	845	775	92%	99%	16,20,591	75%	874	854	98%
21	Maharashtra	21,90,879	20,19,310	101%	18,97,556	94%	2,087	1,794	1,783	99%	85%	22,62,895	112%	257	254	99%
22	Manipur	50,815	52,597	104%	34,539	68%	155	134	137	102%	88%	45,438	89%	15	14	93%
23	Meghalaya	92,499	1,02,987	111%	78,242	85%	284	298	284	95%	100%	83,005	90%	1,099	701	64%
24	Mizoram	23,116	21,036	91%	24,653	107%	347	341	339	99%	98%	15,679	68%	180	178	99%
25	Nagaland	23,913	22,790	95%	21,920	92%	297	278	263	95%	89%	27,135	113%	105	100	95%
26	Odisha	7,53,141	6,23,978	83%	6,35,638	84%	371	343	329	96%	89%	6,90,951	92%	464	266	57%
27	Puducherry	13,870	27,986	202%	26,435	191%	13	8	8	100%	62%	33,309	240%	14	13	93%
28	Punjab	4,33,515	4,04,605	93%	3,31,695	77%	988	1,024	975	95%	99%	3,60,905	83%	324	307	95%
29	Rajasthan	19,79,619	16,69,826	84%	13,07,962	66%	928	770	799	104%	86%	11,90,781	60%	946	812	86%
30	Sikkim	7,990	7,189	90%	11,330	142%	7	7	6	86%	86%	7,633	96%	50	18	36%
31	Tamil Nadu	9,74,875	9,02,994	93%	7,93,101	81%	935	829	845	102%	90%	9,66,040	99%	287	284	99%
32	Telangana	6,60,184	6,79,805	103%	5,48,253	83%	1,018	1,043	1,010	97%	99%	4,92,954	75%	76	70	92%
33	Tripura	56,828	52,684	93%	40,969	72%	73	106	69	65%	95%	43,521	77%	66	45	68%
34	Uttar Pradesh	72,88,843	71,96,121	99%	71,99,770	99%	2,101	1,944	2,096	108%	100%	44,18,179	61%	1,011	852	84%
35	Uttarakhand	2,12,399	1,90,848	90%	1,51,893	72%	84	120	99	83%	118%	1,79,003	84%	73	60	82%
36	West Bengal	15,55,425	14,51,199	93%	12,37,753	80%	509	511	518	101%	102%	15,31,562	98%	828	803	97%
India		**2,95,67,935**	**2,81,97,268**	**95%**	**2,49,26,407**	**84%**	**18,473**	**17,910**	**17,325**	**97%**	**94%**	**2,28,83,171**	**77%**	**10,545**	**9,065**	**86%**

*new cases diagnosed as well as women living with HIV and in pre-ART or on- ART(new +Known)

11.2.1. ANC Registration

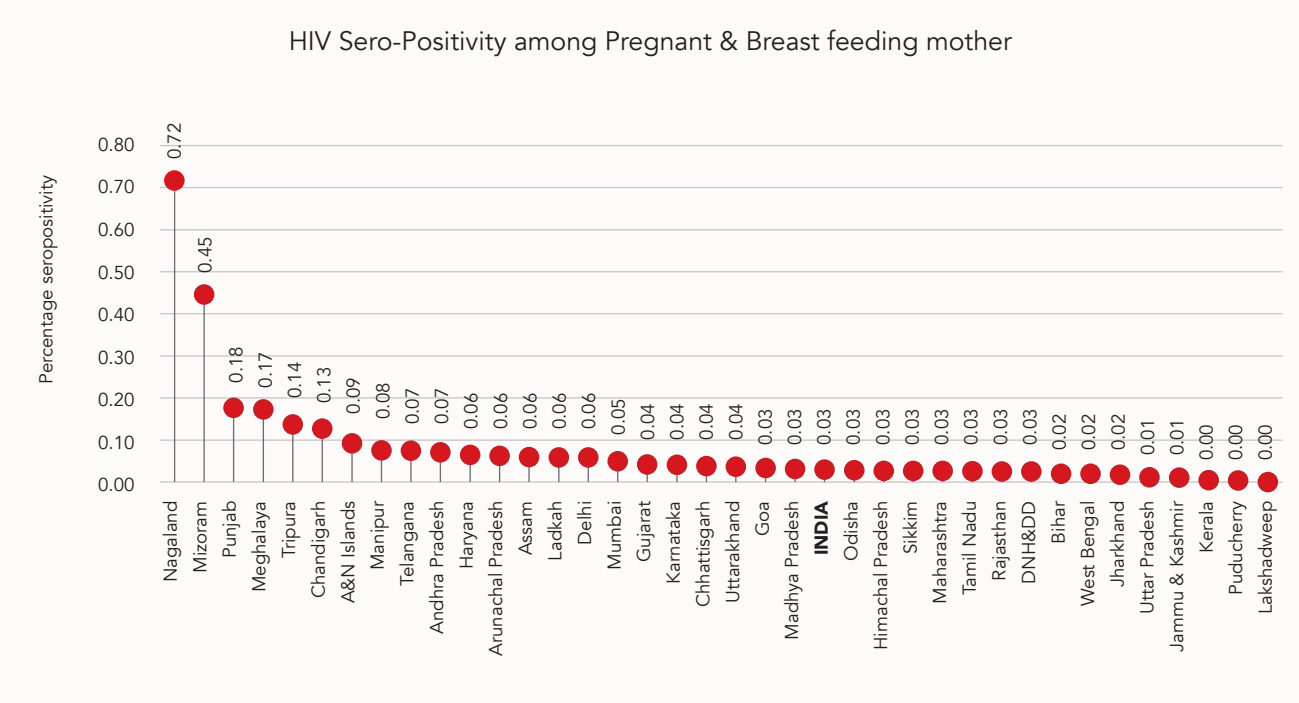
The trend of ANC registration against estimated pregnant women has remained consistently high over the years, reflecting strong coverage of maternal health services. As shown in figure 11.1., Overall, despite minor fluctuations, ANC registration has consistently stayed above 90%, indicating strong program performance and effective engagement with pregnant women. However, in the current financial year, a total of 16 states and Union Territories have reported ANC registration coverage below the national average of 95%. These include DNH & DD (81%), Chhattisgarh (82%), Odisha (83%), Rajasthan (84%), Madhya Pradesh (84), Assam (87%), Sikkim (90%), Uttarakhand (90%), Mizoram (91%), Haryana (93%), Himachal Pradesh (93%), Punjab (93%), Tamil Nadu (93%), Tripura (93%), West Bengal (93%), and Kerala (94%), as given in table 11.1.

11.2.2. HIV Testing among pregnant women

In FY 2024–25, HIV testing coverage among pregnant women in India reached 84%, reflecting steady progress over the years. The coverage has increased consistently remained stable between 81% and 87%. This upward trend demonstrates significant improvement in ensuring HIV testing among pregnant women, although the national average still falls slightly short of universal ANC testing, highlighting the need to close the remaining gap in comprehensive HIV screening. ANC HIV testing have shown a fall in FY 2024-25 at 84% as compared to 87% in 2023-24. The major reasons for short fall in HIV and Syphilis testing in pregnant women due to, under reporting from private sector, incomplete reporting in the HMIS portal by HIV Screening Facilities, and supply chain constraints for procurement of Dual HIV and Syphilis screening kits,

However, in the current financial year, the states and UTs with HIV testing coverage among ANC women below the national average of 84% are Assam (41%), Ladakh (44%), Himachal Pradesh (60%), Jharkhand (61%), Lakshadweep (61%), Rajasthan (66%), Madhya Pradesh (66%),Jammu & Kashmir (68%), Manipur (68%), Chhattisgarh (71%), Tripura (72%), Uttarakhand (72%), Arunachal Pradesh (75%), Punjab (77%), West Bengal (80%), Andaman & Nicobar Islands (81%), Andhra Pradesh (81%), Tamil Nadu (81%), Goa (83%), Gujarat (83%), and Telangana (83%). These states and UTs are performing below the national average and require targeted efforts to improve HIV testing among pregnant women as given in table 11.1.

Figure 11.2. HIV Sero-Positivity among Pregnant and Breast-feeding mother, FY 2024-25



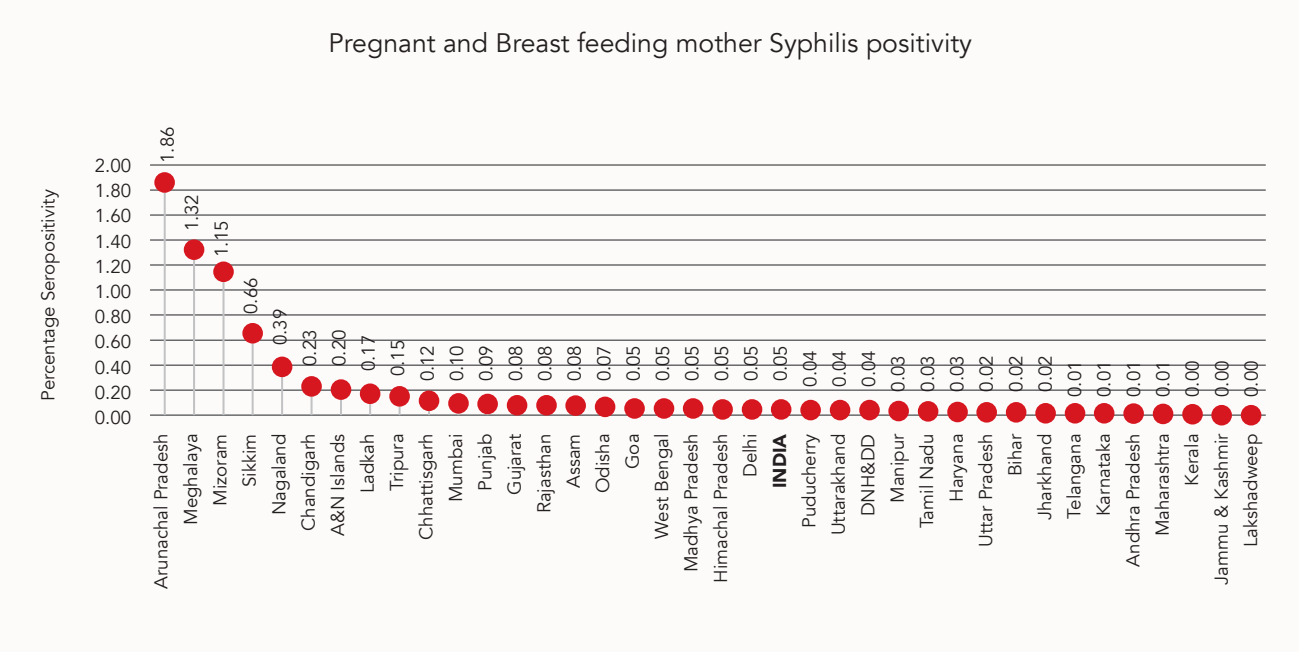
In FY 2024-25, out of approximately 2.49 crore HIV tests conducted, 7,471 HIV-positive pregnant women were detected as HIV positive, resulting in a national sero-positivity rate of 0.03% in figure 11.2. While the national figure remains relatively low, there is significant variation across states and Union Territories. The highest seropositivity is reported from Nagaland (0.72%), followed by Mizoram (0.45%), Punjab (0.18%), Meghalaya (0.17%), Tripura (0.14%), Chandigarh (0.13%), Andaman & Nicobar Islands (0.09%), and Manipur (0.08%), all of which are well above the national average. This distribution highlights a concentrated epidemic, with the North-Eastern states (Nagaland, Mizoram, Manipur, Tripura, and Meghalaya) and select regions like Punjab and Chandigarh continuing to bear a disproportionately higher burden compared to the rest of the country. Various interventions have been designed under the programs to ensure primary prevention. Successful implementation of the EVTHS guidelines, along with other prevention strategies, is expected to further reduce positivity rates.

11.2.3. Syphilis testing among pregnant women

Syphilis in pregnancy remains a significant public health concern due to it's potential to cause adverse maternal and neonatal outcomes, including stillbirth, neonatal death, and congenital infections. Early detection and treatment are critical to preventing these complications. Syphilis screening is primarily conducted using HIV and Syphilis dual rapid diagnostic tests (Dual RDTs) to enable timely and integrated management of both infections. In settings where Dual RDTs are unavailable, conventional serological tests such as the Rapid Plasma Reagin (RPR) or Venereal Disease Research Laboratory (VDRL) tests are utilized. This approach ensures broad coverage, early diagnosis, and effective treatment, aligning with national efforts to eliminate vertical transmission of syphilis and improve neonatal health outcomes.

In FY 2024–25, syphilis testing coverage among pregnant women reached 77%, marking a significant rise from 30% in FY 2017–18 and reflecting the strong efforts of the National AIDS & STD Control Programme to integrate syphilis screening into ANC services. The long-term trend highlights substantial progress in early detection and maternal-child health interventions. While coverage shows a slight decline compared to FY 2023–24 due to reporting and supply challenges, ongoing improvements in data systems, private sector engagement, and supply chain management are expected to further strengthen testing and reporting in the coming years.

Figure 11.3. Syphilis Sero-Positivity among Pregnant and Breast-feeding mother, FY 2024-25



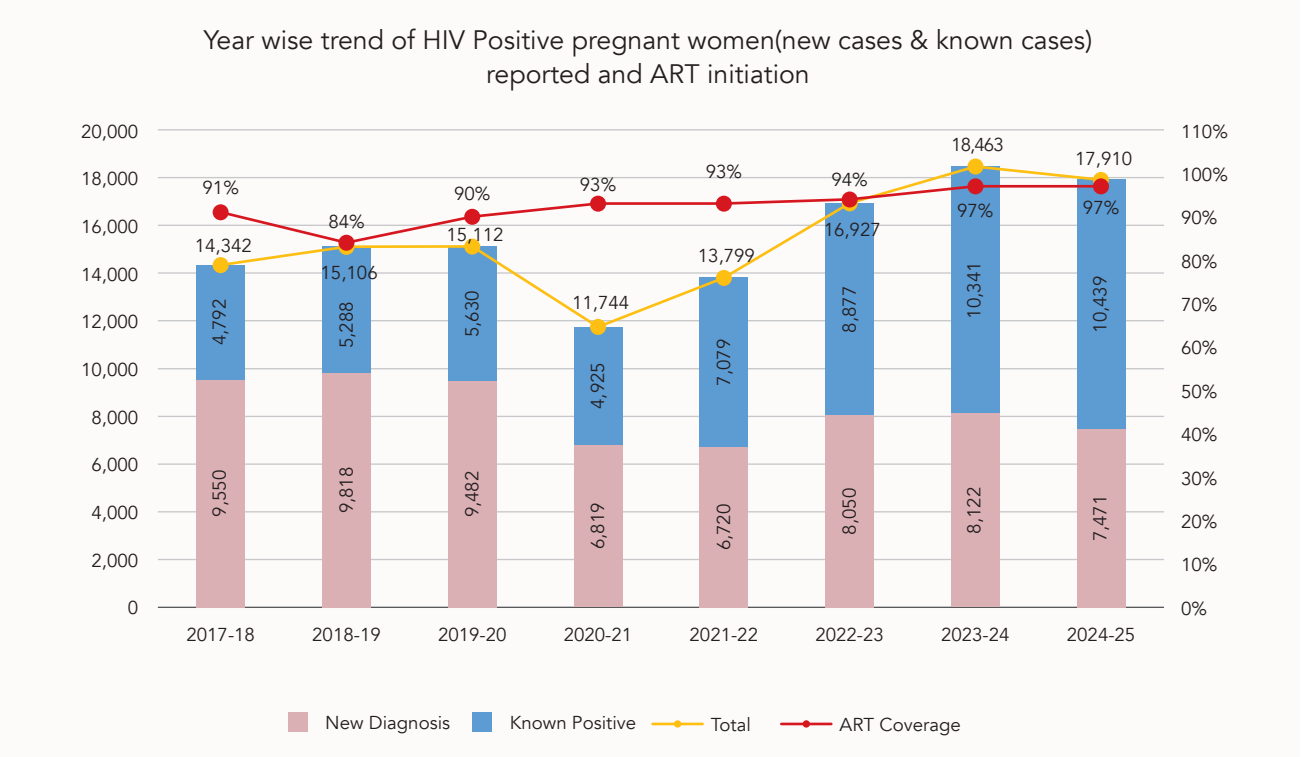
Syphilis sero-positivity among pregnant women showed considerable variation across states and Union Territories. The figure 11.3. immediately reveals an extremely high degree of heterogeneity in the regional distribution, indicating that the burden is not uniform but heavily concentrated in a select few geographical areas, with several regions exceeding a 1.00 percent positivity rate. The most critical finding is the presence of an exceptionally high-prevalence cluster, where rates dramatically exceed the national average. Arunachal Pradesh (1.86%) registers the most significant prevalence, maintaining a rate that is over eighteen times the national average. This is followed by Meghalaya (1.32%) and Mizoram (1.15%), both of which also sustain rates above the 1.00 percent threshold. These three states represent an exceptionally acute burden for Syphilis and necessitate urgent, comprehensive, and intensified public health programming.

The national average syphilis positivity rate stood at 0.05%. Following this core group (Arunachal Pradesh, Meghalaya & Mizoram), a second significant cluster of regions demonstrates moderate to high sero-positivity rates, falling within the range of approximately 0.05 %to 0.66%. This grouping includes states and Union Territories such as Sikkim (0.66%), Nagaland (0.39%), Chandigarh (0.23%), Andaman & Nicobar (0.20%), Ladakh (0.17%), Tripura (0.15%), Chhattisgarh (0.12%), Mumbai (0.10%), Punjab (0.09%), Gujarat (0.08%), Rajasthan (0.08), Assam (0.08%), Odisha (0.07%), Goa (0.05), West Bengal (0.05%), Madhya Pradesh (0.05%), Himachal Pradesh (0.05%), and Delhi (0.05%). The state/UTs wise syphilis reactive reported among pregnant women during FY 2024-25 is given in table 11.1.

11.3. Identification of pregnant WLHIV

During FY 2024–25, the program identified a total of 17,910 pregnant women living with HIV (WLHIV), comprising 7,471 newly diagnosed cases and 10,439 women who were already aware of their HIV-positive status prior to pregnancy (referred to as "known pregnant WLHIV"). Over the years, there has been a notable shift in the trend, with the proportion of known pregnant WLHIV increasing from 33% in FY 2017–18 to 58% in FY 2024–25. This steady rise underscores the program's success in promoting early HIV diagnosis and retaining women in care before pregnancy. At the same time, ART (antiretroviral therapy) coverage for identified pregnant WLHIV has improved from 91% in FY 2017–18 to 97% in FY 2024–25, ensuring better maternal and child health outcomes.

Figure 11.4. Year wise trend of HIV Positive pregnant women (new cases & known cases) reported and ART initiation



In FY 2024–25, the distribution of newly detected and known pregnant WLHIV varied significantly across states and Union Territories. As per figure 11.5, several regions reported a higher proportion of known pregnant WLHIV compared to newly diagnosed cases, indicating improved awareness and early diagnosis.

Program could provide the services to 17,910 (97%) pregnant WLHIV out of estimated 18,473 (as per India Estimate 2024) the pregnant women who may be in need of EVTHS interventions for HIV. This increase in identification of pregnant women underscores the effectiveness of the implemented strategies aimed at improving screening and support for this vulnerable population.

In FY 2024–25, the proportion of known pregnant WLHIV was highest in Puducherry (88%), followed by Manipur (81%), Kerala (75%) and Tamil Nadu (75%), Maharashtra+Mumbai (72%), Karnataka (71%) and Goa (71%) also reported a strong share of known positives. This was followed by Mizoram (68%), Andhra Pradesh (67%), Telangana (61%) and Jharkhand (61%). States showing a moderate proportion included Rajasthan (57%), Sikkim (57%), Uttar Pradesh (57%), Himachal Pradesh (55%), Meghalaya (55%) and Gujarat (55%), while West Bengal (53%) and Uttarakhand (53%) reported relatively lower but still higher proportions of known positives compared to newly detected cases.

Figure 11.6 illustrates the distribution of WLHIV (Women Living with HIV) cases diagnosed during the post-natal period, either after childbirth or during breastfeeding, in FY 2024–25. Nationally, 776 cases were identified postnatally; accounting for 10% of all newly diagnosed pregnant WLHIV. Among the states, Jharkhand reported the highest proportion with 30% of its newly diagnosed WLHIV detected postnatally, followed by Assam (22%), Uttar Pradesh (19%), Telangana (19%), and Odisha (19%). Other states included Punjab (15%), Chhattisgarh (16%), Rajasthan (12%), West Bengal (12%), and Bihar (11%). Madhya Pradesh recorded the lowest among the listed states with 7%, while the rest of the states together contributed 4% of cases.

Figure 11.5. State/UT-wise distribution (in %) of Newly Diagnose and Known Pregnant Women Living with HIV, FY 2024-25

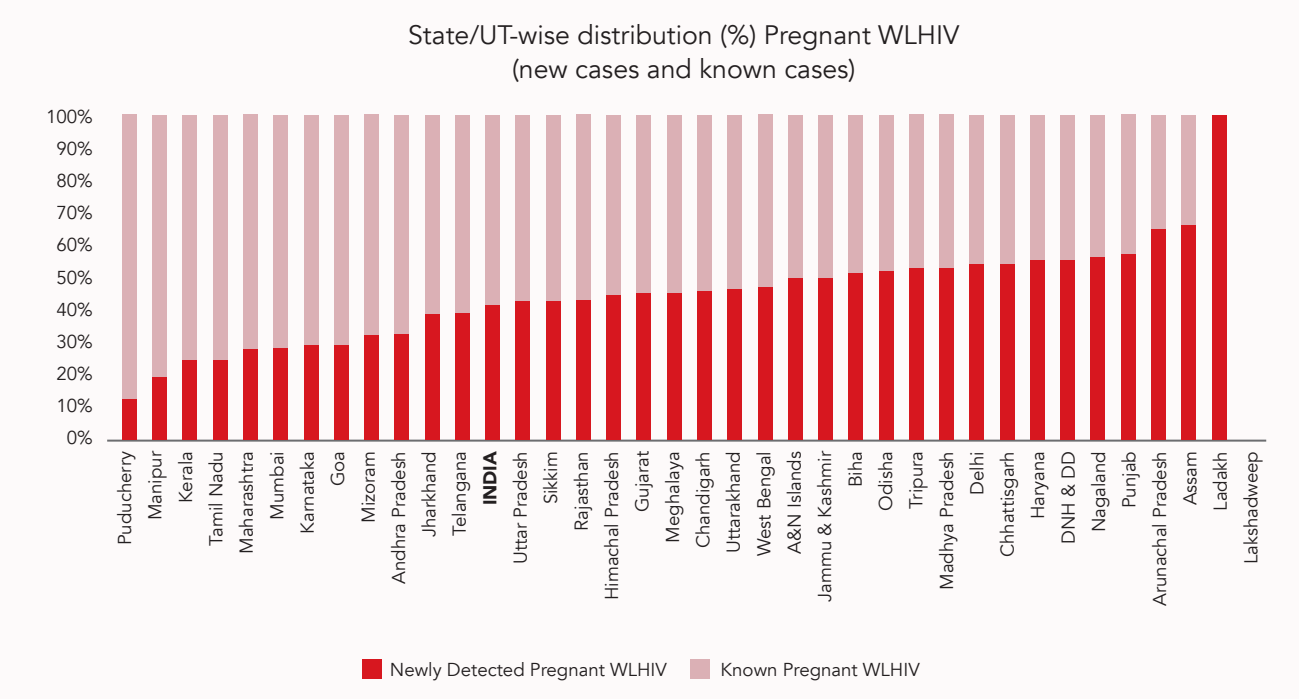
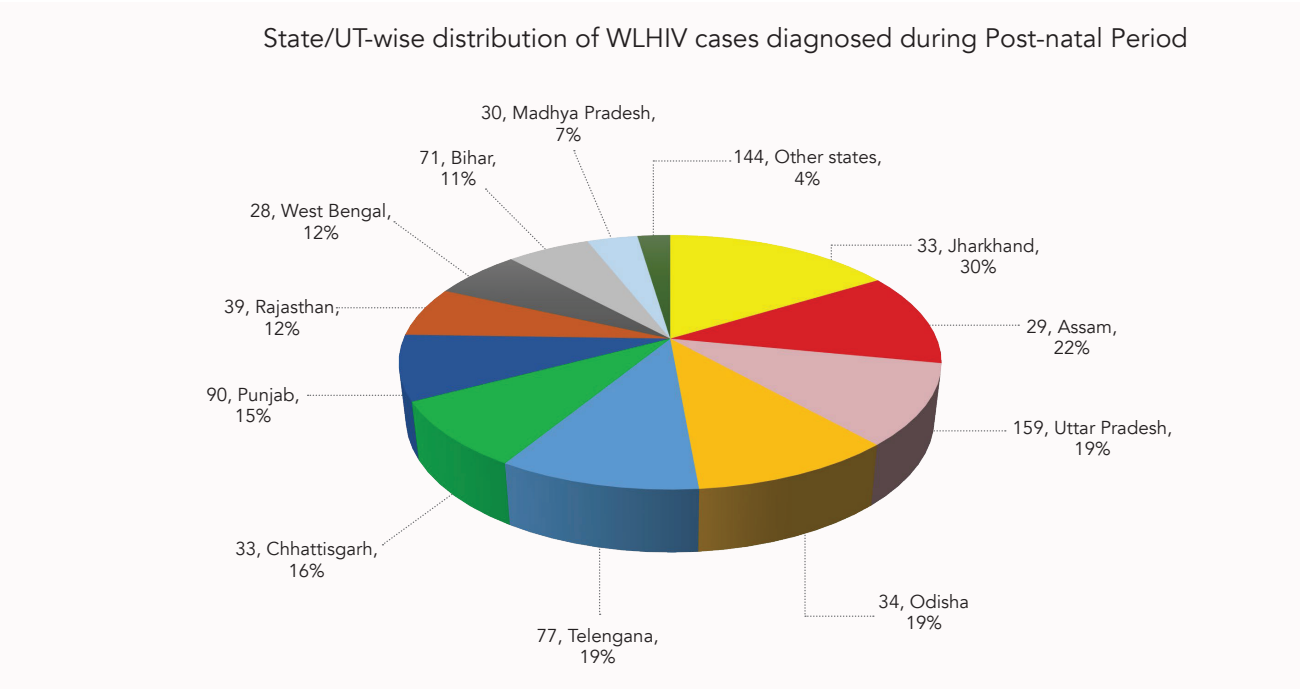


Figure 11.6. State/UT-wise distribution of WLHIV cases diagnosed in post-natal period after the childbirth or during breastfeeding, FY 2024-25



This trend may point toward missed HIV diagnoses during pregnancy or possibly new infections during breastfeeding, emphasizing a critical gap in early detection. These findings are significant from a programmatic standpoint, highlighting potential missed opportunities under the EVTHS initiative. Importantly, the program ensures that these postnatally diagnosed women and their children receive comprehensive EVTHS service packages to prevent HIV transmission via breastfeeding—assuming the child is not already infected.

11.4. Treatment coverage for pregnant WLHIV

The program focuses on rapid initiation of ART for pregnant women living with HIV (WLHIV) is crucial and, achieving optimal adherence as well as optimal plasma viral load suppression. ART prevents vertical/perinatal transmission of HIV by reducing the maternal viral load, loading the foetus with Anti-retroviral drugs that prevent the transmitted virions from replicating and improving overall health of mother.

In FY 2024–25, a total of 17,910 pregnant WLHIV (Women Living with HIV) were identified across India, of which 10,439 were previously known cases and 7,471 were newly diagnosed. Out of these, 17,325 women (97%) were successfully initiated on ART (Antiretroviral Therapy), showing continued progress from the previous year and maintaining high national coverage.

Despite this encouraging overall performance, some states and Union Territories reported lower ART coverage, pointing to the need for strengthened programmatic interventions. For instance, Tripura (65%), Bihar (78%), Himachal Pradesh (84%), Andaman & Nicobar Islands (83%), Uttarakhand (83%), Kerala (89%), Odisha (89%), Nagaland (89%), Tamil Nadu (90%), and Manipur (88%) recorded below-optimal population-level ART coverage. In contrast, several states performed well above 95%, such as Jharkhand (92%), Assam (87%), Punjab (99%), Madhya Pradesh (99%), Telangana (99%), West Bengal (102%), and Uttar Pradesh (100%), reflecting strong program implementation as given in table 11.1.

It is programmatically critical to ensure that all pregnant WLHIV are initiated on ART promptly, aiming for viral suppression before delivery, which significantly reduces the risk of mother-to-child HIV transmission. Sustained focus is necessary in the states lagging behind to achieve 100% ART coverage under the EVTHS framework.

11.5. Viral Load Testing during 32-36 weeks of pregnancy

Viral load testing at 32–36 weeks of pregnancy, introduced in 2021 to guide infant ARV prophylaxis, is now being effectively monitored nationwide. With the pan-India rollout of EVTHS interventions in FY 2024–25, this strengthened monitoring has enhanced implementation of dual ARV prophylaxis for exposed infants and improved maternal-child health outcomes.

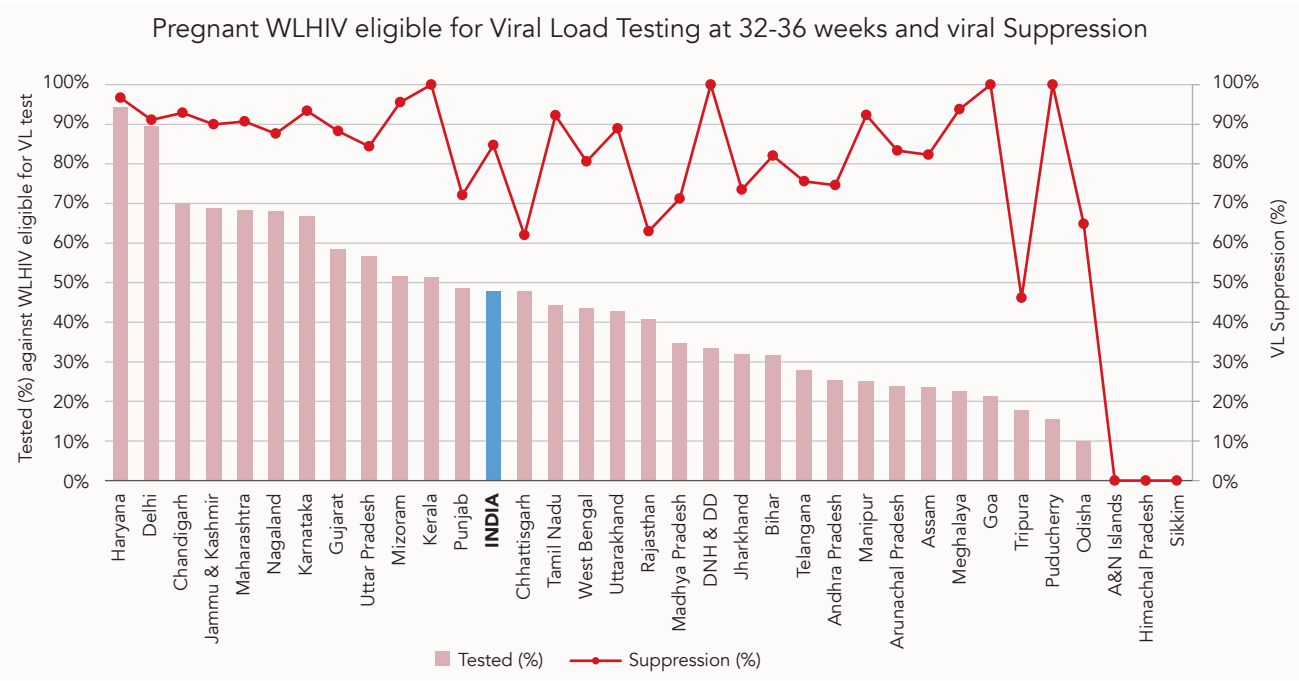
At the national level, a total of 17,965[1] pregnant women living with HIV (WLHIV) were eligible for viral load testing, as per the estimated viral load, at 32–36 weeks of pregnancy during the reporting period. Of these, 8,864 (49%) underwent viral load testing, and 7,513 (85%) achieved viral load suppression, reflecting India's ongoing progress toward the prevention of mother-to-child transmission of HIV.

Several states and union territories demonstrated exemplary performance. Kerala (100%), DNH & DD (100%), Goa (100%), and Puducherry (100%) achieved complete viral load suppression among those tested. High-performing states such as Haryana (97%), Mizoram (96%), Karnataka (93%), Chandigarh (93%), Tamil Nadu (92%), and Manipur (92%) also reported commendable outcomes. Other states including Meghalaya (94%), Delhi (91%), Maharashtra (91%), and Jammu & Kashmir (90%) showed strong program performance, reflecting robust monitoring and adherence mechanisms.

However, regional disparities persist. States such as Odisha (65%), Rajasthan (63%), Chhattisgarh (62%), and Tripura (46%) reported relatively lower suppression rates, indicating challenges in consistent treatment adherence and monitoring. Furthermore, testing coverage was below 50% in several large states. During the reporting period, several states and union territories exhibited low viral load testing coverage among pregnant women living with HIV, reflecting gaps in program reach and implementation.

A total of 19 state/UTs recorded testing coverage below 50%, indicating that less than half of eligible women underwent viral load testing at 32–36 weeks of pregnancy. These include Andaman & Nicobar Islands, Arunachal Pradesh, Assam, Bihar, Chhattisgarh, DNH&DD, Goa, Jharkhand, Madhya Pradesh, Manipur, Meghalaya, Odisha, Puducherry, Rajasthan, Sikkim, Telangana, Tripura, Uttarakhand, and Himachal Pradesh. The lowest testing rates were observed in Odisha (10%), Tripura (18%), Goa (21%), and Meghalaya (23%), highlighting the need for strengthened laboratory systems, improved sample transportation, and enhanced follow-up mechanisms. Addressing these coverage gaps and improving coordination between testing facilities and antenatal care sites will be critical to achieving universal viral load monitoring. Additionally, decentralisation of viral load collection through the nearest ICTC as per need, will further enhance accessibility, reduce turnaround time, and support prompt clinical decision-making.

Figure 11.7. Pregnant WLHIV eligible for Viral Load testing & Suppression at 32-36 weeks, FY 2024-25

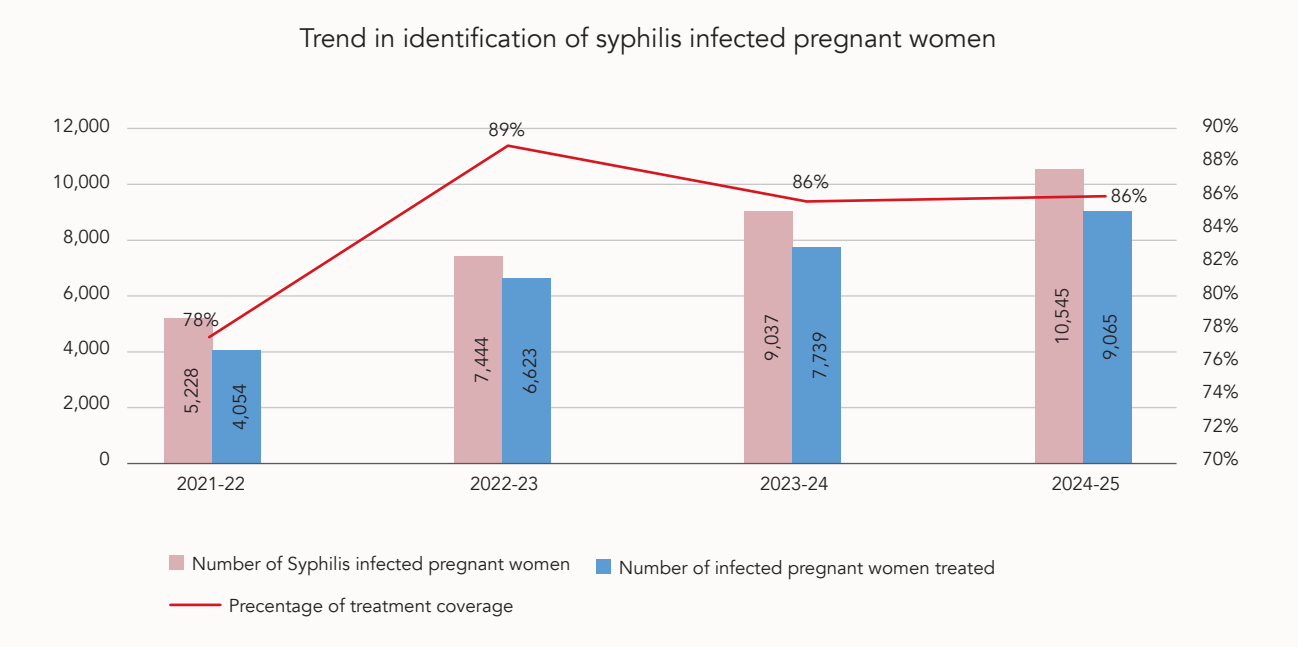


[1] Number of pregnant women living with HIV (WLHIV) eligible for viral load testing during 32-36 weeks of pregnancy were calculated based on EVTHS testing targets. It is estimated that 10% of cases are identified in DIL and PNC. Hence, the target is provided for 90% of estimated PWLHIV.

11.6. Identification of Syphilis Infected pregnant women

With syphilis screening widely available at both public and private facilities, the reporting of infected pregnant women has steadily risen—from 5,228 in FY 2021-22 to 10,545 in FY 2024-25 (figure 11.8). This increase reflects expanded screening coverage, enhanced detection efforts, and ongoing training of NACP and non-NACP staff on screening and HMIS reporting.

Figure 11.8. Trend in identification of syphilis infected pregnant women from FY 2020-21 to FY 2024-25

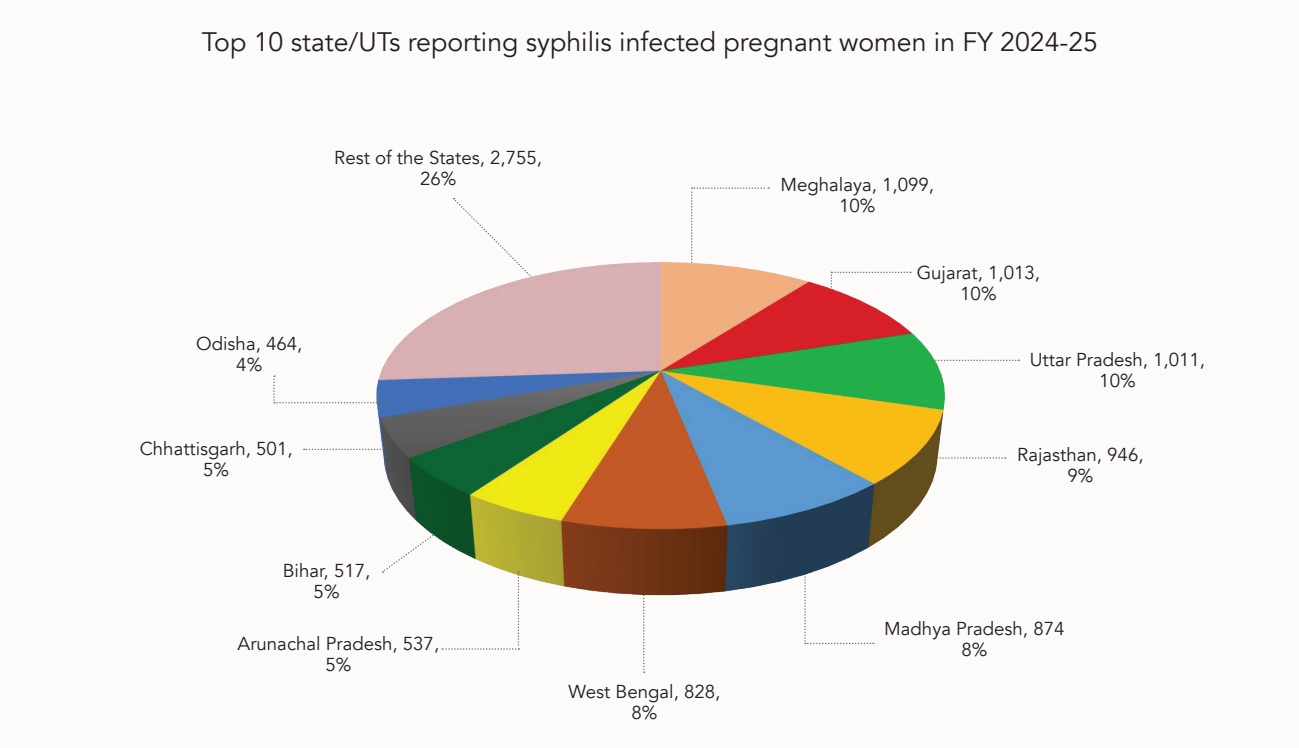


Rapid initiation of treatment for pregnant women diagnosed with syphilis is crucial to prevent perinatal transmission. Timely management of syphilis-infected pregnant women effectively prevents transmission to the child during pregnancy and childbirth. These women are promptly started on treatment at the nearest facility and classified as 'high-risk pregnancies' under Extended PMSMA (Pradhan Mantri Surakshit Matritva Abhiyan), ensuring additional antenatal visits and enhanced care.

As per figure 11.9, the distribution of syphilis-infected pregnant women across different states and UTs in FY 2024-25 shows the highest contributions from Meghalaya (10%), Gujarat (10%), and Uttar Pradesh (10%), followed by Rajasthan (9%), Madhya Pradesh (8%), and West Bengal (8%). Other notable contributors were Arunachal Pradesh (5%), Bihar (5%), Chhattisgarh (5%), and Odisha (4%).

These states collectively represent a significant portion of the national disease burden and play a crucial role in achieving the goal of eliminating congenital syphilis. Strengthening syphilis screening, ensuring timely testing, and establishing effective treatment linkage systems in the remaining states, which together contributed 26% of reported cases, is essential to sustain progress toward this national objective.

Figure 11.9. Top 10 state/UTs reporting syphilis infected pregnant women, FY 2024-25



11.7. Identification and treatment of Syphilis Infected pregnant women

The EVTHS "Test & Treat" policy ensures that pregnant women who screen reactive for syphilis receive at least one immediate dose of Benzathine Penicillin G, effectively reducing the risk of transmission to the new-born. Complete treatment, tailored to the stage of infection, ensures comprehensive care for all sero-reactive women. Importantly, treatment coverage has remained high, ensuring timely care for the majority of identified women.

A total of 23 state/UTs have achieved testing coverage above the national average, demonstrating commendable program implementation and outreach efforts. States such as Puducherry (240%), Dadra & Nagar Haveli & Daman & Diu (155%), Haryana (133%), Kerala (121%), and Chandigarh (126%) have performed exceptionally well, surpassing even the 100% benchmark.

Other states with performance between 80%-113% include Maharashtra (112%), Nagaland (113%), Karnataka (106%), Goa (104%), Arunachal Pradesh (104%), West Bengal (98%), Tamil Nadu (99%), Sikkim (96%), Gujarat (94%), Odisha (92%), Meghalaya (90%), Manipur (89%), Delhi (87%), Uttarakhand (84%), Andhra Pradesh (84%), and Punjab (83%).

11.8. Management of Babies exposed to HIV and/ or Syphilis infection

Infants born to mothers living with HIV or syphilis—termed "exposed babies"—need specialized care until their infection status is confirmed. These new-borns face a higher risk of illness and death, making early interventions, timely prophylaxis, and regular monitoring essential to secure infection-free survival and healthy development.

11.8.1. Management of HIV-Exposed babies

Under EVTHS interventions, HIV-exposed infants receive a package of care including antiretroviral (ARV) prophylaxis, prophylaxis for opportunistic infections (OIs), Early Infant Diagnosis (EID) at recommended intervals, counselling on infant feeding, and assessment of growth and development. Infants diagnosed with HIV, are

promptly initiated on treatment. Among these, ARV prophylaxis and EID are two critical interventions, discussed in detail below.

11.8.2. ARV Prophylaxis:

Postnatal antiretroviral drugs (either single or dual based on maternal plasma viral load) are provided to all infants exposed to HIV to reduce the risk of perinatal HIV transmission. In FY 2024-25, out of 13,259 live births, 13,131 infants (99%) received ARV prophylaxis. ARV prophylaxis coverage has significantly improved, rising from 85% in FY 2020-21 to 99% in FY 2024-25, underscoring the program's success in protecting at-risk new-borns.

11.8.3. Early Infant Diagnosis (EID):

The first Early Infant Diagnosis (EID) of HIV, conducted at 6 weeks of age (42 days), serves as a critical indicator for assessing perinatal HIV transmission and the effectiveness of the EVTHS programme. During the reporting period, it is estimated that, total of 17,965[2] HIV-exposed infants were eligible for the first EID test, of which 11,790 (66%) underwent testing within the 6–8-week. The EID testing targets are based on live births among estimated pregnant women. An additional 2,427 babies were tested between 8 weeks and 6 months of age, bringing the overall first EID testing coverage to 79% within 6 months.

State-wise analysis highlights notable variation in both testing coverage and outcomes. High-performing states and UTs such as Haryana (114%), Nagaland (104%), Mizoram (102%), Maharashtra (88%), Delhi (76%), and Gujarat (74%) demonstrated strong testing performance, reflecting well-established sample collection and follow-up systems. Several states, including Karnataka, Andhra Pradesh, Meghalaya, Madhya Pradesh, Delhi, Gujarat, Chhattisgarh, and Tamil Nadu, achieved 100% ART initiation among HIV-positive infants, ensuring timely treatment linkage and improved clinical outcomes.

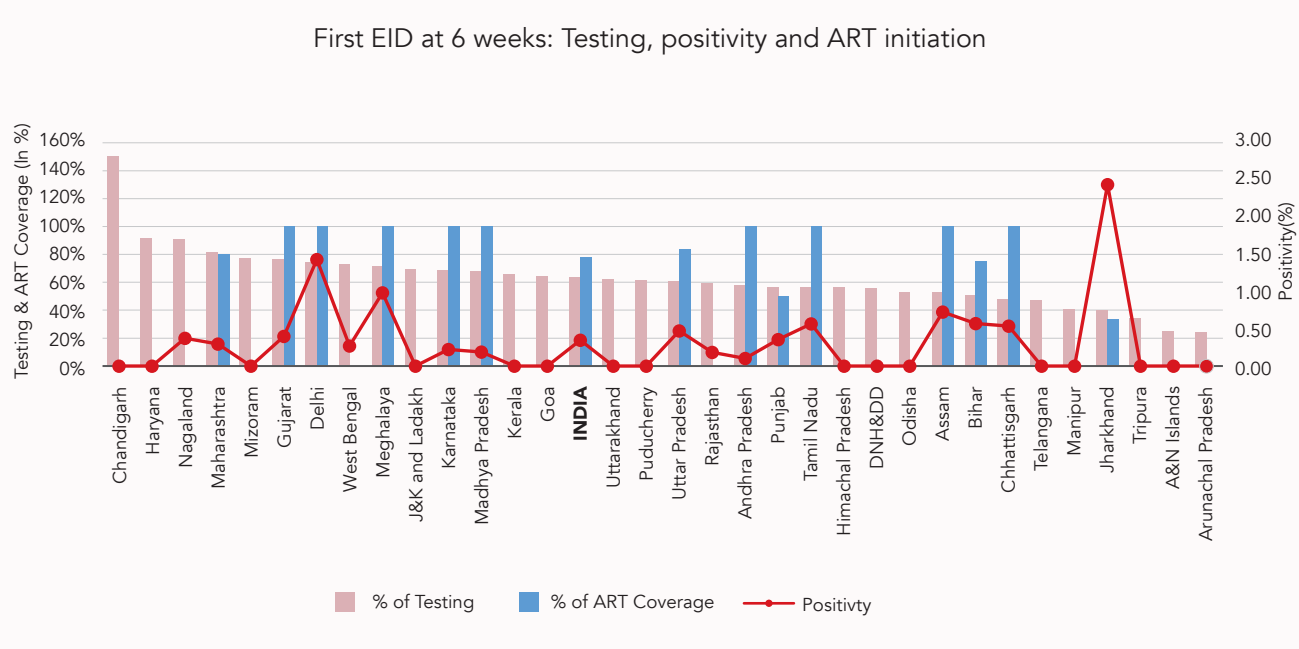
In contrast, Tripura (43%), Jharkhand (41%), Manipur (45%), and Telangana (47%) reported lower testing coverage, indicating the need to strengthen early infant testing mechanisms, sample transport, and follow-up systems. The highest positivity rates were observed in Jharkhand (2.44%), Delhi (1.43%), and Meghalaya (0.99%), all exceeding the national average of 0.35%.

However, several states and UTs — including Andaman & Nicobar, Goa, Haryana, Kerala, Nagaland, and Uttarakhand — despite achieving moderate to high testing coverage, reported 0% ART initiation, suggesting possible delays in confirmatory testing, result communication, or post-test linkage to care.

Overall, while national-level performance reflects underreporting, which is being streamlined via SOCH line list. The observed drop in coverage compared with previous reporting periods is primarily attributed to a change in the denominator, with the current period using live births to calculate coverage as per EVTHS targets. Strengthening early identification, ensuring timely confirmatory testing, and improving ART linkage at the point of diagnosis will be crucial for achieving universal EID coverage and eliminating paediatric HIV infections in India. Overall, the findings highlight strong national-level progress in testing coverage (66%), but with gaps in ART linkage (78%) and significant interstate disparities in both positivity and treatment initiation (figure 11.10).

[2] It is estimated that there will be 10% pregnancy wastage. Hence, around 90% of live births among estimated pregnant women are considered for Babies eligible for EID

Figure 11.10 State/UT-wise distribution of 1st EID test at 6 weeks; Testing, positivity and ART initiation (%) FY 2024-25.



Jharkhand reported the highest Early Infant Diagnosis (EID) positivity rate of 2.44%, followed by Delhi (1.43%), Meghalaya (0.99%), and Bihar and Tamil Nadu (0.57% each). These figures highlight regions with relatively higher risks of perinatal HIV transmission, emphasizing the need to strengthen maternal counselling, adherence support, and follow-up mechanisms to ensure early testing and prompt treatment initiation.

In terms of testing performance, Chandigarh (196%), Haryana (114%), Nagaland (104%), and Mizoram (102%) demonstrated high testing coverage, reflecting efficient sample collection, tracking, and follow-up of HIV-exposed infants. Furthermore, Andhra Pradesh, Assam, Chhattisgarh, Delhi, Gujarat, Karnataka, Madhya Pradesh, Meghalaya, and Tamil Nadu achieved 100% ART initiation among all identified HIV-positive infants, indicating robust linkage to treatment and timely clinical management. These results underscore the programme's success in ensuring early initiation of ART, which is vital for improving survival outcomes and reducing HIV-related morbidity among infants.

11.8.4. Second EID (6 months-12 months) and Third EID (12 months- 18 months)

While the first Early Infant Diagnosis (EID) helps rule out perinatal HIV transmission, the second and third EID tests, conducted at six and twelve months, are essential to detect ongoing HIV risk through breastfeeding. Parents are counselled on the importance of adhering to these timelines, though the health system allows flexibility for testing whenever infants access care. During these follow-up EID tests, infants undergo three parallel antibody tests, and any reactive result is confirmed using TNA-PCR.

a) **During the second EID testing phase (6–12 months),** out of a national target of 17,785 infants (estimates), 11,726 were tested, achieving 66% coverage. This indicates that nearly two-thirds of the HIV-exposed infants underwent follow-up testing, although some gaps persist in certain states. Haryana (117%), Nagaland (101%), Mizoram (98%), Meghalaya (88%), and Maharashtra (87%) demonstrated strong performance, achieving or surpassing the national average, while Puducherry (104%) exceeded its target. In contrast, states like Himachal Pradesh (3%), Tripura (19%), and Chhattisgarh (37%) showed low coverage, indicating the need to strengthen tracking and early follow-up of HIV-exposed infants.

The overall positivity rate at this stage was 0.66%, with 77 infants confirmed positive, and 69 (90%) initiated on ART. Uttarakhand (2.94%), Odisha (2.72%), Jharkhand (2.27%), Madhya Pradesh (1.69%), and Delhi (1.57%) reported positivity rates higher than the national average, underlining localized

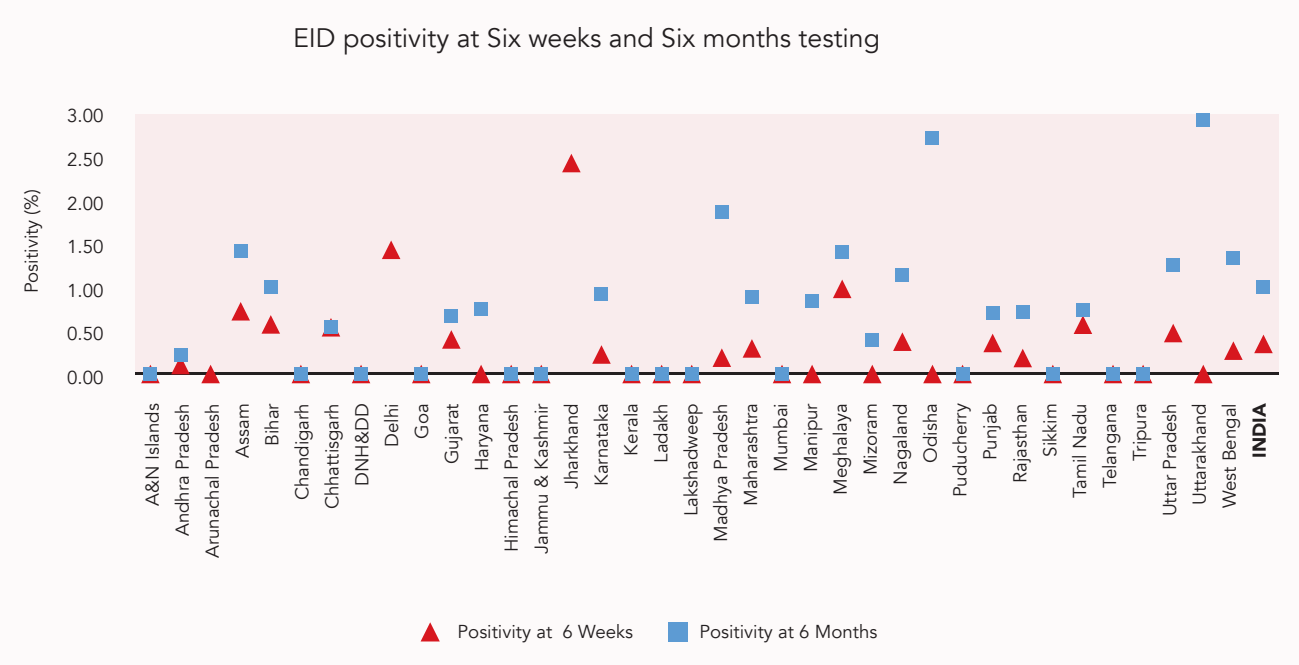
transmission concerns and the importance of sustained postnatal HIV prevention, maternal counselling, and follow-up mechanisms.

b) **During the third EID testing phase (12–18 months),** out of a national target of 17,607(estimates) infants, 9,973 were tested, achieving 57% testing coverage. Although lower than the earlier phase, this still represents consistent efforts toward ensuring continued follow-up of HIV-exposed infants. States such as Chandigarh (140%), Haryana (99%), Mizoram (83%), Maharashtra (77%), and Puducherry (65%) demonstrated strong testing performance, indicating effective tracking and coordination by the respective state programs. In contrast, Chhattisgarh (20%), Himachal Pradesh (30%), and Manipur (33%) recorded low coverage, highlighting the need for strengthened follow-up systems and coordination between testing and ART centres.

The national positivity rate stood at 0.59%, with 59 infants confirmed HIV positive, of whom 53 (90%) were successfully initiated on ART. Higher positivity rates were observed in Tripura (6.25%), Jharkhand (1.82%), West Bengal (1.75%), Meghalaya (1.65%), Odisha (1.14%), and Maharashtra (0.90%), indicating localized risks of perinatal HIV transmission. ART initiation was lower in states such as Meghalaya (50%), Odisha (50%), and Rajasthan (50%), signalling the need to strengthen referral linkages and ensure timely ART initiation for all identified positive infants.

Overall, while testing coverage has been maintained across several high-burden states, interstate disparities remain a concern. Strengthening postnatal tracking, mother-infant pair follow-up, and timely testing at each EID stage will be essential to achieving universal coverage and eliminating paediatric HIV infections in India.

Figure 11.11. State/UT-wise positivity at Six weeks and Six months, FY 2024-25



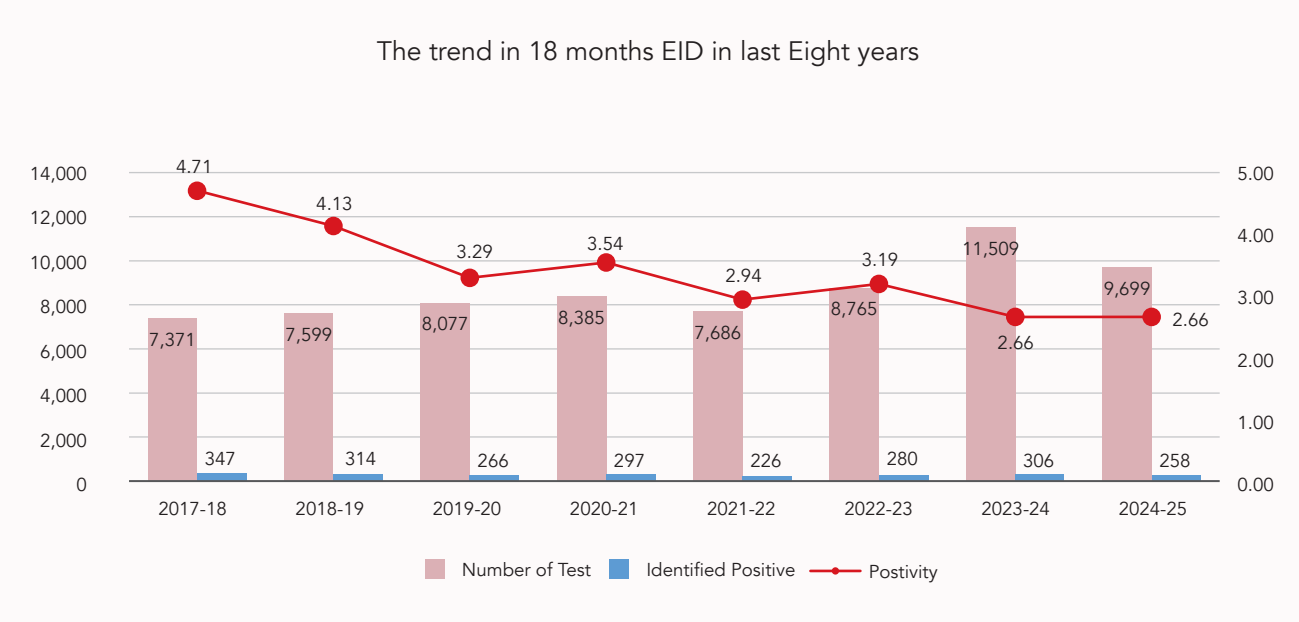
The overall high uptake of the second and third EID tests, coupled with low positivity rates, indicates a successful retention of mother-baby pairs within the care cascade. The latest EVTHS guidelines emphasize the importance of coordinating maternal ART refills and follow-up appointments with EID to ensure comprehensive HIV care for both mothers and infants. This alignment enables healthcare professionals at ART canters and ICTC facilities to provide essential support to these families.

11.8.5. Final EID at 18 months or 3 months after cessation of breastfeeding whichever is later

The HIV status of an HIV-exposed child is confirmed at 18 months of age or three months after the complete cessation of breastfeeding, whichever is later. Figure 11.12 illustrates the trend in 18-month testing, showing a steady improvement in coverage over the years. At the same time, positivity rates have gradually declined, even though the absolute number of HIV-positive cases among children has remained relatively stable. This indicates that the provision of care and preventive measures are improving, resulting in better health outcomes for HIV-exposed infants.

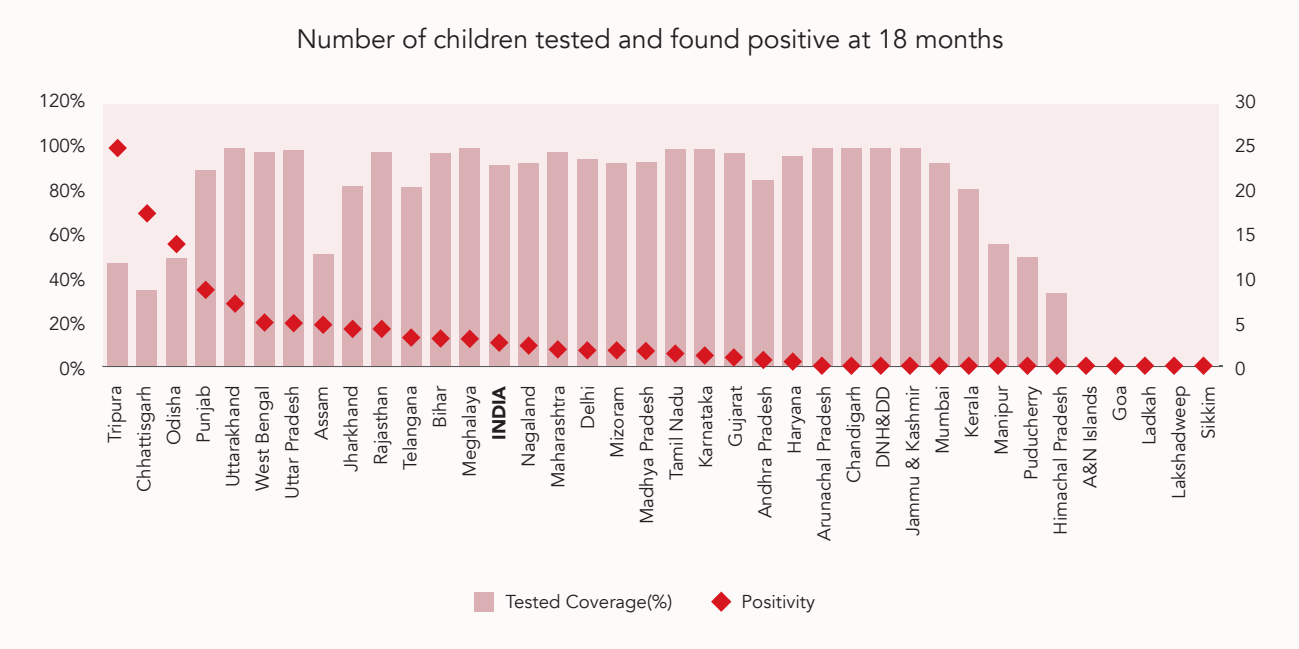
In FY 2024–25, Compared to the previous year, the number of children tested decreased from 11,509 in 2023–24 to 9,699 in 2024–25, while the positivity rate remained unchanged at 2.66%.

Figure 11.12. The trend in 18 months EID in last eight years



Looking at the longer trend, testing numbers have varied over the last seven years, with 8,385 children tested in 2020–21, 7,686 in 2021–22, 8,765 in 2022–23, rising to 11,509 in 2023–24 before dipping again in 2024–25. Positivity rates followed a downward path, from 3.54% in 2020–21 to 2.94% in 2021–22, 3.19% in 2022–23, and stabilising at 2.66% over the last two years. This overall pattern suggests that while testing coverage fluctuates, prevention efforts are effective in keeping infection rates among infants from rising.State/UTs wise distribution of 18 months testing among HIV Exposed infants and positivity for the FY 2024-25 is given in the following figure 11.13.

Figure 11.13 Number of children tested and found positive (State/UT -wise) at 18 months, FY 2024-25



11.8.6. Summary of Early Infant Diagnosis (EID):

During FY 2024–25, a total of 45,615 Early Infant Diagnosis (EID) tests were conducted across various infant age milestones, resulting in the identification of 460 HIV-positive cases, with an overall positivity rate of 1.01%. Of these, 331 children (72%) were initiated on ART. At the first visit (around 6 weeks of age), 11,790 infants were tested, and identifying 41 positive cases (0.35%), of which 78% (32) were initiated on ART. In the second phase (2 to 6 months), 2,427 infants were tested, with 25 found positive (1.03%) and 80% (20) of them initiated on ART. The third testing window (6 to 12 months) involved 11,726 tests with a positivity rate of 0.66% (77 cases), and 90% (69) of those were started on ART. Similarly, in the third visit window (12 to 18 months), 9,973 children were tested, identifying 59 positive cases (0.59%), with 90% (53) ART initiation.

The final testing window (18 months or later) saw the highest positivity rate of 2.78%, where 9,699 children were tested, 258 found positive, and 61% (157) of them were initiated on ART. Since all children are retested at 18 months irrespective of earlier EID outcomes, the number of positive cases at this stage may include those previously diagnosed.

Overall, the data highlights the importance of timely testing and prompt ART initiation to ensure early intervention and better clinical outcomes for HIV-exposed infants.

Table 11.2. Summary of EID testing, FY 2024-25

Visit of Babies	Tested	Positive	Positivity	Initiated on ART	ART initiation
First Visit (at 6 weeks)	11,790	41	0.35%	32	78%
First Visit (2 months - 6 months)	2,427	25	1.03%	20	80%
Second Visit (6 months - 12 months)	11,726	77	0.66%	69	90%
Third Visit (12 months - 18 months)	9,973	59	0.59%	53	90%
Fourth Visit (18 months or later)	9,699	258	2.66%	157	61%
Total EID test	**45,615**	**460**	**1.01%**	**331**	**72%**

11.8.7. Management of Syphilis-Exposed Babies

Syphilis-exposed infants require regular follow-up, including clinical evaluations and serological tests, to monitor for potential complications. Diagnosis of congenital syphilis relies on clinical examination and follow-up investigations. Infants diagnosed with congenital syphilis should receive appropriate treatment immediately. Inj. Crystalline Penicillin continues to be the first-line treatment, with dosage determined by the infant's age and the severity of the infection.

In FY 2024–25, a total of 212 infants were identified with congenital syphilis across the country, of whom 189 (89%) received treatment. Over the last five years, the national treatment rate has fluctuated, ranging from 63% in 2020–21 to 57% in 2021–22, rising to 76% in 2022–23, then sharply declining in 2023–24, before recovering in 2024–25. Out of the 212 babies identified with congenital syphilis in FY 2024–25, 189 babies (89%) received treatment with at least one dose of benzathine penicillin G (BPG). There was considerable variation across states. Several states and UTs, including Madhya Pradesh (100%), Kerala (100%), Gujarat (97%) and Uttarakhand (80%) achieved full or near-full treatment coverage. In contrast, states such as Chhattisgarh (53%), Jharkhand (55%), Meghalaya (64%), and Arunachal Pradesh (67%) reported considerably lower coverage as given in table 11.4. This variation highlights the need for strengthening syphilis screening, ensuring timely testing, and improving treatment linkages in these areas are critical to achieving equitable care for all pregnant women and advancing the national goal of eliminating congenital syphilis

State-wise data shows significant variation in treatment response. Gujarat, Maharashtra, Karnataka, Madhya Pradesh, Odisha, Rajasthan, Tamil Nadu, Telangana, Punjab, and West Bengal achieved near-universal treatment of reported congenital syphilis cases in 2024–25, reflecting strong program performance. By contrast, states such as Andhra Pradesh, Bihar, Haryana, and Chandigarh reported zero treatment despite documented cases, indicating programmatic gaps. Some states with small numbers, including Arunachal Pradesh, Nagaland, Jharkhand, Kerala, and Mizoram, reported partial coverage.

The EVTHS guidelines 2024 recommend follow-up of syphilis-exposed babies at SNCU at birth, with subsequent paediatric care visits at 14 weeks and later. Integration of these services with the general health system will be critical to ensuring continuity of care and improving postnatal outcomes for syphilis-exposed infants.

Table 11.3. States-UTs wise congenital syphilis treatment FY 2020-21 to FY 2023-24 (Source HMIS)

S.No	State/UT	Number of babies Found Congenital Syphilis					Number of Babies Treated					Percentage of Babies Treated				
		2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
1	A&N Islands	0	0	0	0	0	0	0	0	0	0	-	-	-	-	-
2	Andhra Pradesh	67	125	6	48	0	67	75	6	15	0	100%	60%	100%	31%	-
3	Arunachal Pradesh	55	0	1	6	3	0	1	0	16	2	0%	-	0%	267%	67%
4	Assam	1	1	15	4	2	1	1	15	31	2	100%	100%	100%	775%	100%
5	Bihar	125	7	108	42	0	125	0	98	86	0	100%	0%	91%	205%	-
6	Chandigarh	3	3	0	1	0	1	3	0	1	0	33%	100%	-	100%	-
7	Chhattisgarh	75	156	65	31	17	22	48	14	48	9	29%	31%	22%	155%	53%
8	DNH & DD	44	4	0	0	0	0	4	0	0	0	0%	100%	-	-	-
9	Delhi	2	20	6	10	10	0	17	5	89	8	0%	85%	83%	890%	80%
10	Goa	1	0	0	4	0	1	0	0	4	0	100%	-	-	100%	-
11	Gujarat	1,135	473	602	208	37	376	348	559	151	36	33%	74%	93%	73%	97%
12	Haryana	0	29	65	80	0	0	29	34	5	0	-	100%	52%	6%	-
13	Himachal Pradesh	3	2	0	2	0	3	2	2	2	0	100%	100%	-	100%	-
14	Jammu & Kashmir	0	1	0	0	0	0	1	0	20	0	-	100%	-	-	-
15	Jharkhand	9	0	1	0	11	9	0	1	0	6	100%	-	100%	-	55%
16	Karnataka	228	384	417	933	3	97	293	217	347	3	43%	76%	52%	37%	100%
17	Kerala	3	3	7	8	3	2	3	6	5	3	67%	100%	86%	63%	100%
18	Ladakh	0	0	0	0	0	0	0	0	0	0	-	-	-	-	-
19	Lakshadweep	0	0	0	0	0	0	0	0	0	0	-	-	-	-	-
20	Madhya Pradesh	19	48	18	102	14	11	23	8	67	14	58%	48%	44%	66%	100%
21	Maharashtra	477	17	399	836	34	476	14	375	194	34	100%	82%	94%	23%	100%
22	Manipur	1	0	0	0	1	1	0	0	0	0	100%	-	-	-	0%
23	Meghalaya	74	114	80	131	11	68	90	73	95	7	92%	79%	91%	73%	64%
24	Mizoram	0	30	2	8	9	0	3	2	20	9	-	10%	100%	250%	100%
25	Nagaland	0	1	2	14	3	0	1	1	15	3	-	100%	50%	107%	100%
26	Odisha	4	9	5	35	9	1	8	4	31	9	25%	89%	80%	89%	100%
27	Puducherry	0	0	0	0	0	0	0	0	0	0	-	-	-	-	-
28	Punjab	5	2	5	12	8	5	0	5	8	8	100%	0%	100%	67%	100%
29	Rajasthan	1,104	461	477	186	2	1,104	373	263	90	2	100%	81%	55%	48%	100%
30	Sikkim	1	0	0	0	0	0	0	0	1	0	0%	-	-	-	-
31	Tamil Nadu	14	20	5	8	5	14	5	2	8	5	100%	25%	40%	100%	100%
32	Telangana	38	155	66	199	1	32	21	66	361	1	84%	14%	100%	181%	100%
33	Tripura	1	0	1	1	0	1	0	1	1	0	100%	-	100%	100%	-
34	Uttar Pradesh	1,143	327	302	17	14	478	11	172	9	14	42%	3%	57%	53%	100%
35	Uttarakhand	0	8	3	2	5	0	5	0	2	4	-	63%	0%	100%	80%
36	West Bengal	12	58	403	59	10	12	10	403	22	10	100%	17%	100%	37%	100%
India		**4,644**	**2,458**	**3,061**	**2,987**	**212**	**2,909**	**1,389**	**2,332**	**1,174**	**189**	**63%**	**57%**	**76%**	**58%**	**89%**

11.9. A way forward

A strong collaborative approach between the National AIDS Control Programme (NACP) and the National Health Mission (NHM) continues to advance comprehensive mother–child care under the Elimination of Vertical Transmission of HIV and Syphilis (EVTHS) initiative. State AIDS Control Societies (SACS) are working closely with State NHM teams to ensure universal HIV and syphilis screening for all pregnant women, timely linkage of infected mothers to EVTHS interventions, and appropriate follow-up care for all exposed infants.

Moving forward, a mission-mode approach will further strengthen this collaboration, ensuring 100% reporting through SOCH, seamless service delivery, and comprehensive monitoring of every mother–baby pair. The focus remains on convergence, accountability, and preventing every new case of vertical transmission of HIV and syphilis in India.

12

LABORATORY SERVICES



LABORATORY SERVICES

12.1. Viral Load Testing

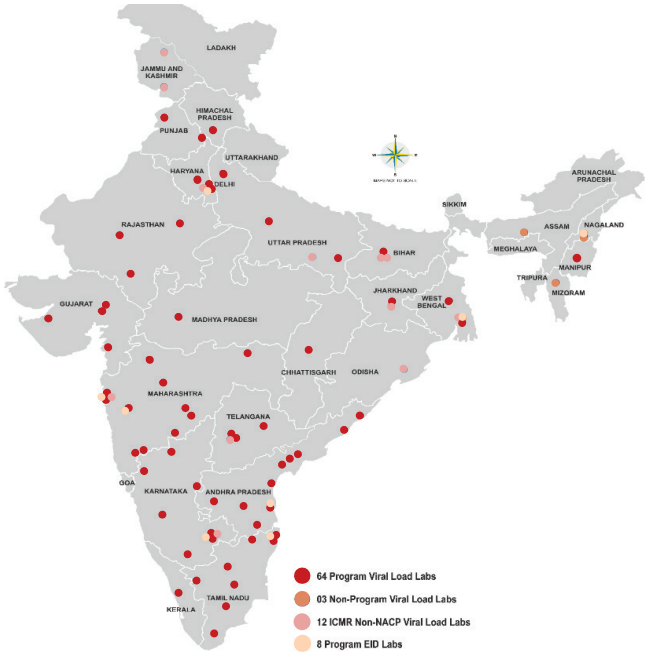
HIV-1 Viral load (VL) testing enables the monitoring of treatment effectiveness, detection of treatment failure, and the need to switch to second-line ART drugs thus, reducing drug resistance mutations and improving clinical outcomes. The implementation of VL testing as a part of routine care under the national programme is offered through a network of Viral load laboratories across the country. In order to meet the increasing demand, NACO has made significant strides in integrating its laboratory network with existing molecular capacities under the Ministry of Health and Family Welfare (MoHFW). This strategic integration enhances the national HIV-1 VL test capacity while optimizing the resources.

At present, 77 Viral load labs (64 NACO supported, 3 reagent rental model and 10 PCR machines installed by ICMR during COVID-19 pandemic) are functional and offering routine HIV Viral load testing. These laboratories are optimally utilised through systematic mapping and linkages with all ARTCs. All the States have hired sample transportation agency and samples are being transported to their linked Viral load labs in cold chain within the timeline.

One of the important initiative the division has undertaken to minimise sample rejection is the training of ART lab technicians on sample collection and packaging. To strengthen the lab clinical interface, Experience Sharing, Review and Trainings (ESRTs) were conducted in the last financial year, which helped the programme in monitoring key performance indicators of the labs, understanding the challenges faced and addressing them in a timely manner.

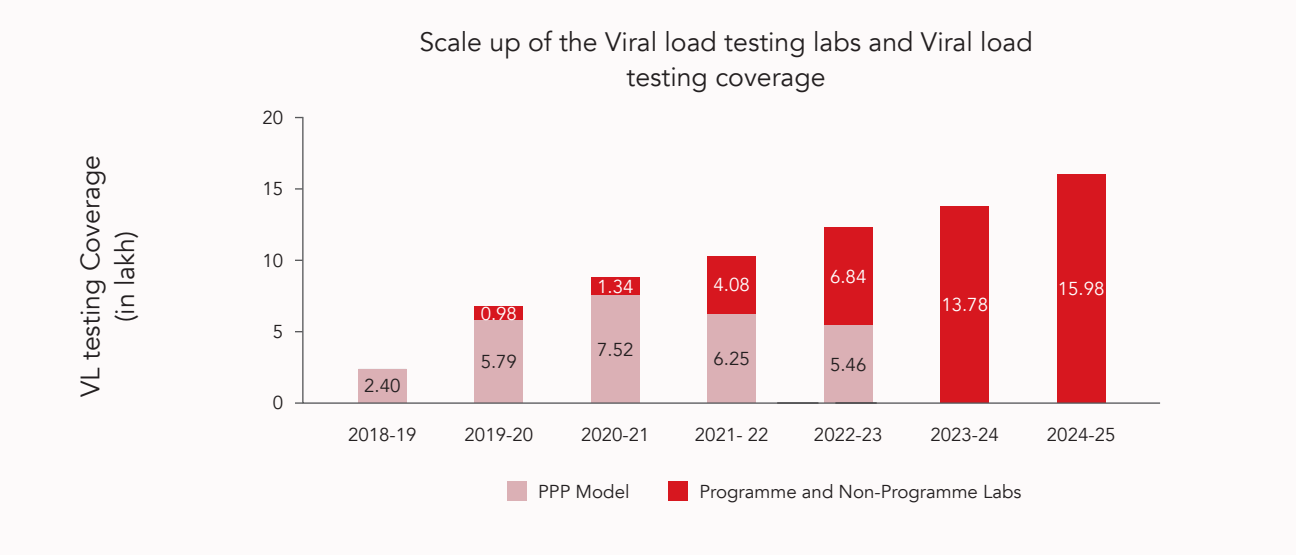
The below figure 12.1 illustrates the distribution of Viral load laboratories across India. As part of the scale-up, all the ART laboratory technicians are trained on Viral load sample collection, separation of plasma, packaging and transporting to their linked Viral load labs.

Figure 12.1. Distribution of Viral load Laboratories and EID Laboratories



Around 70.42 lakh Viral load tests were done cumulatively between FY 2018-19 and 2024-25 under NACP (figure 12.2). The number of Viral load tests is increasing every year. As is evident from figure 12.2, the VL testing was conducted by both programme labs and PPP model from FY 2018-19 until FY 2022-23. However, since FY 2023-24 onwards, the programme and non-programme VL labs conducted around 13.78 lakh (during FY 2023-24) and 15.98 lakh (during FY 2024-25).

Figure 12.2. Scale up of the Viral load testing labs and Viral load testing coverage under NACP, from FY 2018-19 to FY 2024-25



12.2. CD4 testing

Under the programme, CD4 testing is performed to determine the baseline immune status of the PLHIV, to monitor the treatment failure especially in case of HIV-2 infections, to initiate prophylaxis for Opportunistic Infections (OIs) and as per the Medical Officer's discretion.

As per the current testing guidelines, CD4 monitoring can be discontinued for any patient (except children aged <5 yrs.), if CD4 count is more than 350 cells/cu mm and Viral load count is less than 1000 copies/mL (when both tests are conducted at the same time). However, CD4 testing can be initiated if the patient has been switched to a different regimen due to treatment failure (Plasma Viral load ≥1000 copies/ml) or when deemed necessary for clinical management by the Medical Officer at any point of time. There are 460 functional CD4 testing machines (including both labs based and point of care) under NACP.

Figure 12.3 shows the CD4 testing over the last four years. CD4 testing has shown a declining trend since 2021-22. State/UT-wise CD4 testing and Viral load conducted during FY'2024-25 is shown in table 12.1. As can be seen from figure 12.3, around 8.38 lakh CD4 tests were done in the FY 2024-25.

Further, table 12.1 can be referred for State/UT-wise CD4 and Viral load tests conducted in the FY 2024-25.

Figure 12.3. Year wise CD4 testing coverage from FY' 2021-22 to FY' 2024-25

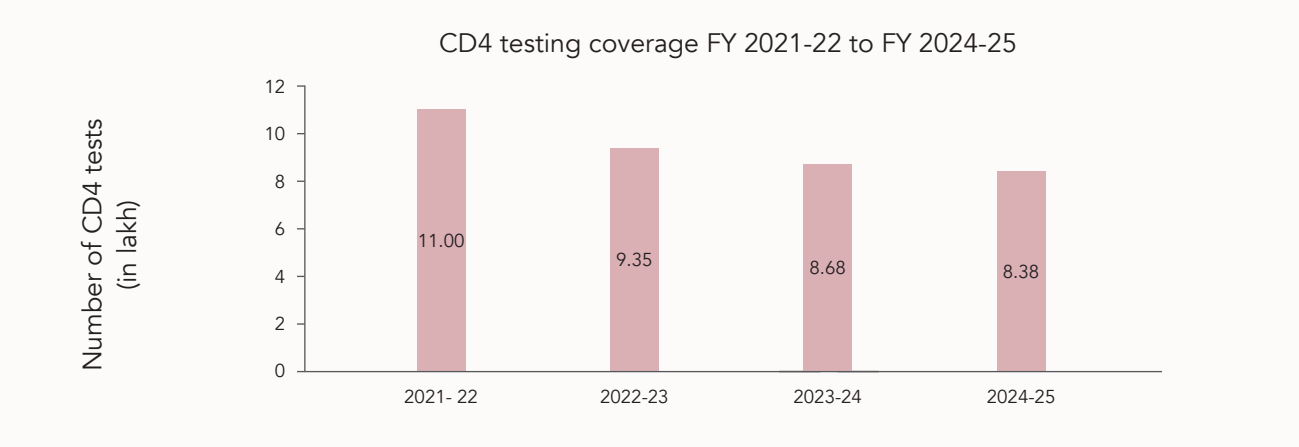


Table 12.1. State/UT-wise distribution of CD4 tests and Viral load tests done, FY 2024-25

S. No.	State/UT(SACS/DACS)	Total number of CD4 tests conducted in FY' 2024-25	Number of Viral load test conducted by 77 programme and non-programme VL labs for FY 2024-25
1	A&N Islands	52	202
2	Andhra Pradesh	62,041	2,33,367
3	Arunachal Pradesh	1,007	493
4	Assam	11,331	11,419
5	Bihar	15,158	44,500
6	Chandigarh	5,115	6,488
7	Chhattisgarh	6,220	17,424
8	DNH & DD	0	436
9	Delhi	29,888	38,172
10	Goa	1,774	3,475
11	Gujarat	61,260	85,880
12	Haryana	12,115	28,126
13	Himachal Pradesh	6,605	5,900
14	Jammu & Kashmir	3,255	2,759
15	Ladakh		
16	Jharkhand	5,675	14,351
17	Karnataka	1,11,368	1,91,954
18	Kerala	9,786	17,440
19	Madhya Pradesh	27,096	42,427
20	Maharashtra	99,694	2,29,255

Table continued....

...Table continued.

S. No.	State/UT(SACS/DACS)	Total number of CD4 tests conducted in FY' 2024-25	Number of Viral load test conducted by 77 programme and non-programme VL labs for FY 2024-25
21	Manipur	6,238	13,598
22	Meghalaya	3,576	5,370
23	Mizoram	7,775	16,103
24	Mumbai	24,534	46,603
25	Nagaland	9,329	12,007
26	Odisha	8,623	19,853
27	Puducherry	1,044	1,278
28	Punjab	37,256	43,962
29	Rajasthan	34,756	46,890
30	Sikkim	502	372
31	Tamil Nadu	97,261	1,40,075
32	Telangana	43,401	1,12,616
33	Tripura	2,441	2,704
34	Uttar Pradesh	56,767	1,01,528
35	Uttaranchal	4,664	5,268
36	West Bengal	30,596	55,883
India		**8,38,203**	**15,98,178**

12.3. Early Infant diagnosis (EID):- HIV-1 PCR laboratories tests for children under 18 Months

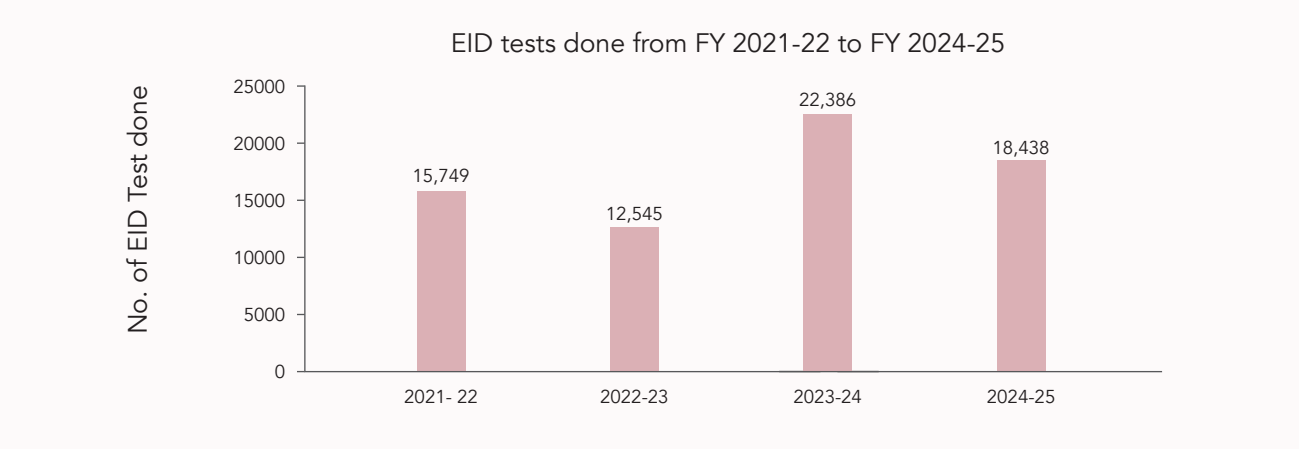
Under the National AIDS and STD Control Programme, EID testing is done to diagnose HIV-1 infection in infants and children aged <18 months. HIV exposed infants cannot be tested using standard HIV antibody tests due to the presence of maternal antibodies (transferred during pregnancy or labour or breast feeding) and absence of self-generated antibodies early in life.

The current test of choice is the HIV Total nucleic acid-polymerase chain reaction (TNA-PCR) for which a network of eight laboratories have been strengthened to cater to testing demand and maintain turnaround time (TAT).

All eight EID laboratories in FY' 2024-25 (AIIMS-New Delhi, ICMR-NITVAR -Pune, NIMHANS-Bengaluru, NIRT-Chennai, Kasturba-Mumbai, NIRBI-Kolkata, NHAK Kohima, Nagaland and SPSR Govt General Hospital Nellore, Andhra Pradesh) conducted the testing. All these eight labs successfully participated in international EQA which is a bi-annual activity. These labs test the PT samples within the defined time and submit the report on the portal. All the labs obtained the satisfactory report.

The number of EID tests conducted over the last four years is represented in figure 12.4.

Figure 12.4. Year wise EID testing coverage from FY 2021-22 to FY 2024-25



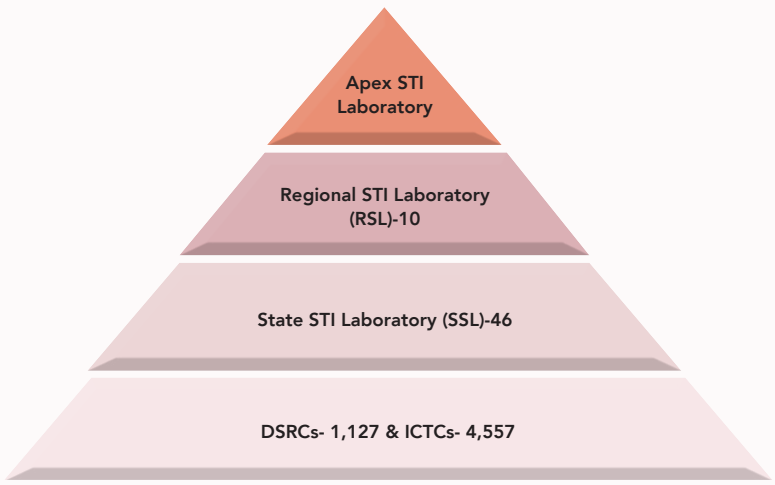
12.4. Sexually Transmitted Infection (STI)

Towards achieving the 95-95-95 targets and the goal of ending the AIDS epidemic as a public health threat by 2030 in line with Sustainable Development Goal (SDG), the 4th goal of National AIDS and STD Control Programme (NACP) Phase-V emphasizes universal access to quality Sexually Transmitted Infections /Reproductive Tract Infections (STI/RTI) services especially to high risk and vulnerable population besides elimination of vertical transmission of HIV and Syphilis. The STI diagnostic services under the programme are offered by screening at the field setting and confirmation by a network of laboratories.

The STI Laboratory Network operates in a tiered system to ensure comprehensive diagnostic and surveillance services for Sexually Transmitted Infections (STIs). At the top of the pyramid is the Apex STI Laboratory (Tier 1), managing EQA, training, handling complicated cases, serving as a collaborating Centre with WHO for surveillance in STIs such as EGASP and also international EQA. The tier two consists of 10 Regional STI Labs (RSL) [including Apex laboratory] to support routine referral diagnostics, surveillance, manage EQA and mentor their linked 46 State STI Lab (SSL). The State STI Laboratories (Tier 3) provide state-level diagnostics, culture sensitivity). The DSRC and ICTC (Tier 4), offer syndromic management, basic diagnostics, and referrals. This hierarchical structure ensures standardized care, quality control, and capacity building under NACP. Refer figure 12.5 for the STI laboratory tiered network under NACP.

In the FY' 2024-25, 10 Regional STI reported 1,701 Syphilis and 386 *Neisseria gonorrhoeae* positive samples.

Figure 12.5. Tiered structure of STI Laboratory network under NACP



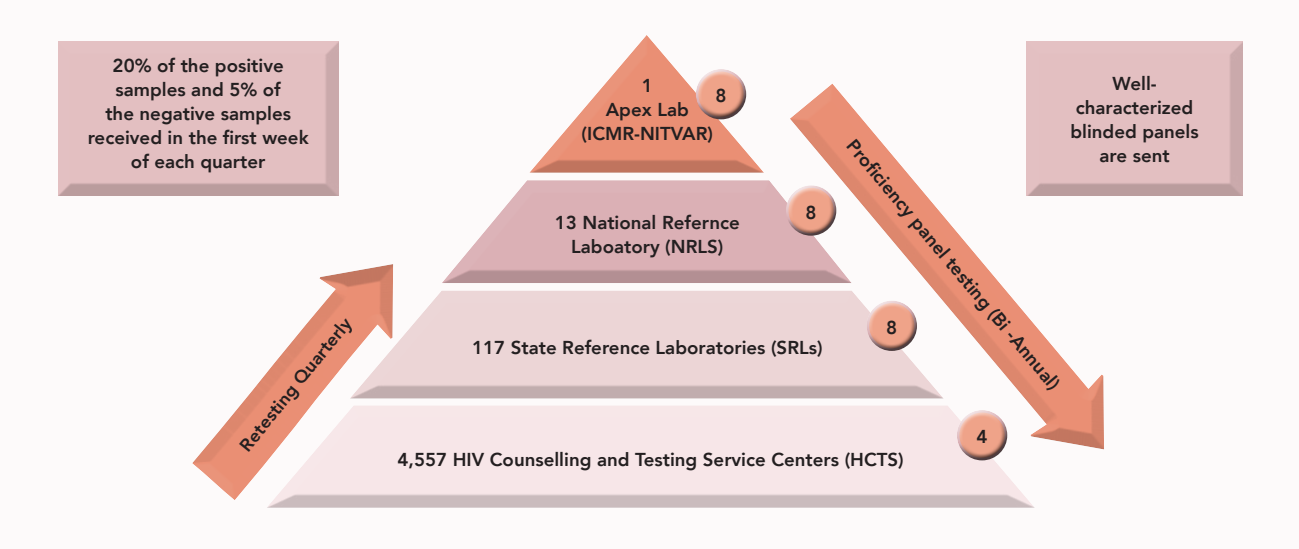
12.5. Quality Management under NACP

Quality in medical laboratories is crucial for patient safety and effective healthcare delivery. High-quality laboratory services ensure that results are accurate and reliable, which directly affects clinical decision-making and patient outcomes are achieved through effective quality management systems (QMS) and adherence to international standards. Currently, EQA is done for HIV serology, HIV-1 Viral load, Early Infant Diagnosis (EID), CD4, Syphilis (RPR, TPHA, VDRL) and culture and antimicrobial sensitivity for *Neisseria gonorrhoeae*.

12.5.1. External Quality Assessment (EQA) for HIV Serology:

Proficiency Testing (PT) for HIV serology is implemented through a structured three-tier pyramidal framework comprising an Apex Laboratory, National Reference Laboratories (NRLs), and State Reference Laboratories (SRLs), extending down to the Confirmatory Sites/ Integrated Counselling and Testing Centres (ICTC/ HCTS Centre), as illustrated in the figure 12.6.

Figure 12.6. External Quality Assessment (EQA) system for HIV Serology under NACP



The EQA for HIV serology i.e. panel testing and retesting/reverse testing are the two mechanisms followed to check and ensure the quality of test result, handling of lab technicians putting up the test and to check the quality of test kit.

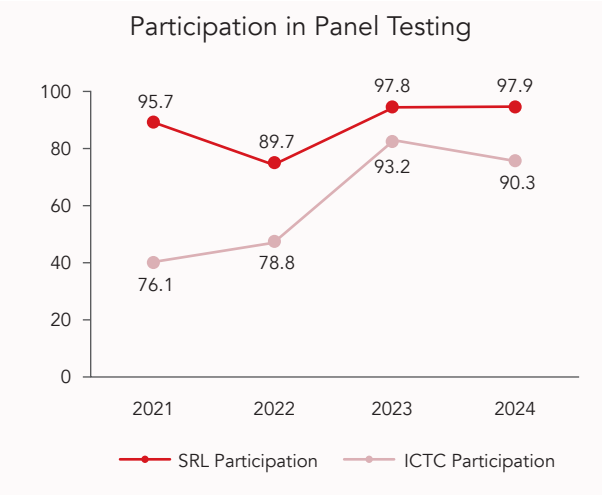
a. Panel Testing: Well characterized blinded panels are sent biannually from the Apex lab to NRL (8-member panel), NRL to SRL (8-member panel) and SRL to ICTC (4-member panel).

   In the year 2024, 100% NRL participated in panel testing with 100% satisfactory results. Participation and performance of SRL and ICTC in panel testing in the last four years is depicted in figure 12.7. As per the figure participation of SRL in panel testing was 97.9% and that of ICTC was 90.3%. Both SRL and ICTC showed a concordance result of 99.6%. The data for the panel testing was uploaded on NACO Prayogshala.

b. Re-testing/reverse testing is a process where confirmatory sites/ ICTC send already tested 20% positive and 5% negative samples received in 1st seven working days of each quarter (April, July, October, January) to their linked SRL for re-confirmation/ re-checking of the results. The participation of ICTC in FY' 2024-25 shows a slight decline (figure 12.7. a) as compared to that of last year. Figure 12.8 shows the participation of ICTC in the re-testing/ reverse testing and results thereof over the years. Participation and performance of ICTC in re-testing is consistent in the last two years

Figure 12.7. Participation in panel testing and concordance results, from year 2021 to 2024

a. SRL and ICTC participation in panel testing (in %)



b. Concordance at SRL & ICTC (in %)

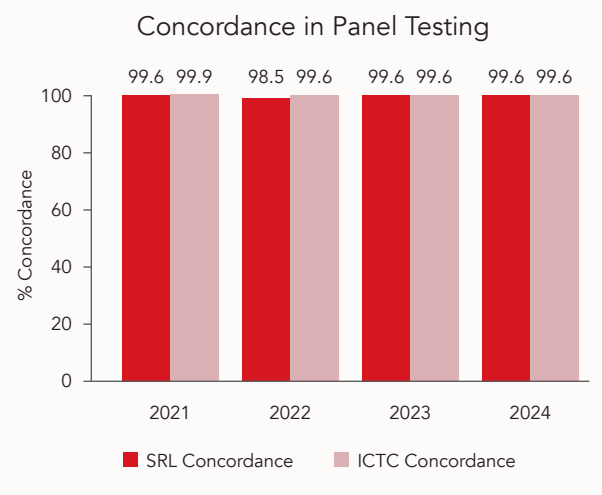
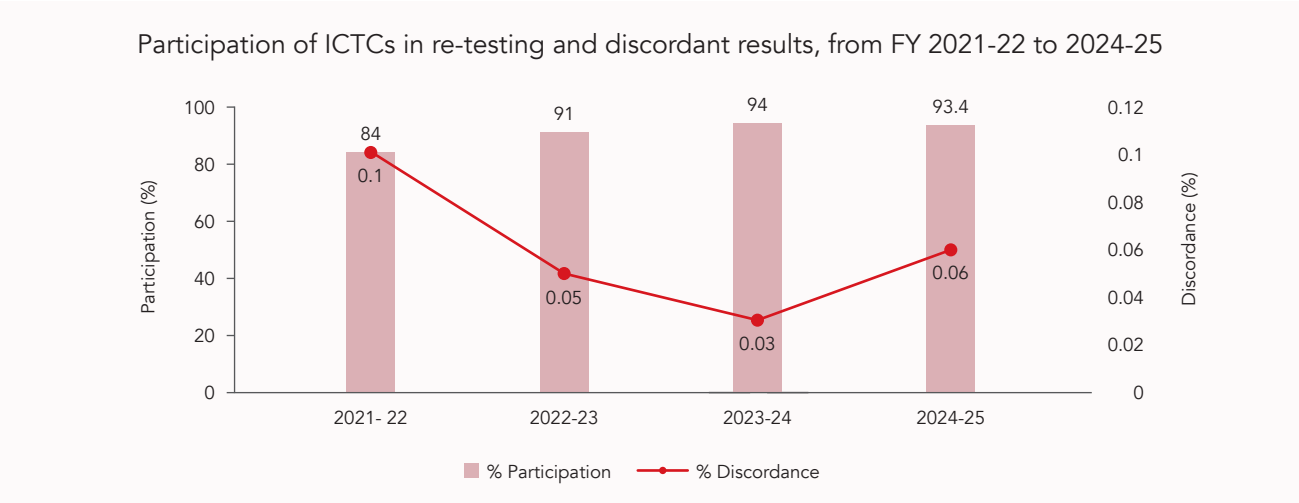


Figure 12.8. Participation of ICTCs in re-testing and discordant results, from FY 2021-22 to FY 2024-25

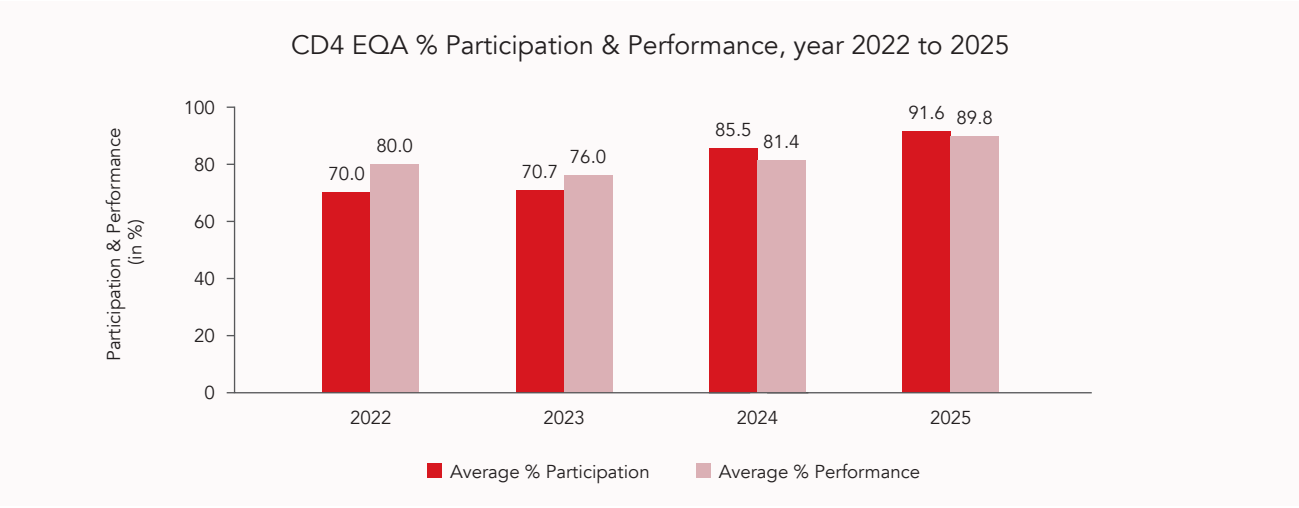


12.5.2. CD4 External Quality Assessment (EQA)

NACO established CD4 EQA for the laboratories linked to ART centers in 2005. The Apex laboratory, ICMR-NITVAR undertakes PT every year for all the CD4 testing sites. Before the PT round, the CD4 laboratories submit their readiness to the Apex laboratory and accordingly the samples are disptached. The EQA round is conducted twice in a year (once in every six months), mostly in the month of February-March and October-November. Each CD4 EQA panel contains two samples (of different levels). The labs tests the PT samples within the defined timelines and submit the report to the Apex lab for analysis. This is being reported through NACO Prayogshala. In addition to CD4 EQA, the GLP (Good Laboratory Practice) training for the ART laboratory technicians is also conducted every year.

The EQA PT round for the year 2025 was conducted in February 2025 and around 91.6% of laboratories having CD4 machines participated in EQA with 89.8% of labs achieving satisfactory results (figure 12.9).

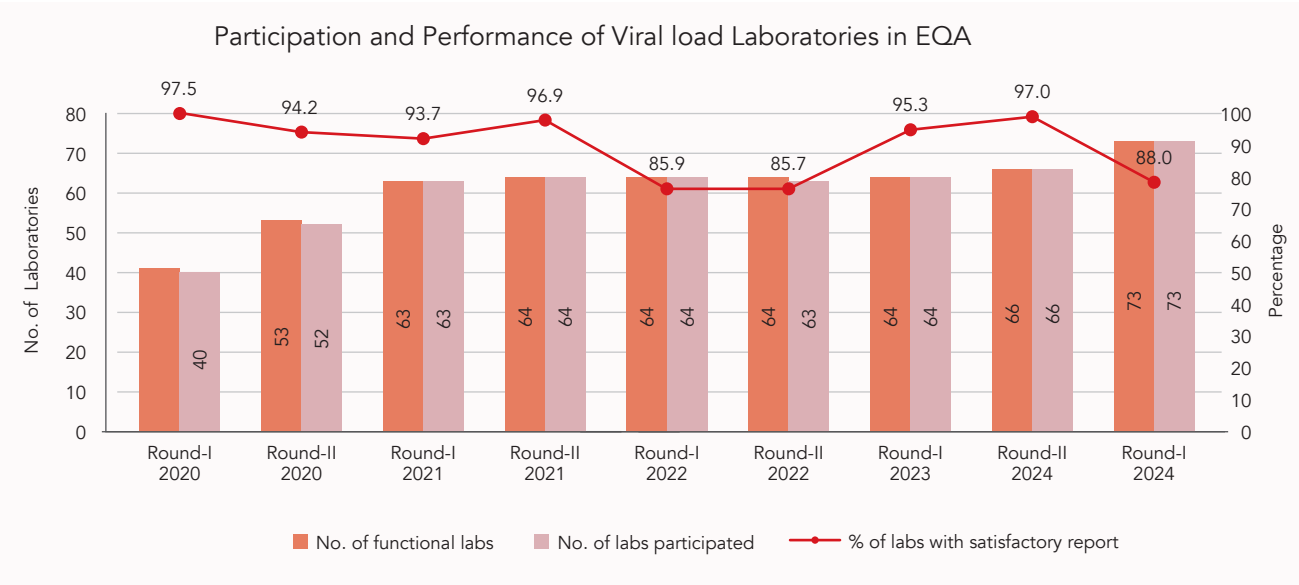
Figure 12.9. Year wise CD4 EQA % Participation & Performance, year 2022 to 2025



12.5.3. Viral load External Quality Assessment (EQA)

ICMR-NITVAR-Pune in the FY 2024-25 conducted Viral load EQA for 73 laboratories under the National Programme. As per the procedure defined blinded five member panels are sent to the VL labs. The laboratories test the PT panels and submit the results within the defined time frame and upload the results on 'NACO Prayogshala' portal for further analysis. In the round II of FY 2024-25 total 73 VL laboratories participated (comprising both programme labs and other non-programme labs) in EQA. Out of 73, 64 laboratories scored satisfactory results. Figure 12.10 shows the participation and performance of VL laboratories in EQA over the years.

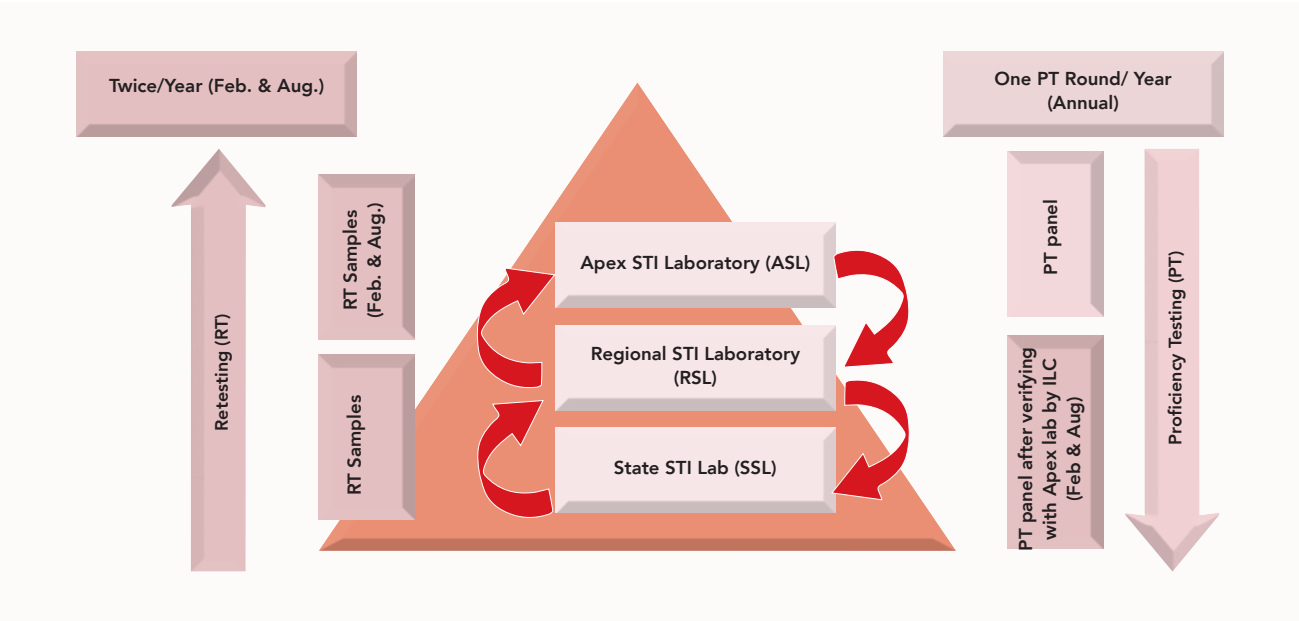
Figure 12.10. Participation and performance of Viral load Laboratories in EQA



12.5.4. Syphilis External Quality Assessment (EQA)

The STI laboratories have the following hierarchal structure to conduct EQA, which is done in two ways: Panel testing and Reverse testing/ re-testing which is described below:

Figure 12.11. STI Laboratories work flow for EQA/ILC



A. **Panel testing:** The PT Provider prepares well characterised 5-member panels [minimum 3 positive samples, out of which 2 are paired] and distributes the blinded panel to all participating labs for testing. The participating laboratory tests the samples and submit the results in the prescribed format within the defined timelines. This is an annual activity and flexible on months. Table 12.2 shows the percentage participation of STI labs in Syphilis EQA in the Year 2025.

Table 12.2. Participation of RSL and SSL in panel testing

S.No.	% Participation of Regional STI labs (RSL) in Panel testing	% Participation of State STI labs (SSL) Panel testing
1	100%	84%

B. **Re-testing:** Re-testing for syphilis serology is conducted two times in a year scheduled in the months of February and August. Similar to HIV serology, this is a process in which a proportion of tested patient samples are referred to the linked referral lab for verification. The participating lab sends 5 samples (minimum 2 positive & 3 negative samples) collected & tested within first 7 working days of the month (RT month).
Two rounds of RT were conducted, the 1st round was conducted in August 2024 and the 2nd round was conducted in February 2025. The following table 12.3 shows the participation and performance of Regional STI labs and State STI labs in Syphilis re-testing

Table 12.3. Participation and performance of RSL and SSL in Syphilis re-testing

S.No.	Year	Regional STI Laboratories (RSL)		State STI Laboratories (SSL)	
		% Participation	% Performance (concordance in Syphilis re-testing)	% Participation	% Performance (concordance in Syphilis re-testing)
1	August 2024	100%	100%	75.5%	100%
2	February 2025	100%	90%	76%	100%

12.6. Accreditation

A fundamental element of NACO's approach to laboratory quality has been its emphasis on accreditation and adherence to international standards. Achieving ISO 15189 accreditation for laboratories is a testament to NACO's commitment to quality. For ICTC performing HIV/STI tests using rapid diagnostic tests (RDT), NACO implements a certification program through stepwise quality improvement process to verify the specific standards and ensure compliance are in alignment with national operational and quality guidelines, called as "Certificate of Excellence". NACO has been implementing Quality Management Systems (QMS) in HIV testing reference laboratories since 2010 and have been providing technical assistance to all the laboratories for the development and implementation of a Quality Management System. As a result, around 92% of the laboratories are accredited as per ISO 15189. The table 12.4. below shows the accreditation status of all testing labs under NACP.

Table 12.4. Accreditation status of Laboratories under NACP

S.No.	Type of Labs	Number of Labs	Number of Labs accredited
1	National Reference Laboratories	13	13
2	State Reference Laboratories	117	110
3	Viral load Testing Laboratories	64	55
4	Early Infant Diagnosis Laboratories	6	6
Total		200	184

12.7. Certificate of Excellence to ICTCs

NACO is committed to achieve 100% ISO 15189 accreditation for National and State reference laboratories, HIV-1 Viral load testing, EID, CD4 and STI laboratories. For ICTC performing HIV/STI tests using rapid diagnostic tests (RDT), NACO implements a certification program through stepwise quality improvement process to verify the specific standards and ensure compliance are in alignment with national operational and quality guidelines, called as "Certificate of Excellence"

The checklist has four "Domains" – Operations, Technical, Monitoring and Evaluation (M&E) and Logistics. The maximum overall score an ICTC can obtain is 246. On a score of >90%, the ICTC is eligible for Certification and SACS recommends to NACO to award Certificate of Excellence.

As on date 913 ICTC (table 12.5) have been approved by NACO for "Certification of Excellence" who have achieved grade 5 or more than 90% score during the final assessment

Table 12.5. State/UT-wise status of Certificate of Excellence to ICTC (as on July 2025)

S. No.	State/UT(SACS/DACS)	Number of ICTCs	Number of ICTCs recommended for Certificate of Excellence
1	Andhra Pradesh	212	59
2	Arunachal Pradesh	29	3
3	Assam	106	9
4	Bihar	186	12
5	Delhi	84	10
6	Goa	12	10
7	Haryana	103	2
8	J&K and Ladakh	33	12
9	Karnataka	421	194
10	Kerala	86	25
11	Madhya Pradesh	206	18
12	Maharashtra	471	116
13	Manipur	49	26
14	Meghalaya	26	8
15	Mizoram	29	29
16	Mumbai	41	37
17	Nagaland	58	57
18	Odisha	166	3
19	Puducherry	12	10
20	Punjab	110	5
21	Sikkim	13	9
22	Tamil Nadu	295	19
23	Telangana	127	80
24	Tripura	24	2
25	Uttar Pradesh	399	76
26	Uttarakhand	42	5
27	West Bengal	314	48
Total		**3,654**	**884**

13

SCORECARD



SCORECARD

Performance of State/UT in National AIDS & STD Control Programme Implementation, FY 2024-25

13.1. Background

The 'Scorecard of SACS' provides a comprehensive overview of each state's performance in implementing the NACP across all facilities. It is a valuable tool for identifying areas that require strengthened efforts to achieve the programme targets in the respective financial year.

The Scorecard of SACS is a quarterly activity conducted within each financial year. It is dynamic in nature, and the indicators are reviewed and, if necessary, modified in consultation with each division based on programme needs before preparing the first scorecard of the year. Once finalized, the indicators remain the same throughout the financial year. The scorecard for 2023–24 was prepared using 44 indicators, while the scorecard for 2024–25 used 47 indicators, based on programme data and other relevant information available as of March 31st, 2025. Further details are provided in the subsequent sections.

13.2. Methodology

Each indicator of the scorecard was derived from programme data and other relevant information for the financial year 2024–25, with weights assigned based on the recommendations of programme divisions and the approval of the competent authority. Details of the indicators are provided in table 13.1. SACS are ranked according to the percentage of scores obtained relative to the maximum achievable scores.

Table 13.1. Details of the Indicators across different service categories under NACP

S. No.	Indicator	Numerator (Actual Value/Achievements)	Denominator (Target Value)	Weight points
1	First 95	Total PLHIV in Active care	Estimated PLHIV	3
2	Second 95	Total PLHIV alive and on ART	Total PLHIV in Active care	2
3	Third 95	Out of test conducted no. of Viral Load suppressed	No. of Viral Load test conducted in the state	2
4	Average Frequency of Social Media updates (indigenous posts) in one quarter	-	-	1
5	Status of AEP integration in state school curriculum	-	-	1
6	Status of SCA	-	-	1
7	Status of state rules	-	-	1
8	Status of ombudsman	-	-	1
9	TI/LWS onboarding	No. of Facilities onboarded	Approved in AAP (TI, LWS)	2
10	OST onboarding	No. of Facilities onboarded	Approved in AAP (OST)	2
11	Coverage of HRG against estimates	Total HRG coverage	p-MPSE mapping estimates	1
12	HIV testing among HRG	HRG tested for HIV	Total active HRG population	1

Table continued....

....Table continued

S. No.	Indicator	Numerator (Actual Value/Achievements)	Denominator (Target Value)	Weight points
13	HIV testing among prisoners	HIV testing among prisoner	Total estimation of prisoner in states during the reporting period	1
14	Clinic visit of HRGs at TI-Clinics	Number of HRGs visited TI-clinics	Total active HRG Population	1
15	Percentage of HRGs screened for Syphilis	Number of HRGs screened for Syphilis at TI	Total active HRG population	1
16	IDU on OST	Active client on OST	50% of active IDU coverage in TI	1
17	Status of Fund released to TIs	Funds released to TI during FY 2024-25	-	1
18	HIV testing against Target for clients other than pregnant women	No. of HIV tests done among the client other than Pregnant Women in the FY	Target for HIV testing among client other than Pregnant Women in the FY	1
19	HIV testing against target amongst Pregnant Women	No. of HIV tests done amongst Pregnant Women in the FY	Target for HIV testing amongst Pregnant Women in the FY	1
20	Pregnant Women screened for Syphilis	Total number of PW tested for Syphilis	Target for syphilis screening among PW in the FY	1
21	Treatment provided to Syphilis reactive pregnant women	Number of pregnant women provided treatment	Total number of PW tested reactive for Syphilis	2
22	Index testing among eligible contacts	HIV testing conducted among eligible contacts under Index Testing	Eligible contacts for HIV Testing under Index Testing	3
23	6 weeks - <2 months EID testing against live birth	Number of 6 weeks - <2 months EID testing	Number of live births	1
24	Clients managed at DSRC against the target	Number of Clients managed at DSRC	Target for the FY	1
25	STI attendees screened for HIV	Number of STI attendees screened for HIV	Number of STI Attendees	1
26	STI attendees screened for Syphilis	Number of STI attendees screened for Syphilis	Number of STI Attendees	1
27	Positive Pregnant Women (PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25	Number of Positive Pregnant Women tested for viral load at 32-36 week of gestation (April-reporting month)	Number of Positive Pregnant Women eligible for viral load testing at 32-36 week of gestation (April-reporting month)	2
28	Viral Load test conducted in FY 2024-25	Viral Load test done (April-reporting month, as per SOCH)	Viral load target (as per target set by CST)	2
29	LFU rate among new ART initiation FY 2024-25 (as per revised definition of LFU)	Out of newly initiated, LFU in FY 2024-25	PLHIV Initiated on ART in FY 2024-25	3
30	PLHIV who died out of those initiated on ART in FY 2024-25	Out of newly initiated, PLHIV reported died in FY 2024-25	PLHIV initiated on ART in FY 2024-25	1
31	NABL Accreditation - HIV Reference lab	No. of SRL accredited	No. of SRL in the state	1
32	Average participation and performance of ICTCs	No. of ICTC participated in the state	Total no. of ICTC in the state	1
33	Abstracts submitted/selected from studies conducted in FY22-23	Number of abstracts submitted/ selected from studies conducted in FY22-23	Four (4) for all states and UT except Gujarat and Meghalaya (the denominator for Gujarat and Meghalaya is five)	2
34	Ongoing studies from FY23-24	Number of ongoing studies from FY 2023-24	Two (2) for all states and UT	1

S. No.	Indicator	Numerator (Actual Value/Achievements)	Denominator (Target Value)	Weight points
35	Submission of research proposal from FY24-25 to NACO	Number of Submission of research proposal from FY24-25 to NACO	One (1) for all states and UT except Assam and Mumbai.	1
36	Number of Secondary Data Analysis topics/reports by SACS-FY 2024-25 Topics/Reports	Number of secondary data analyses topics/reports submitted to NACO in the FY 2024-25	Two secondary data analyses topics/reports to be shared by SACS in the FY 2024-5	1
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported	No. of district conducted DAPCC meetings every quarter and reported	No. of districts to be covered under DISHA as approved	1
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS	No. of districts conducted meetings every month and reported	No. of districts to be covered under DISHA as approved	1
39	District reports received by NACO from SACS	No. of district reports received from the State	No. of districts to be covered under DISHA as approved	1
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY	No. of meetings conducted by the SACS with DISHA in the FY	No. of meetings need to be conducted by the SACS (i.e., 4 meetings in FY)	1
41	Expenditure with respect to funds released during FY 2023-24	Expenditure in the FY 2023-24	Funds release in FY 2023-24	1
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24	Date of receipt of requisite report/ document		1
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24	Date of receipt of requisite report/ document		1
44	Date of Submission of EC/ GB ratification for approval of Expenditure incurred during FY 2022-23	Date of receipt of requisite report/ document		1
45	Timely submission of ARV, BSD, and STI -SCM reports	On-time reports submitted	On-time reports to be submitted	2
46	Timely submission of TI (OST Drugs)- SCM reports	On-time reports submitted	On-time reports to be submitted	1
47	Compatibility between SOCH Entry & Excel Reports for ARVs	Consumption/ dispensation as on SOCH entry	Consumption as on the excel based report	2

Performance on individual indicators were divided into 4 categories [Good (Green, 3 Marks), Average (Yellow, 2 Marks), Poor (Red, 1 Mark), Not Applicable (No colour- No score added in denominator)]. Indicator wise details of performance categories are given in the table 13.2.

Table 13.2. Categorisation of performance of indicators

Sl. No.	Indicator Name	Zone for ranking		
		Green	Yellow	Red
1	First 95	≥95%	≥80% to <95%	<80%
2	Second 95	≥95%	≥80% to <95%	<80%
3	Third 95	≥95%	≥80% to <95%	<80%

Sl. No.	Indicator Name	Zone for ranking		
		Green	Yellow	Red
4	Average Frequency of Social Media updates	If the average number of social media updates of SACS is over 45 per quarter during the FY, including original content, reposts, retweets, and shares	If the average number of social media update of SACS falls between 40 and 44 per quarter in the FY.	If the average number of social media update of SACS falls below 40 per quarter in the FY.
5	Status of AEP integration in state school curriculum	Yes		No
6	Status of State Council for AIDS	At least one meeting held since 2020		No meeting held since 2020
7	Status of state rules	Notified		Not notified
8	Status of ombudsman	Appointed		Not appointed
9	TI/LWS onboarding	≥95%	≥90% to <95%	<90%
10	OST onboarding	≥95%	≥90% to <95%	<90%
11	Coverage of HRG against estimates	≥90%	≥80% to <90%	<80%
12	HIV testing among HRG	≥95%	≥90% to <95%	<90%
13	HIV testing among prisoners	≥95%	≥90% to <95%	<90%
14	Clinic visit of HRGs at TI-Clinics	≥90%	≥75% to <90%	<75%
15	Percentage of HRGs screened for Syphilis	≥90%	≥75% to <90%	<75%
16	IDU on OST	≥50%	≥30% to <50%	<30%
17	Status of fund released to TI	Yes		No
18	HIV testing against Target for clients other than pregnant women	≥95%	≥80% to <95%	<80% or >150%
19	HIV testing against target among Pregnant women	≥95%	≥85% to <95%	<85%
20	Percentage of pregnant women screened for Syphilis	≥95%	≥85% to <95%	<85%
21	Treatment provided to Syphilis reactive pregnant women	≥95%	≥80% to <95%	<80%
22	Index testing among eligible contacts	≥95%	≥80% to <95%	<80%
23	6 weeks - <2 months EID testing against live birth	≥95%	≥80% to <95%	<80% and >120
24	Clients managed at DSRC against the target	≥90%	≥75% to <90%	<75%
25	STI attendees screened for HIV	>75%	≥50% to ≤75%	<50%
26	STI attendees screened for Syphilis	>75%	≥50% to ≤75%	<50%
27	Positive Pregnant Women (PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25	≥94%	≥90% to <94%	<90%
28	Viral Load test conducted in FY 2024-25	≥94%	≥80% to <94%	<80%

Sl. No.	Indicator Name	Zone for ranking		
		Green	Yellow	Red
29	LFU rate among new ART initiation FY 2024-25 (as per revised definition of LFU)	≤2%	>2% to <5%	≥5%
30	PLHIV who died out of those initiated on ART in FY 2024-25	≤1%	>1% to <3%	≥3%
31	NABL Accreditation - HIV Reference lab	100	≥80% to <100%	<80%
32	Average participation and performance of ICTCs	≥95%	≥85% to <95%	<85%
33	Abstracts submitted/ selected from studies conducted in FY 2022-23	100	>25% to <100%	≤25%
34	Ongoing studies from FY 2023-24	100	>25% to <100%	≤25%
35	Submission of research proposals from FY 2024-25 to NACO	100	>25% to <100%	≤25%
36	Number of Secondary Data Analysis topic/reports by SACS FY 2024-25	2	1	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported	≥90%	≥50% to <90%	<50%
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS	≥95%	≥85% to <95%	<85%
39	District reports received by NACO from SACS	≥75%	≥50% to <75%	<50%
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY	≥95%	≥75% to <95%	<75%
41	Expenditure with respect to funds released during FY 2023-24	≥75%	≥70% to <75%	<70%
42	Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24	By 30-Apr-2024	By 31- May-2024	After 31-May-2024
43	Submission of audited UC in GFR 12A for the FY 2023-24	By 30-Jun-2024	By 30-Sep-2024	After 30-Sep-2024
44	Submission of EC/ GB ratification for approval of Expenditure incurred during FY 2022-23	By 30-Sept-2023	By 31-Dec-2023	After 31-Dec-2023
45	Timely Submission of ARV, BSD and STI-SCM Reports	>95%	≥90% to ≤95%	<90%
46	Timely submission of TI (OST Drugs)- SCM reports	>95%	≥80% to ≤95%	<80%
47	Compatibility between SOCH Entry & Excel Reports for ARVs	≥90%	≥75% to <90%	<75%

13.3. Performance of SACS in Programme Implementation

A. Comparison of performance of SACS based on the first scorecard of FY 2024-25 (April to June 2024) and the consolidated final scorecard of FY 2024-25 (April 2024 to March 2025)

In the financial year 2024-25, SACS in States and UTs were ranked, based on their performance, separately unlike in the previous financial years.

Among the 29 state SACS, 10 SACS improved their ranks between the first and the consolidated final scorecard of FY 2024-25, while 2 SACS maintained their previous ranks. Among the 6 UT SACS, 2 SACS improved their ranks between the two scorecards, while 2 SACS maintained their ranks. The tables below provide the changes in SACS ranking between the first scorecard of FY 2024-25 and the final consolidated scorecard of FY 2024-25:

Table 13.3.1. Change in overall ranks of States between the first scorecard of FY 2024-25 (April to June 2024) and the consolidated final scorecard of FY 2024-25 (April 2024 to March 2025)

Improved Rank	Retained Rank	Deteriorated Rank
Sikkim (18→1), Mumbai (10→3), Uttar Pradesh (23→17), Maharashtra (12→6), Punjab (22→18), Mizoram (9→5), Madhya Pradesh (6→2), Rajasthan (26→23), Bihar (29→26), Arunachal Pradesh (27→25), West Bengal (16→15)	Telangana (14→14), Uttarakhand (24→24)	Odisha (28→29), Jharkhand (19→20), Chhattisgarh (21→22), Andhra Pradesh (11→12), Nagaland (7→9), Manipur (17→19), Assam (25→27), Meghalaya (13→16), Himachal Pradesh (5→8), Goa (1→4), Gujarat (3→7), Kerala (8→13), Haryana (15→21), Karnataka (4→11), Tripura (20→28), Tamil Nadu (2→10)

Table 13.3.2. Change in overall ranks of UTs between the first scorecard of FY 2024-25 (April to June 2024) and the consolidated final scorecard of FY 2024-25 (April 2024 to March 2025)

Improved Rank	Retained Rank	Deteriorated Rank
DNH & DD (6→4), Andaman and Nicobar Islands (3→2)	Chandigarh (1→1), Delhi (5→5)	Puducherry (2→3), Jammu & Kashmir and Ladakh (4→6)

B. Performance of SACS, FY 2024-25 (April 2024 to March 2025)

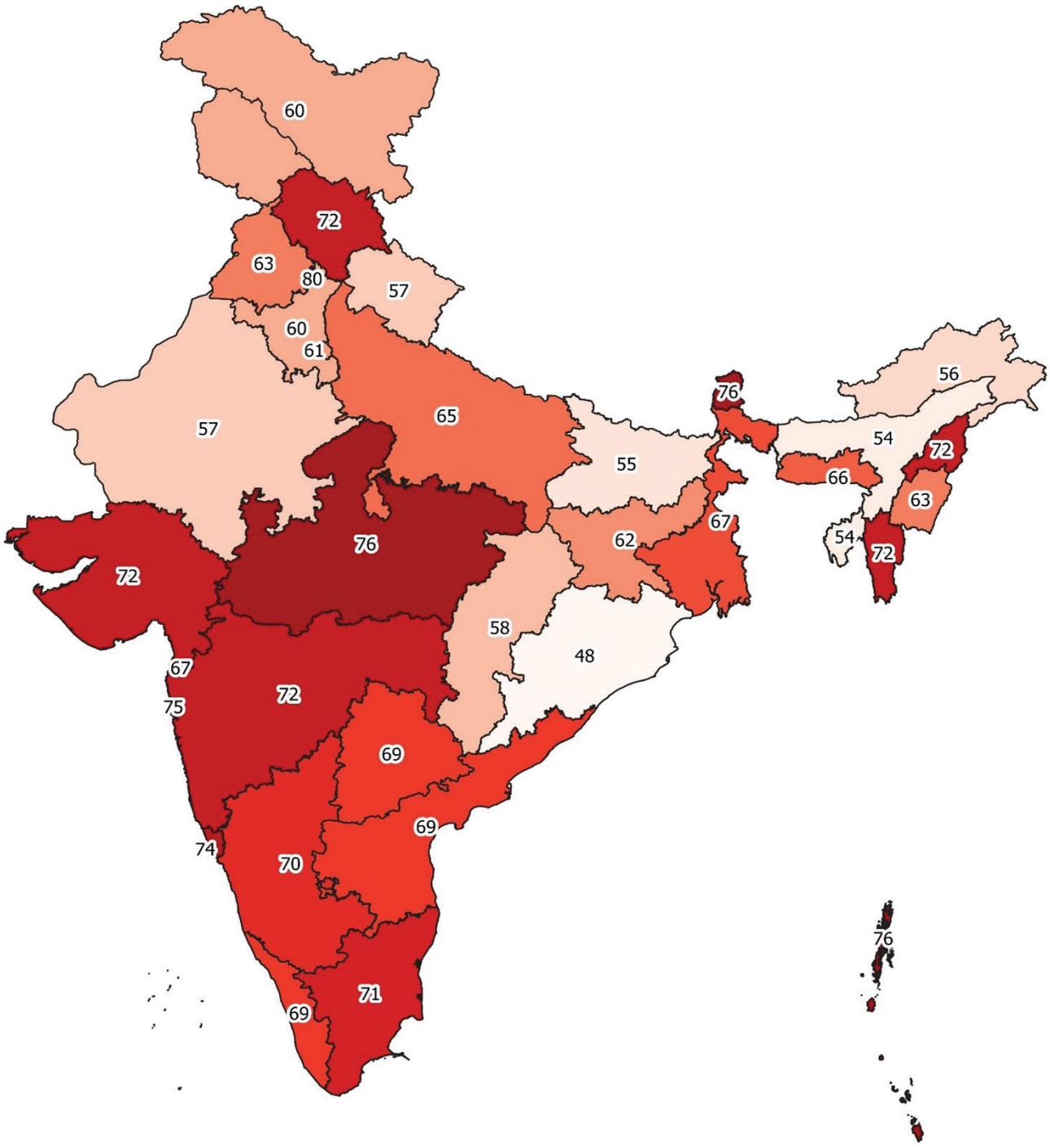
Performance of all SACS for each indicator in the final consolidated scorecard for FY 2024-25 is shown in figure 13.1 below. The overall performance of each SACS, percentage of obtained scores out of the respective maximum achievable score, during the whole FY 2024-25 is provided in figure 13.2 below.

Figure 13.1. Performance of SACS for each indicator#



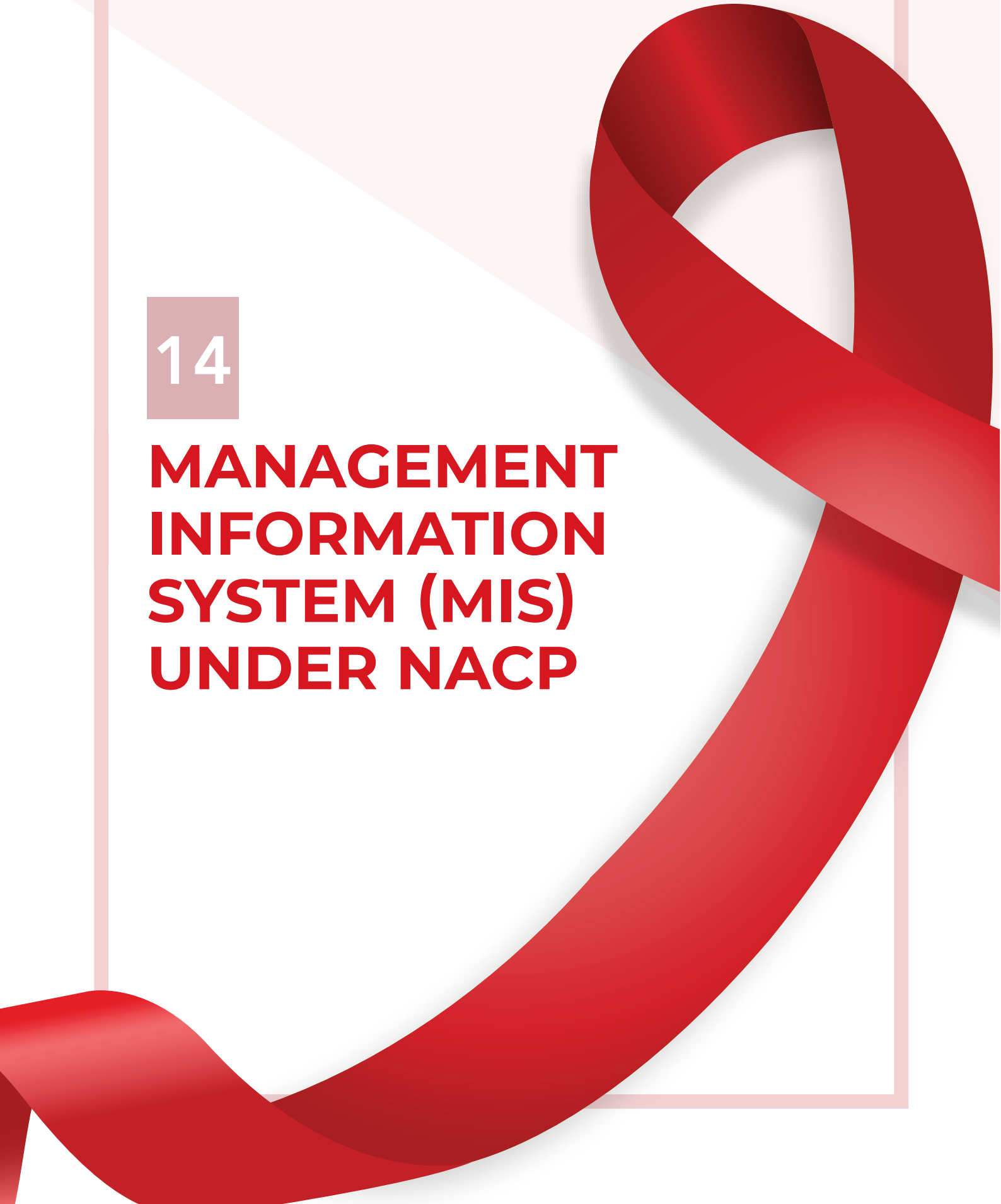
 # Of all the 47 indicators considered for the scorecard for the duration April 2024 to March 2025, ten indicators were not applicable to all states/UTs.

Figure 13.2. State/UT wise obtained score (in percentage), FY 2024-25



14

MANAGEMENT INFORMATION SYSTEM (MIS) UNDER NACP



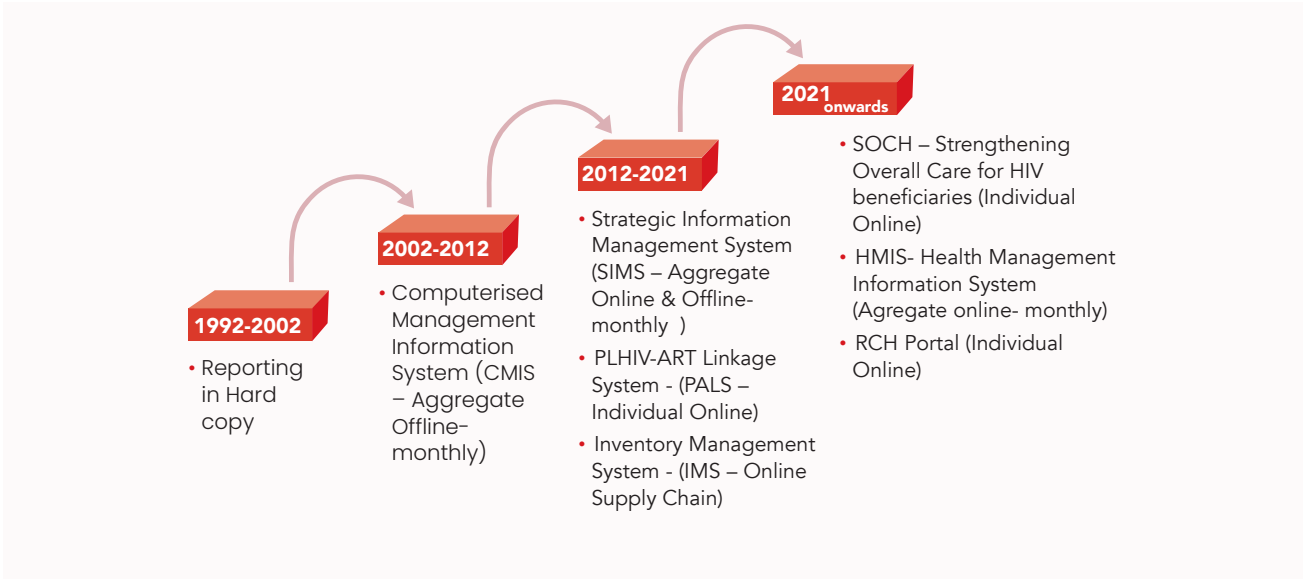
MANAGEMENT INFORMATION SYSTEM (MIS) UNDER NACP

14.1. Introduction

MIS refers to a system used to manage data informing decisions on the design or management of health services and encompasses data collection, compilation, analysis, synthesis and use[1]. MIS under the NACP has undergone a significant transformation over the past three decades—from a paper-based reporting to a robust, beneficiary-centric digital ecosystem (figure 14.1).

During NACP-I and the early phase of NACP-II, reporting was primarily conducted through hard copy formats. The period from 2002 to 2012 marked the implementation of the Computerised Management Information System (CMIS), which facilitated aggregate offline monthly reporting. Between 2012 and 2021, the Strategic Information Management System (SIMS) was implemented, enabling direct aggregate monthly reporting via a centralized web-portal. This phase also saw the initiation of individual-level web-based systems such as the PLHIV-ART Linkage System (PALS) and the Inventory Management System (IMS), though in silos.

Figure 14.1.MIS system under NACP - past and present



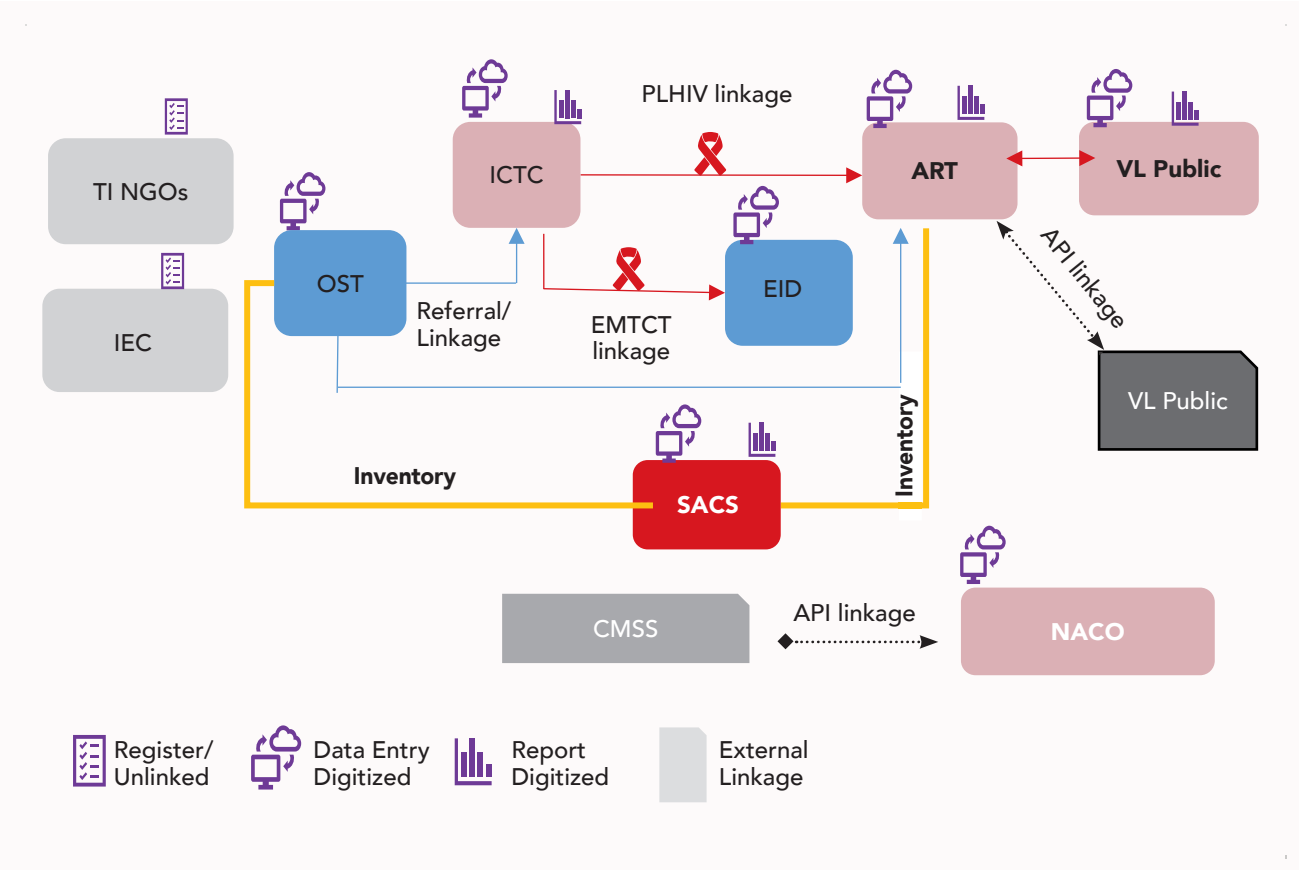
[1] Consolidated HIV strategic information guidelines: driving impact through programme monitoring and management. Geneva: World Health Organization; 2020.

14.2. SOCH

Since 2021, the NACP MIS has evolved into an integrated, IT-enabled, and interoperable system. The current MIS, SOCH, offers comprehensive real time tracking of longitudinal care and inventory transactions, thereby enhancing service delivery and beneficiary health outcomes. This system is further supported by complementary MIS platforms of the Ministry of Health and Family Welfare (MoHFW), especially the Health Management Information System (HMIS) and the Reproductive and Child Health (RCH) Portal.

SOCH is being implemented pan India for data reporting from NACP facilities. It is also an enabler for replacing physical registers for data recording in all level of NACP facilities. This robust system has expanded over years and currently covering more than 10,000 reporting units from the 8,617 health facilities (March 2025). The conceptual framework of SOCH is depicted in the figure 14.2.

Figure 14.2. Organogram of SOCH



14.3. SOCH Output

a. Dashboard

A dashboard under any online data portal helps to complex data easier to understand through visual representation; pulls information from various sources of data base into a single/centralized view; often updated automatically with live data and allows users to explore trends and gain deeper insights rather than a summary.

Dashboard under SOCH portal is a visual display of KPIs in the mode of charts and graphs. It includes overview of the data reporting by the various programme components under NACP, no. of service delivery facilities those are registered with SOCH and its reporting status, performance of KPIs as well as national and sub national level 95-95-95 status, Geo mapping (to identify the locations of the service delivery facilities) index testing and EVTHS related cascade.

b. Monthly Progress Report (MPR)

A monthly progress report is a document that summarizes progress and achievement of the over the preceding month to be submitted to the guiding institution in the reporting month. Generally, the monthly progress reports are structured, using

templates with well-defined indicators which ensures all essential information is included.

In the SOCH Portal, all programme components under NACP have their own MPR which is auto generated. The MPR under SOCH is a monthly aggregate report submitted by the service delivery facilities and generated in the excel based template. The MPR is being generated at different level of hierarchy under NACP (National, State and Facility).

c. Master Line-list (MLL)

Under NACP, master Line-list is a record of beneficiaries who are availing NACP services through service delivery facilities. In NACP, the master Line-list is generally belonging to the HIV positive individuals and ART line list is considered as the uppermost line-list among the all-other different line-list such as EVTHS line list; exclusively for pregnant women living with HIV, HIV Positive line-list for General individual and Pregnant women at HCTS level, Syphilis positive line list, HIV screened reactive line list (for HIV Screening facilities) and HIV exposed Infant (HEI) line-list (at EID centre level). An updated master line-list enables to capture dynamic changes in patient status, such as transfer details, adherence to ART, and mortality related information, are providing insights into patient mobility and continuity of care. All line- list are highly confidential and strictly aligned to HIV/AIDS Act 2017.

14.4. HMIS Portal

HMIS (Health Management Information System) of Ministry of Health & Family Welfare (MoHFW), Government of India, is a Web Based Information associated with National Health Mission (NHM). The HMIS was launched in 2011-12 and was constantly upgraded to facilitate monitoring of the programmes and schemes under the missions.

The HMIS portal has been regularly updated to keep pace with the upgrading technology, requirements of stakeholders and new programmes/ schemes launched under the National Health Mission. The upgraded HMIS 2.0 was launched in 2020 and made functional since April 2020. Data capturing formats have been updated thrice since inception, to include new schemes / programmes of MoHFW and the requirement of concerned Ministries/ Departments. The revision was done initially in 2017-18 and recently in 2024-25. Currently over 2.6 lakhs health facilities (Medical Colleges, District Hospital, Sub-Dist. Hospital, CHC, PHC, and HWC-SCs) including 0.37 lakhs private health facilities are registered and reporting in HMIS.

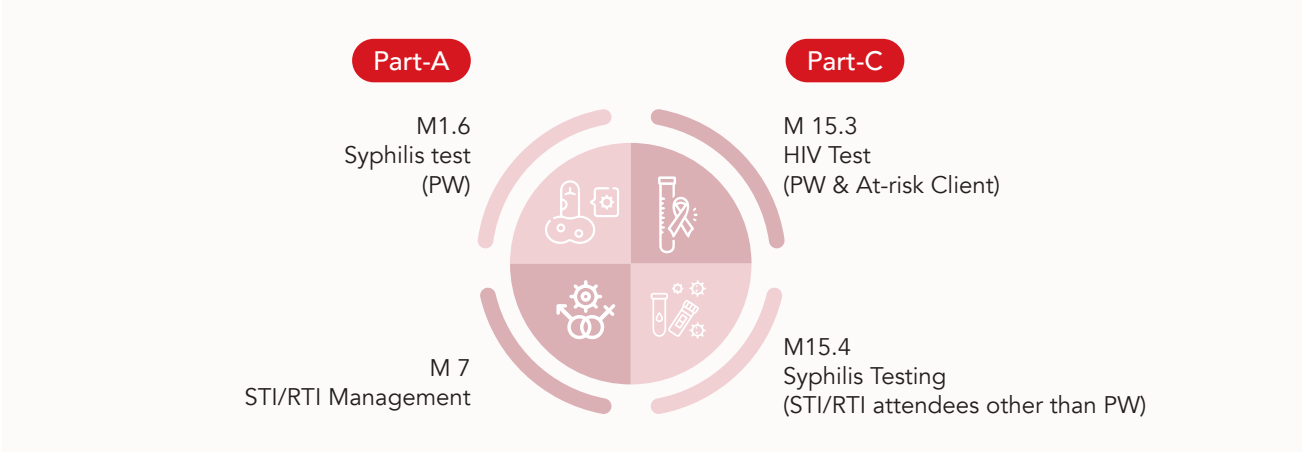
HMIS collects monthly aggregate data on service delivery for all the major programmes/ schemes of NHM. The following figure depicts the major national level health programme which are reporting under HMIS Portal.

14.5. NACP Indictors in HMIS

Currently, there are 45 key NACP indicators (table 14.1) are being reported as a monthly aggregate report in it's different section (figure14.3) of the format and those are following. For NACP, all HIV Screening sites (F-ICTC) and HIV Confirmatory Sites are reporting monthly aggregate HIV Screening / Testing data in the HMIS portal. All HIV Confirmatory sites in pan India are also mapped in the HMIS Portal.

Table 14.1. List of NACP indicators in HMIS

Figure 14.3. Sections of NACP Indictors in HMIS Portal



Portal

S. No.	Data Item	Display code
	Pregnant Women (PW) with Syphilis	**1.6**
1	Number of pregnant/Direct-In-Labor (DIL) women screened/tested (with VDRL/RPR/TPHA/RDT/PoC) for Syphilis	1.6.1.a
2	Number of pregnant/DIL women found Seropositive for Syphilis by VDRL/RPR/TPHA/RDT/PoC test	1.6.1.b
3	Number of pregnant/DIL women found Syphilis-Seropositive and given treatment with injection Benzathine Penicillin (IM)	1.6.1.c
4	Number of live births among Syphilis Seropositive Pregnant Women	1.6.1.d
5	Number of babies born to Syphilis-Seropositive Pregnant Women tested positive/ clinically diagnosed for congenital Syphilis	1.6.1.e
6	Out of above, babies with congenital Syphilis received curative treatment	1.6.1.f
	Sexually Transmitted Infections/Reproductive Tract Infections (STI/RTI) Cases	**M7**
7	Number of males assessed for STI/RTI	7.1.1.
8	Out of the above, number of males diagnosed with STI/RTI	7.1.1.a
9	Out of the above, number of males treated for STI/RTI	7.1.1.b
10	Number of females (all females) assessed for STI/RTI	7.1.2.
11	Out of the above, number of females (all females) diagnosed with STI/RTI	7.1.2.a
12	Out of the above, number of females (all females) treated for STI/RTI	7.1.2.b
13	Number of H/TG assessed for STI/RTI	7.1.3.
14	Out of the above, number of H/TG people diagnosed with STI/RTI	7.1.3.a
15	Out of the above, number of H/TG people treated for STI/RTI	7.1.3.b
	HIV tests	**15.3.**
16	Number of males screened for HIV by Whole Blood Finger Prick/RDT test/POC test	15.3.1.a
17	Out of the above, No. of males found reactive for HIV	15.3.1.b
18	Number of males subjected to HIV test at Confirmatory Centre/Stand Alone-ICTC	15.3.1.c
19	Out of the above, No. of males confirmed as HIV Positive	15.3.1.d
20	Number of females (non-ANC) screened for HIV by Whole Blood Finger Prick/RDT test/POC test	15.3.2.a
21	Out of the above, No. of females (non-ANC) found reactive for HIV	15.3.2.b
22	Number of females (non-ANC) subjected to HIV test at Confirmatory Centre/Stand Alone-ICTC	15.3.2.c

S. No.	Data Item	Display code
23	Out of the above, No. of females (non-ANC) confirmed as HIV Positive	15.3.2.d
24	Number of Pregnant Women (PW-ANC) screened for HIV by Whole Blood Finger Prick/RDT test/ POC test	15.3.3.a
25	Out of the above, No. of PW(ANC) found reactive for HIV	15.3.3.b
26	Number of PW(ANC) subjected to HIV test at Confirmatory Centre/Stand Alone-ICTC	15.3.3.c
27	Out of the above, No. of PW(ANC) confirmed as HIV Positive	15.3.3.d
28	Number of DIL women screened for HIV by Whole Blood Finger Prick/RDT test/POC test	15.3.3.e
29	Out of the above, No. of DIL women found reactive for HIV	15.3.3.f
30	Number of DIL women subjected to HIV test at Confirmatory Centre/Stand Alone-ICTC	15.3.3.g
31	Out of the above, No. of DIL women confirmed as HIV Positive	15.3.3.h
32	Number of Pregnant Women (ANC&DIL) screened for HIV more than once (Repeated testing)	15.3.3.i
33	Number of H/TG people screened for HIV by Whole Blood Finger Prick/RDT test/POC test	15.3.4.a
34	Out of the above, No. of H/TG people found reactive for HIV	15.3.4.b
35	Number of H/TG people subjected to HIV test at Confirmatory Centre/Stand Alone-ICTC	15.3.4.c
36	Out of the above, No. of H/TG people confirmed as HIV Positive	15.3.4.d
	STI/RTI attendees Tested for Syphilis	**15.4.**
37	Total number of males tested for Syphilis (RPR/VDRL/PoC/ RDT/TPHA)	15.4.1.a
38	Out of the above, number of males tested reactive for Syphilis (RPR/VDRL/PoC/ RDT/TPHA)	15.4.1.b
39	Out of the above, number of males treated for Syphilis	15.4.1.c
40	Total number of female (non-ANC) tested for Syphilis (RPR/VDRL/PoC/ RDT/TPHA)	15.4.2.a
41	Out of the above, number of females (non-ANC) tested reactive for Syphilis (RPR/VDRL/PoC/ RDT/ TPHA)	15.4.2.b
42	Out of the above, number of females (non-ANC) treated for Syphilis	15.4.2.c
43	Total number of H/TG people tested for Syphilis (RPR/VDRL/PoC/ RDT/TPHA)	15.4.3.a
44	Out of the above, number of H/TG people tested reactive for Syphilis (RPR/VDRL/PoC/ RDT/TPHA)	15.4.3.b
45	Out of the above, number of H/TG people treated for Syphilis	15.4.3.c

14.6. Reproductive & Child Health Portal (RCH Portal)

To ensure quality services to pregnant women and children across the country. Ministry of Health & Family Welfare, Government of India has designed Reproductive and Child Health (RCH) portal to capture information on all RCH related services including family planning, maternal health, Child health and immunization.

RCH is an augmented version of MCTS" application has been designed for early identification and tracking of the individual beneficiary throughout the reproductive lifecycle. RCH portal facilitates to ensure timely delivery of full component of antenatal, postnatal & delivery services and tracking of children for complete immunization services. RCH portal has been designed to meet the requirements of the RMNCH program by incorporating additional functionality and features of the MCTS.

14.7. NACP Indicators in RCH Portal

Apart from the beneficiary details, section 3 deals the Pregnant women registration details and Section 4 captures ANC related service such as VDRL/RPR test and HIV screening details and related information.

FACT SHEET
INDIA



INDIA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.52
2. IMR	-	-	1.07
3. Adult (15-49 yrs) HIV Prevalence (%)	0.21	0.19	0.20
4. People living with HIV	13,96,854	11,64,307	25,61,161
5. ART coverage (%)	69.16	76.17	72.63
6. Children living with HIV	29,922	27,049	56,971
7. Annual new HIV infections	37,722	26,741	64,465
8. Annual AIDS-related deaths (ARD)	20,717	11,447	32,162
9. Change in annual new HIV infections since 2010 (%)	-47.90	-48.69	-48.70
10. Change in annual ARD since 2010 (%)	-80.40	-83.00	-81.42
11. EVTH need	-	18,473	18,473

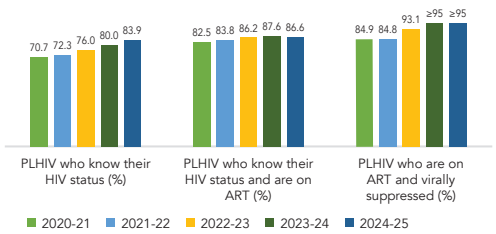
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	9,95,499	98.90	38.00	1.13
2. Men who have sex with men	3,51,020	93.20	71.10	2.12
3. Injecting Drug Users	2,88,717	-	92.10	8.79
4. Hijra/Transgender People	96,193	93.10	-	2.84
5. Migrants	72,00,000	51.80	53.90	0.45
6. Truckers	20,00,000	86.50	53.20	0.81
7. Prison inmates	22,20,499	62.90	65.00	1.99

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	30.70	21.60	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	28.50	20.10	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	74.30	70.90	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	69.20	64.30	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	3.80	0.50	-
5.1 Condom use during last higher-risk intercourse (%)	60.00	57.40	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	6.39	0.83	-
6.1 Condom use during last higher-risk intercourse (%)	60.58	62.80	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	13,96,854	11,64,307	25,61,161
2. PLHIV who know their HIV Status	11,53,828	9,85,712	21,49,252
3. PLHIV who know their HIV status and are on ART	9,66,003	8,86,859	18,60,248
4. PLHIV who are on ART and tested for their viral load	6,91,050	6,63,496	13,59,453
4.1 PLHIV who are virally suppressed	6,71,959	6,49,942	13,26,674

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	87,251
2. Colleges with operational Red Ribbon Clubs (RRC)	14,925
3. Persons trained under mainstreaming	12,229
4. No. of calls received at helpline	4,32,474

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				1127
	Male	Female	TG	Total
2. Clients managed				1,11,88,464
3. RPR Tests conducted at DSRC	19,26,779	26,66,414	22,355	46,15,548
4. Syphilis seropositivity (%) at DSRC	1.54	0.48	4.12	0.94

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	1,619
2. OST centres (Excluding Satellite OST centres)	270

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	9,95,499
2. Coverage (%)	≥95
3. Condoms distributed	23,55,76,238
4. Tested for HIV (April 2024-September 2024)	8,59,070
4.1. HIV sero-positive (%)	0.12
4.1.1. Linked to ART	994
5. Tested for HIV (October 2024 -March 2025)	9,28,422
5.1. HIV sero-positive (%)	0.13
5.1.1. Linked to ART	1038
6. Clinic Visits	34,67,750
7. STI/RTI treated	49,455
8. Presumptive treatment	1,48,480

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	3,51,020
2. Coverage (%)	≥95
3. Condoms distributed	7,32,95,199
4. Tested for HIV (April 2024-September 2024)	2,98,834
4.1. HIV sero-positive (%)	0.40
4.1.1. Linked to ART	1,095
5. Tested for HIV (October 2024 -March 2025)	3,14,674
5.1. HIV sero-positive (%)	0.36
5.1.1. Linked to ART	1,065
6. Clinic Visits	12,29,212
7. STI/RTI treated	13,075
8. Presumptive treatment	51,192

D. Injecting drug users

Indicator	2024-25
1. Estimated size	2,88,717
2. Coverage (%)	≥95
3. Needles distributed	7,03,17,212
4. Syringes distributed	4,93,59,719
5. On OST	60,652
6. Tested for HIV (April 2024-September 2024)	1,99,056
6.1. HIV sero-positive (%)	1.30
6.1.1 Linked to ART	2,132
7. Tested for HIV (October 2023 -March 2024)	2,15,306
7.1. HIV sero-positive (%)	0.88
7.1.1. Linked to ART	1,586

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	96,193
2. Coverage (%)	≥95
3. Condoms distributed	2,25,20,613
4. Tested for HIV (April 2024-September 2024)	69,763
4.1. HIV sero-positive (%)	0.35
4.1.1. Linked to ART	213
5. Tested for HIV (October 2024 -March 2025)	76,529
5.1. HIV sero-positive (%)	0.34
5.1.1. Put on ART	231
6. Clinic Visits	3,00,211
7. STI/RTI treated	3,653
8. Presumptive treatment	12,178

F. Migrants

Indicator	2024-25
1. Estimated size	72,00,000
2. Coverage (%)	≥95
3. Tested for HIV	12,38,268
3.1 HIV sero-positive (%)	0.13
3.2. Linked to ART	1,480

G. Truckers

Indicator	2024-25
1. Estimated size	20,00,000
2. Coverage (%)	54.98
3. Tested for HIV	4,03,625
3.1. HIV sero-positive (%)	0.13
3.2. On ART	417

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	1,330
2. Prisons covered under programme	1,265
3. Total inmates admitted in prisons	22,20,499
4. Inmates Covered in prisons (%)	69.7
5. Tested for HIV in prisons	15,48,054
5.1. HIV sero-positive (%)	0.33
5.2. On ART (%)	90.6
6. Total OCS	787
7. OCS covered under programme	742
8. Total inmates admitted in OCS	48,443
9. Inmates Covered in OCS (%)	76.6
10.Tested for HIV in OCS	37,131
10.1. HIV sero-positive (%)	0.30
10.2. On ART (%)	>95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	173
2. Vulnerable population covered	24,38,697
3. Tested for HIV	14,95,628
3.1. HIV sero-positive (%)	0.22
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	270
1.1. OSTC in Public Health Settings	221
1.2. OSTC in NGO Settings	49
1.3 No. of Satellite OST Centres	187
2. IDU on OST	60,652

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	4,557
2. Sampoorna Suraksha Kendras	250

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	2,26,09,281	1,84,89,521	218,994	4,13,17,796
1.1 HIV Positives	112,243	50,551	1,412	1,64,206
1.2 HIV sero-positivity (%)	0.50	0.27	0.64	0.40
2. Contacts of HIV positive people tested#				6,63,418
2.1 HIV Positives*				27,467
2.2 HIV sero-positivity (%)				4.14
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				2,00,933

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	800
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	10
2.2 Centre of Excellent (Paediatric)	7
3. Link ART Centres	1,337
4. Care Support Centres	320

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	1,12,243	58,022	1,412	1,71,677
2. New PLHIV Registered at ART center	1,07,656	56,809	1,024	1,65,489
2.1 Initiated on ART	1,04,366	55,676	1,000	1,61,042
3. PLHIV alive and on ART#	9,66,003	8,86,859	7,386	18,60,248
4. 12 months retention on ART (%)				94.0
5. Lost to follow-up cases	1,40,460	72,397	1,852	2,14,709

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	77
1.1 Accredited Viral load laboratories (out of 64 VL labs)	55
2. Viral load tests conducted	15,98,178
2.1. Suppressed test result (%)	93.68
3. National reference laboratories (NRL)	13
3.1 Accredited NRL	13
4. State reference laboratories (SRL)	117
4.1 Accredited SRL	110
5. CD4 machines	460
5.1 CD4 tests conducted	8,38,203
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	93
6.2. Average Discordance (%)	0.06
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	913

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	2,95,67,935
2. HIV testing coverage (%)	84.3
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	17,910
4.1 On life-long ART	17,325
5. Live births among HIV positive PW	13,259
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	11,790
6.1 Babies confirmed HIV Positive (6 week- 6 month)	41
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	9,699
7.2 Babies confirmed HIV positive at 18 months	258
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	460
9. HIV positive babies initiated on ART	331

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	77.4
2. Sero-positivity (%) among tested	0.05
3. Put on treatment	9,065

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	29
2. State designated/appointed ombudsman	33

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	10,34,358	3,43,702	1,87,949	88,651	2,67,348	5,377	5,69,921	2,81,688	27,78,994
	Quarter 2	10,86,318	3,60,363	2,03,038	92,368	3,40,303	9,970	6,05,624	2,68,719	29,66,703
	Quarter 3	11,14,920	3,68,350	2,08,847	95,795	3,49,255	7,897	6,05,558	2,66,436	30,17,058
	Quarter 4	11,70,987	3,86,016	2,29,852	1,01,392	5,73,946	12,255	6,30,189	2,71,589	33,76,226
Tested for TB	Quarter 1	15,184	6,212	3,162	1,390	14,388	892	3,819	1,157	46,204
	Quarter 2	17,681	7,485	3,376	1,495	15,538	117	4,229	1,414	51,335
	Quarter 3	18,540	6,695	3,557	1,567	21,180	142	4,261	1,329	57,271
	Quarter 4	19,574	7,614	3,899	1,823	38,366	394	4,853	1,296	77,819
Diagnosed with TB	Quarter 1	147	55	112	12	195	2	84	21	628
	Quarter 2	145	75	110	11	270	2	106	14	733
	Quarter 3	133	59	85	12	288	2	116	14	709
	Quarter 4	136	72	88	9	442	3	127	29	906
Initiated on TB treatment	Quarter 1	139	51	99	12	194	2	75	15	587
	Quarter 2	144	68	77	7	266	2	95	10	669
	Quarter 3	111	49	58	8	278	2	114	7	627
	Quarter 4	131	70	57	8	437	2	97	14	816

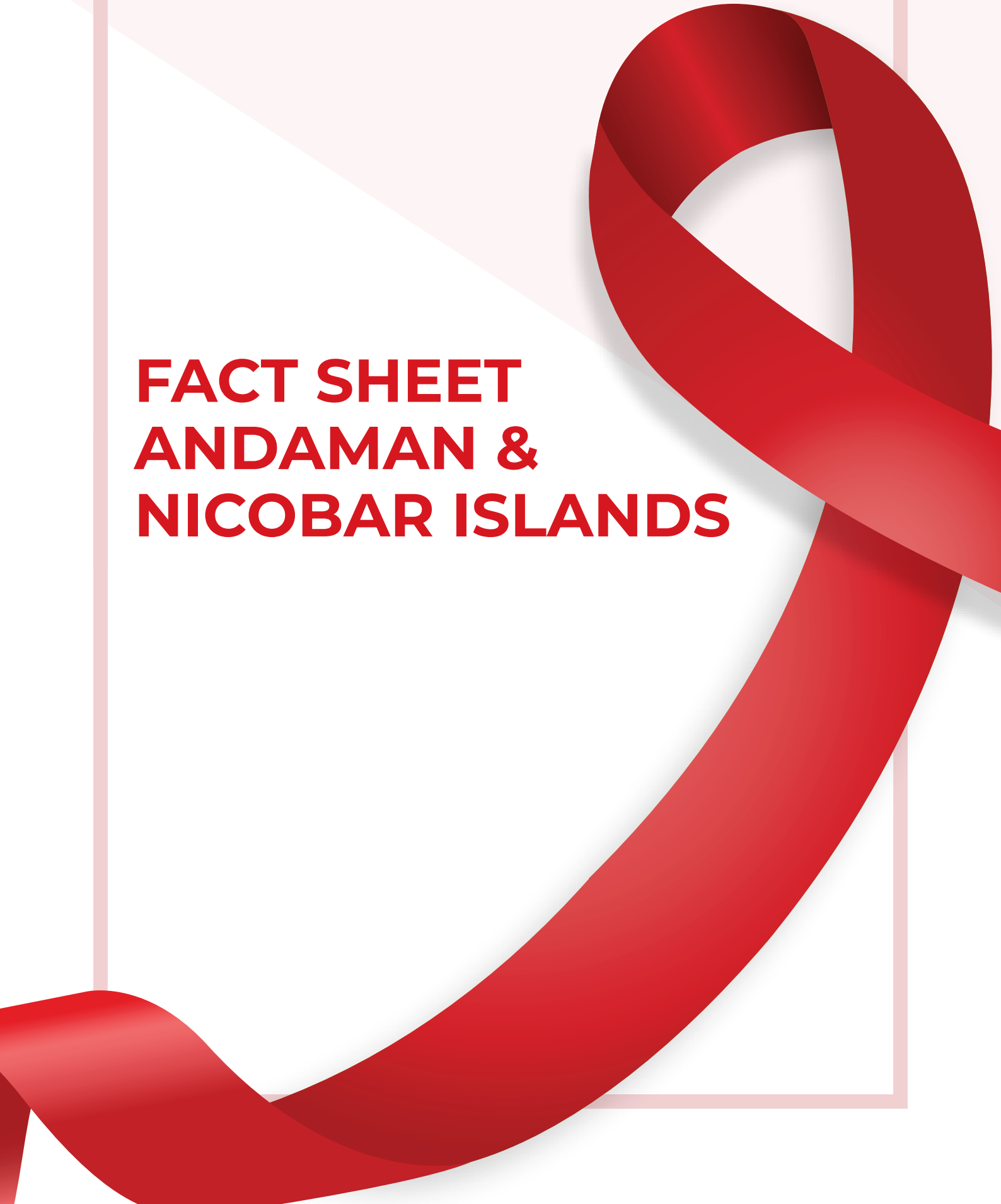
B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	10,17,988	9,75,310	33,306	32,219	1,931	9,763		
May - 24	11,78,090	11,34,025	48,282	41,686	2,311	12,183		
Jun - 24	11,10,008	10,65,357	45,285	38,569	2,112	13,212		
Jul - 24	11,68,750	11,19,835	54,192	43,154	2,226	15,678		
Aug - 24	11,26,637	10,78,066	51,934	42,160	1,981	15,619		
Sep - 24	11,01,479	10,55,482	45,764	41,626	1,905	18,374		
Oct - 24	10,96,623	10,57,176	43,769	41,178	1,962	13,848		
Nov - 24	10,75,558	10,38,194	43,888	41,473	1,926	13,201		
Dec - 24	10,92,291	10,54,880	52,852	48,577	1,950	13,854		
Jan - 25	10,83,007	10,32,511	62,210	56,380	2,142	12,434		
Feb - 25	10,25,119	981,157	57,143	52,214	1,951	11,054		
Mar - 25	10,72,476	10,28,065	49,662	45,619	2,183	12,943		
April 2024-March 2025							32,296	30,435

FACT SHEET STATES/UTS

FACT SHEET ANDAMAN & NICOBAR ISLANDS



ANDAMAN & NICOBAR ISLANDS

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	3.79
2. IMR	-	-	1.90
3. Adult (15-49 yrs) HIV Prevalence (%)	0.18	0.13	0.16
4. People living with HIV	300	200	501
5. ART coverage (%)	51.00	43.00	47.70
6. Children living with HIV	8	8	16
7. Annual new HIV infections	12	7	19
8. Annual AIDS-related deaths (ARD)	4	3	7
9. Change in annual new HIV infections since 2010 (%)	-53.85	-56.25	-55.81
10. Change in annual ARD since 2010 (%)	-63.64	-57.14	-61.11
11. EVTH need	-	4	4

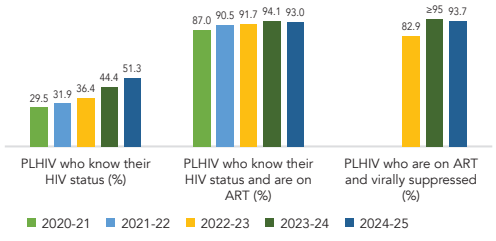
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	-	-	-	-
2. Men who have sex with men	-	-	-	-
3. Injecting Drug Users	-	-	-	-
4. Hijra/Transgender People	-	-	-	-
5. Migrants	-	-	-	-
6. Truckers	-	-	-	-
7. Prison inmates	1,119	-	-	-

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	34.70	14.90	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	37.00	14.80	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	59.90	66.50	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	64.40	72.90	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	3.80	0.10	-
5.1 Condom use during last higher-risk intercourse (%)	84.10	0.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	5.88	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	100.00	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	300	200	501
2. PLHIV who know their HIV Status	166	91	257
3. PLHIV who know their HIV status and are on ART	153	86	239
4. PLHIV who are on ART and tested for their viral load	104	71	175
4.1 PLHIV who are virally suppressed	101	63	164

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	122
2. Colleges with operational Red Ribbon Clubs (RRC)	15
3. Persons trained under mainstreaming	34
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				1
	Male	Female	TG	Total
2. Clients managed				8,909
3. RPR Tests conducted at DSRC	3,554	4,177	1	7,732
4. Syphilis seropositivity (%) at DSRC	2.36	1.15	100.00	1.72

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	1
2. OST centres (Excluding Satellite OST centres)	0

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Condoms distributed	1,720
4. Tested for HIV (April 2024-September 2024)	49
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	77
5.1. HIV sero-positive (%)	0.00
5.1.1. Linked to ART	0
6. Clinic Visits	326
7. STI/RTI treated	2
8. Presumptive treatment	-

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Condoms distributed	781
4. Tested for HIV (April 2024-September 2024)	11
4.1. HIV sero-positive (%)	36.36
4.1.1. Linked to ART	4
5. Tested for HIV (October 2024 -March 2025)	5
5.1. HIV sero-positive (%)	40.00
5.1.1. Linked to ART	2
6. Clinic Visits	237
7. STI/RTI treated	5
8. Presumptive treatment	0

D. Injecting drug users

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Needles distributed	0
4. Syringes distributed	0
5. On OST	0
6. Tested for HIV (April 2024-September 2024)	0
6.1. HIV sero-positive (%)	-
6.1.1 Linked to ART	0
7. Tested for HIV (October 2023 -March 2024)	0
7.1. HIV sero-positive (%)	-
7.1.1. Linked to ART	0

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Condoms distributed	195
4. Tested for HIV (April 2024-September 2024)	2
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	3
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	31
7. STI/RTI treated	1
8. Presumptive treatment	0

F. Migrants

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	3,450
3.1 HIV sero-positive (%)	0.03
3.2. Linked to ART	0

G. Truckers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	1,961
3.1. HIV sero-positive (%)	0.05
3.2. On ART	1

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	4
2. Prisons covered under programme	2
3. Total inmates admitted in prisons	1,119
4. Inmates Covered in prisons (%)	85.0
5. Tested for HIV in prisons	951
5.1. HIV sero-positive (%)	0.11
5.2. On ART (%)	≥95
6. Total OCS	0
7. OCS covered under programme	0
8. Total inmates admitted in OCS	0
9. Inmates Covered in OCS (%)	0.00
10.Tested for HIV in OCS	0
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.00

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	-
1.1. OSTC in Public Health Settings	-
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	-

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	13
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	17,642	12,556	-	30,198
1.1 HIV Positives	40	3	-	43
1.2 HIV sero-positivity (%)	0.23	0.02	-	0.14
2. Contacts of HIV positive people tested#				85
2.1 HIV Positives*				-
2.2 HIV sero-positivity (%)				0.00
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	1
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	-
4. Care Support Centres	-

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	40	6	-	46
2. New PLHIV Registered at ART center	40	7	-	47
2.1 Initiated on ART	38	7	-	45
3. PLHIV alive and on ART#	153	86	-	239
4. 12 months retention on ART (%)				100.00
5. Lost to follow-up cases	13	5	-	18

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	202
2.1. Suppressed test result (%)	85.15
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	1
5.1 CD4 tests conducted	52
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100.00
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	4,016
2. HIV testing coverage (%)	80.9
3. HIV sero-positivity (%) among tested	0.09
4. HIV Positive PW (old + new detections)	6
4.1 On life-long ART	5
5. Live births among HIV positive PW	1
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	1
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	-
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.20
3. Put on treatment	8

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	34	12	-	2	105	-	1,042	127	1,322
	Quarter 2	33	21	-	2	155	-	1,338	1,132	2,681
	Quarter 3	28	8	-	1	165	-	690	281	1,173
	Quarter 4	54	11	-	2	513	-	516	594	1,690
Tested for TB	Quarter 1	-	2	-	-	39	-	-	-	41
	Quarter 2	-	1	-	-	1	-	19	-	21
	Quarter 3	-	-	-	-	4	-	-	-	4
	Quarter 4	-	1	-	-	8	-	-	2	11
Diagnosed with TB	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	1	-	-	-	1
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	2	-	-	-	2
Initiated on TB treatment	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	1	-	-	-	1
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	2	-	-	-	2

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	135	135	1	1	-	2		
May - 24	101	101	-	-	-	1		
Jun - 24	115	115	-	-	-	2		
Jul - 24	169	169	-	-	-	7		
Aug - 24	156	156	2	2	-	1		
Sep - 24	153	153	-	-	-	3		
Oct - 24	182	182	-	-	-	3		
Nov - 24	154	154	-	-	-	4		
Dec - 24	142	142	-	-	-	4		
Jan - 25	178	178	2	2	2	8		
Feb - 25	143	143	-	-	-	1		
Mar - 25	155	155	-	-	-	3		
April 2024-March 2025							9	9

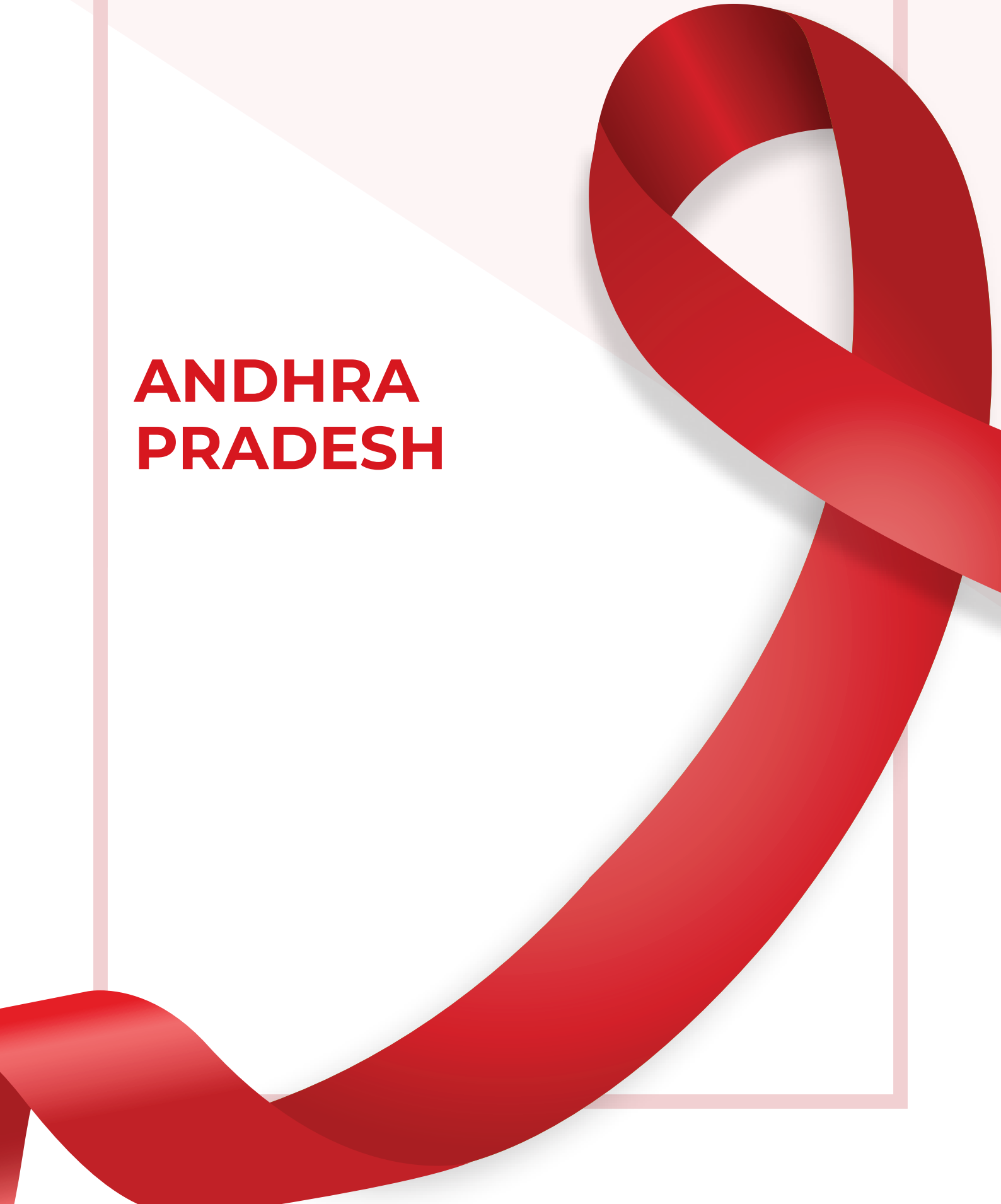
NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Andaman & Nicobar Islands
Rank		2
Sl. No.	Obtained Score [%]	76.4
	Obtained Score [N]	126
	Maximum Score [N]	165
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	51
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	93
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	94
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	93
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	NA
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	133
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	28
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	105
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	56
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	39
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	NA
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G:≥95%, Y: 80-94%, R:<80% or >150%]	144
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	67
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	80
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	100
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	84
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	100
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	158
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	100
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	100
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	89
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R≥5%]	2
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	0
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	25
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	NA
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	NA
39	Districts reports received by NACO from SACS [G:>75%, Y: 50%, R:<50%]	NA
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	NA
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	78
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	16-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	27-08-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R-After 31 December]	26-12-2023
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	NA
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	97

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable
Weight points	Indicators Sl. No.		
3	1,22,29		
2	2,3,9,10,21,27,28,33,45,47		
1	4-8,11-20, 23-26,30-32, 34-44,46		

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

ANDHRA PRADESH



ANDHRA PRADESH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	0.92
2. IMR	-	-	0.35
3. Adult (15-49 yrs) HIV Prevalence (%)	0.58	0.58	0.58
4. People living with HIV	1,55,196	1,55,255	3,10,451
5. ART coverage (%)	66.56	82.43	74.76
6. Children living with HIV	2,250	2,087	4,337
7. Annual new HIV infections	1,617	1,247	2,864
8. Annual AIDS-related deaths (ARD)	3,254	1,110	4,364
9. Change in annual new HIV infections since 2010 (%)	-76.85	-77.10	-76.96
10. Change in annual ARD since 2010 (%)	-86.12	-92.71	-88.72
11. EVTH need	-	1,686	1,686

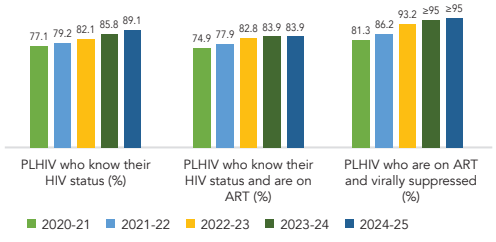
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	1,19,367	99.20	-	0.78
2. Men who have sex with men	22,060	99.10	-	0.60
3. Injecting Drug Users	1,332	-	99.50	0.53
4. Hijra/Transgender People	5,364	-	-	5.96
5. Migrants	1,99,533	98.40	-	0.27
6. Truckers	52,345	95.70	-	0.80
7. Prison inmates	70,998	90.70	71.40	2.58

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	38.60	24.60	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	38.10	27.20	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	66.40	64.10	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	72.10	64.30	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	3.80	0.10	-
5.1 Condom use during last higher-risk intercourse (%)	31.30	0.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	5.17	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	42.86	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	1,55,196	1,55,255	3,10,451
2. PLHIV who know their HIV Status	1,27,244	1,48,353	2,76,633
3. PLHIV who know their HIV status and are on ART	1,03,299	1,27,979	2,32,086
4. PLHIV who are on ART and tested for their viral load	92,470	1,14,507	2,07,639
4.1 PLHIV who are virally suppressed	89,688	1,12,285	2,02,610

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	3,289
2. Colleges with operational Red Ribbon Clubs (RRC)	457
3. Persons trained under mainstreaming	52
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				55
	Male	Female	TG	Total
2. Clients managed				7,52,553
3. RPR Tests conducted at DSRC	68,035	1,61,173	2,052	2,31,260
4. Syphilis seropositivity (%) at DSRC	0.73	0.15	1.12	0.33

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	96
2. OST centres (Excluding Satellite OST centres)	2

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	1,19,367
2. Coverage (%)	≥95
3. Condoms distributed	4,67,28,862
4. Tested for HIV (April 2024-September 2024)	1,24,772
4.1. HIV sero-positive (%)	0.04
4.1.1. Linked to ART	39
5. Tested for HIV (October 2024 -March 2025)	1,31,342
5.1. HIV sero-positive (%)	0.08
5.1.1. Linked to ART	37
6. Clinic Visits	5,07,260
7. STI/RTI treated	1,612
8. Presumptive treatment	19,044

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	22,060
2. Coverage (%)	≥95
3. Condoms distributed	96,56,667
4. Tested for HIV (April 2024-September 2024)	25,611
4.1. HIV sero-positive (%)	0.18
4.1.1. Linked to ART	28
5. Tested for HIV (October 2024 -March 2025)	27,313
5.1. HIV sero-positive (%)	0.10
5.1.1. Linked to ART	18
6. Clinic Visits	1,05,810
7. STI/RTI treated	232
8. Presumptive treatment	3,335

D. Injecting drug users

Indicator	2024-25
1. Estimated size	1,332
2. Coverage (%)	≥95
3. Needles distributed	6,06,294
4. Syringes distributed	6,06,294
5. On OST	727
6. Tested for HIV (April 2024-September 2024)	2,311
6.1. HIV sero-positive (%)	0.09
6.1.1 Linked to ART	2
7. Tested for HIV (October 2023 -March 2024)	2,432
7.1. HIV sero-positive (%)	0.00
7.1.1. Linked to ART	0

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	5,364
2. Coverage (%)	≥95
3. Condoms distributed	18,70,544
4. Tested for HIV (April 2024-September 2024)	4,360
4.1. HIV sero-positive (%)	0.44
4.1.1. Linked to ART	12
5. Tested for HIV (October 2024 -March 2025)	4,675
5.1. HIV sero-positive (%)	0.19
5.1.1. Put on ART	6
6. Clinic Visits	18,511
7. STI/RTI treated	61
8. Presumptive treatment	604

F. Migrants

Indicator	2024-25
1. Estimated size	1,99,533
2. Coverage (%)	36.79
3. Tested for HIV	48,797
3.1 HIV sero-positive (%)	0.05
3.2. Linked to ART	22

G. Truckers

Indicator	2024-25
1. Estimated size	52,345
2. Coverage (%)	60.00
3. Tested for HIV	19,295
3.1. HIV sero-positive (%)	0.05
3.2. On ART	5

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	106
2. Prisons covered under programme	81
3. Total inmates admitted in prisons	70,998
4. Inmates Covered in prisons (%)	82.6
5. Tested for HIV in prisons	58,616
5.1. HIV sero-positive (%)	0.14
5.2. On ART (%)	81.9
6. Total OCS	35
7. OCS covered under programme	37
8. Total inmates admitted in OCS	3,500
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	4,744
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.00

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	13
2. Vulnerable population covered	1,53,857
3. Tested for HIV	1,11,279
3.1. HIV sero-positive (%)	0.36
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	2
1.1. OSTC in Public Health Settings	2
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	1
2. IDU on OST	727

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	234
2. Sampoorna Suraksha Kendras	12

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	9,67,746	9,68,490	13,018	19,49,254
1.1 HIV Positives	7,433	5,656	82	13,171
1.2 HIV sero-positivity (%)	0.77	0.58	0.63	0.68
2. Contacts of HIV positive people tested#				41,189
2.1 HIV Positives*				2,221
2.2 HIV sero-positivity (%)				5.39
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				14,623

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	60
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	106
4. Care Support Centres	23

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	7,433	6,135	82	13,650
2. New PLHIV Registered at ART center	7,310	6,014	69	13,393
2.1 Initiated on ART	7,244	5,978	69	13,291
3. PLHIV alive and on ART#	1,03,299	1,27,979	809	2,32,086
4. 12 months retention on ART (%)				95.4
5. Lost to follow-up cases	8,404	6,207	134	14,745

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	10
1.1 Accredited Viral load laboratories (out of 64 VL labs)	10
2. Viral load tests conducted	2,33,367
2.1. Suppressed test result (%)	92.56
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	7
4.1 Accredited SRL	7
5. CD4 machines	22
5.1 CD4 tests conducted	62,041
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	97
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	59

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	8,39,160
2. HIV testing coverage (%)	80.8
3. HIV sero-positivity (%) among tested	0.07
4. HIV Positive PW (old + new detections)	1,460
4.1 On life-long ART	1,401
5. Live births among HIV positive PW	950
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	977
6.1 Babies confirmed HIV Positive (6 week- 6 month)	1
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	766
7.2 Babies confirmed HIV positive at 18 months	5
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	8
9. HIV positive babies initiated on ART	6

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	84.4
2. Sero-positivity (%) among tested	0.01
3. Put on treatment	81

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	1,67,534	33,464	2,002	5,479	10,810	783	12,100	5,370	2,37,542
	Quarter 2	1,75,426	34,684	2,325	5,645	15,994	1,111	12,843	5,661	2,53,689
	Quarter 3	1,84,991	36,856	2,225	6,265	16,644	1,197	13,697	4,517	2,66,392
	Quarter 4	1,85,737	38,033	1,610	6,472	16,280	1,728	14,337	4,437	2,68,634
Tested for TB	Quarter 1	1,651	342	30	44	1	-	74	-	2,142
	Quarter 2	1,766	235	7	68	19	-	53	2	2,150
	Quarter 3	2,634	534	45	182	12	-	58	5	3,470
	Quarter 4	2,566	517	39	206	4	-	63	4	3,399
Diagnosed with TB	Quarter 1	1	-	-	-	-	-	-	-	1
	Quarter 2	1	4	-	-	1	-	4	-	10
	Quarter 3	1	1	-	-	5	-	-	5	12
	Quarter 4	1	-	-	-	2	-	-	4	7
Initiated on TB treatment	Quarter 1	1	-	-	-	-	-	-	-	1
	Quarter 2	1	4	-	-	1	-	4	-	10
	Quarter 3	1	1	-	-	4	-	-	-	6
	Quarter 4	1	-	-	-	2	-	-	-	3

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	1,64,302	1,62,513	5,544	5,539	208	1,112		
May - 24	1,59,420	1,57,612	5,690	5,686	190	1,186		
Jun - 24	1,49,624	1,47,837	4,906	4,840	180	1,347		
Jul - 24	1,59,914	1,58,113	5,769	5,765	173	1,888		
Aug - 24	1,48,850	1,46,890	4,990	4,989	164	1,943		
Sep - 24	1,46,715	1,44,503	4,958	4,955	157	3,621		
Oct - 24	1,44,975	1,42,867	5,012	5,006	168	1,848		
Nov - 24	1,40,326	1,38,254	5,560	5,555	189	1,495		
Dec - 24	1,39,085	1,36,902	4,954	4,949	156	1,394		
Jan - 25	1,31,211	1,28,608	4,952	4,950	150	1,059		
Feb - 25	1,28,203	1,26,362	4,580	4,577	159	1,342		
Mar - 25	1,31,286	1,28,698	4,507	4,505	189	2,198		
April 2024-March 2025							3,255	3,209

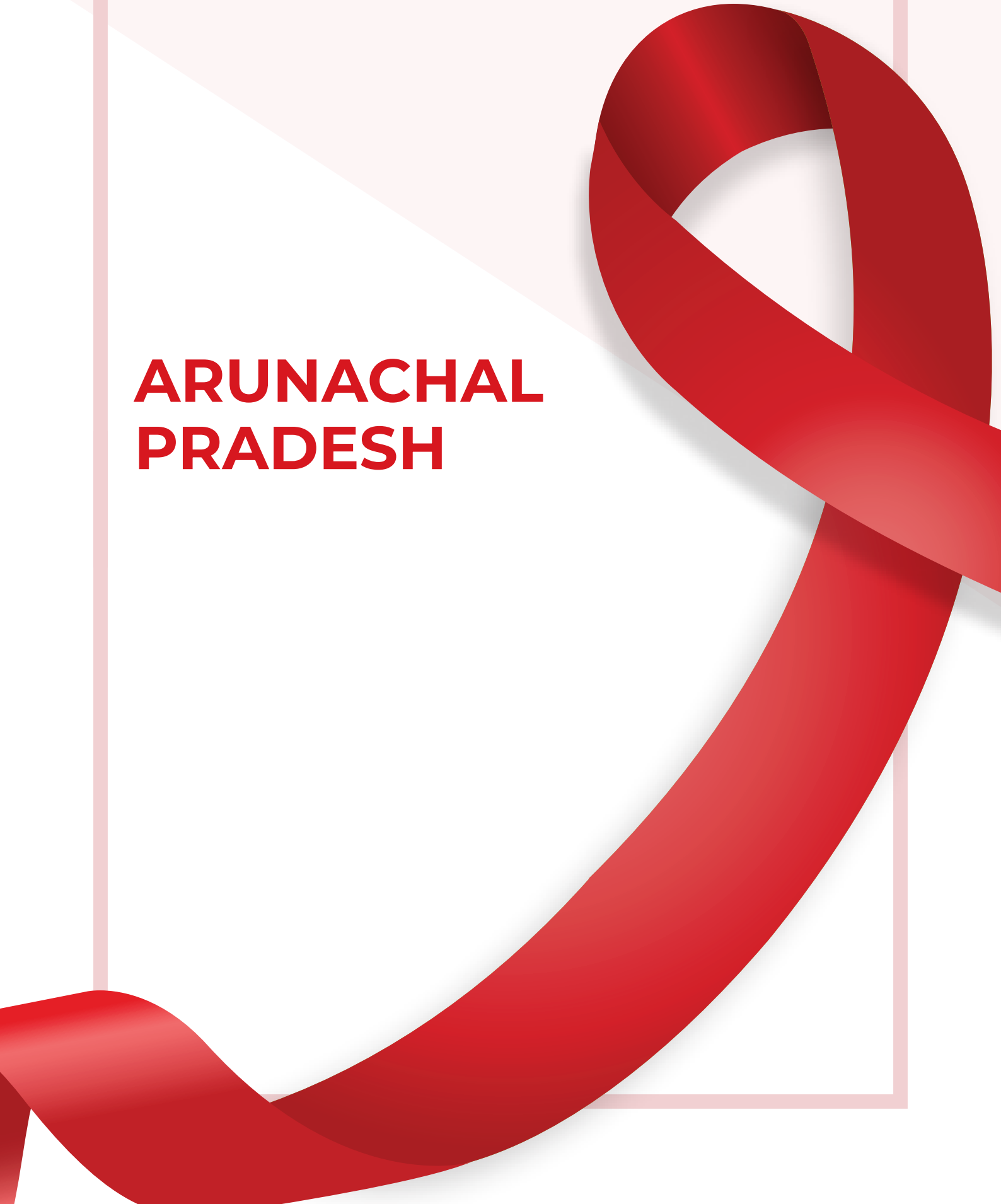
NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Andhra Pradesh
Rank		12
Sl. No.	Obtained Score [%]	68.8
	Obtained Score [N]	130
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	89
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	84
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	41
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	134
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	94
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	67
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	92
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	85
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	57
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	114
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	73
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	76
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	87
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	64
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	110
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	84
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	73
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	60
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	90
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	98
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	6
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	6
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	97
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	50
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	3
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	15
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	38
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	67
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	90
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	30-04-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	31-01-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	20-12-2023
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	95

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable
Weight points	Indicators Sl. No.		
3	1,22,29		
2	2,3,9,10,21,27,28,33,45,47		
1	4-8,11-20, 23-26,30-32, 34-44,46		

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

ARUNACHAL PRADESH



ARUNACHAL PRADESH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	12.47
2. IMR	-	-	13.12
3. Adult (15-49 yrs) HIV Prevalence (%)	0.37	0.16	0.26
4. People living with HIV	1,863	768	2,630
5. ART coverage (%)	85.74	30.69	70.00
6. Children living with HIV	26	25	51
7. Annual new HIV infections	233	94	328
8. Annual AIDS-related deaths (ARD)	7	9	16
9. Change in annual new HIV infections since 2010 (%)	454.76	452.94	455.93
10. Change in annual ARD since 2010 (%)	75.00	350.00	128.57
11. EVTH need	-	25	25

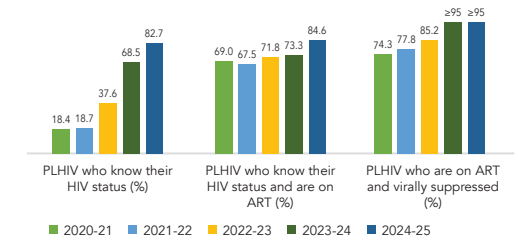
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	6,941	99.00	-	0.27
2. Men who have sex with men	901	-	-	-
3. Injecting Drug Users	5,143	-	89.60	7.58
4. Hijra/Transgender People	140	-	-	-
5. Migrants	40,500	-	-	-
6. Truckers	-	-	-	-
7. Prison inmates	960	-	-	-

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	33.40	12.30	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	35.40	15.50	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	67.90	56.70	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	59.30	50.30	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	7.40	2.00	-
5.1 Condom use during last higher-risk intercourse (%)	75.80	58.50	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	12.35	3.96	-
6.1 Condom use during last higher-risk intercourse (%)	80.00	62.16	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	1,863	768	2,630
2. PLHIV who know their HIV Status	1,835	330	2,176
3. PLHIV who know their HIV status and are on ART	1,597	236	1,841
4. PLHIV who are on ART and tested for their viral load	321	91	413
4.1 PLHIV who are virally suppressed	315	89	405

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	310
2. Colleges with operational Red Ribbon Clubs (RRC)	46
3. Persons trained under mainstreaming	37
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				18
	Male	Female	TG	Total
2. Clients managed				48,273
3. RPR Tests conducted at DSRC	2,483	2,971	1	5,455
4. Syphilis seropositivity (%) at DSRC	16.79	12.02	100.00	14.21

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	33
2. OST centres (Excluding Satellite OST centres)	5

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	6,941
2. Coverage (%)	≥95
3. Condoms distributed	8,92,737
4. Tested for HIV (April 2024-September 2024)	6,009
4.1. HIV sero-positive (%)	0.07
4.1.1. Linked to ART	3
5. Tested for HIV (October 2024 -March 2025)	6,135
5.1. HIV sero-positive (%)	0.03
5.1.1. Linked to ART	0
6. Clinic Visits	19,871
7. STI/RTI treated	252
8. Presumptive treatment	1,223

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	901
2. Coverage (%)	≥95
3. Condoms distributed	1,30,306
4. Tested for HIV (April 2024-September 2024)	839
4.1. HIV sero-positive (%)	0.60
4.1.1. Linked to ART	5
5. Tested for HIV (October 2024 -March 2025)	939
5.1. HIV sero-positive (%)	0.64
5.1.1. Linked to ART	5
6. Clinic Visits	3,146
7. STI/RTI treated	59
8. Presumptive treatment	171

D. Injecting drug users

Indicator	2024-25
1. Estimated size	5,143
2. Coverage (%)	≥95
3. Needles distributed	6,88,439
4. Syringes distributed	6,87,568
5. On OST	727
6. Tested for HIV (April 2024-September 2024)	6,545
6.1. HIV sero-positive (%)	1.93
6.1.1 Linked to ART	108
7. Tested for HIV (October 2023 -March 2024)	6,615
7.1. HIV sero-positive (%)	0.57
7.1.1. Linked to ART	29

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	140
2. Coverage (%)	≥95
3. Condoms distributed	21,554
4. Tested for HIV (April 2024-September 2024)	161
4.1. HIV sero-positive (%)	0.62
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	170
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	562
7. STI/RTI treated	562
8. Presumptive treatment	40

F. Migrants

Indicator	2024-25
1. Estimated size	40,500
2. Coverage (%)	≥95
3. Tested for HIV	15,941
3.1 HIV sero-positive (%)	0.03
3.2. Linked to ART	3

G. Truckers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	0
3.1. HIV sero-positive (%)	-
3.2. On ART	0

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	2
2. Prisons covered under programme	12
3. Total inmates admitted in prisons	960
4. Inmates Covered in prisons (%)	≥95
5. Tested for HIV in prisons	1,112
5.1. HIV sero-positive (%)	2.97
5.2. On ART (%)	84.8
6. Total OCS	3
7. OCS covered under programme	13
8. Total inmates admitted in OCS	1,000
9. Inmates Covered in OCS (%)	70.7
10.Tested for HIV in OCS	707
10.1. HIV sero-positive (%)	0.42
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	5
1.1. OSTC in Public Health Settings	5
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	14
2. IDU on OST	727

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	31
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	49,421	33,830	425	83,676
1.1 HIV Positives	467	68	-	535
1.2 HIV sero-positivity (%)	0.94	0.20	0.00	0.64
2. Contacts of HIV positive people tested#				242
2.1 HIV Positives*				177
2.2 HIV sero-positivity (%)				73.14
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				891

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	2
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	5
4. Care Support Centres	-

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	467	81	-	548
2. New PLHIV Registered at ART center	1,325	140	11	1,476
2.1 Initiated on ART	1,306	139	11	1,456
3. PLHIV alive and on ART#	1,597	236	8	1,841
4. 12 months retention on ART (%)				89.5
5. Lost to follow-up cases	108	50	-	158

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	493
2.1. Suppressed test result (%)	95.74
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	2
5.1 CD4 tests conducted	1,007
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	91
6.2. Average Discordance (%)	0.96
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	3

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	27,817
2. HIV testing coverage (%)	75.1
3. HIV sero-positivity (%) among tested	0.06
4. HIV Positive PW (old + new detections)	20
4.1 On life-long ART	19
5. Live births among HIV positive PW	11
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	6
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	2
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	3
9. HIV positive babies initiated on ART	2

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	1.86
3. Put on treatment	338

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	3,929	548	3,769	137	7	67	6,404	-	14,861
	Quarter 2	4,124	612	4,013	118	1,390	636	7,372	-	18,265
	Quarter 3	4,109	617	3,804	121	464	254	7,475	-	16,844
	Quarter 4	4,368	657	4,206	115	399	179	7,265	-	17,189
Tested for TB	Quarter 1	20	2	45	-	-	-	-	-	67
	Quarter 2	11	-	21	-	26	-	1	-	59
	Quarter 3	17	3	18	-	32	9	3	-	82
	Quarter 4	36	-	36	-	33	9	1	-	115
Diagnosed with TB	Quarter 1	-	-	8	-	-	-	-	-	8
	Quarter 2	1	-	-	-	-	-	-	-	1
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	1	-	-	-	1	-	2
Initiated on TB treatment	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	1	-	-	-	-	-	-	-	1
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	1	-	-	-	1	-	2

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	20	-	1	-	-	-		
May - 24	593	593	27	27	-	-		
Jun - 24	407	407	19	19	1	-		
Jul - 24	594	594	10	10	4	277		
Aug - 24	588	588	13	13	-	67		
Sep - 24	516	516	43	43	1	54		
Oct - 24	558	548	10	10	2	33		
Nov - 24	539	539	17	17	-	31		
Dec - 24	526	526	24	24	-	43		
Jan - 25	469	469	21	21	1	25		
Feb - 25	470	470	27	27	-	33		
Mar - 25	570	570	22	22	-	38		
April 2024-March 2025							22	22

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Arunachal Pradesh
	Rank	**25**
Sl. No.	Obtained Score [%]	56.1
	Obtained Score [N]	106
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	83
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	85
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	44
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	79
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	133
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	83
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	93
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	62
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	80
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	17
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	93
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	72
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	99
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	63
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	27
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	55
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	141
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	39
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	33
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	89
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	42
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	7
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	2
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	91
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	0
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	1
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	0
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	25
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	25
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	0
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	99
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	08-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	22-11-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	24-04-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	87
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	40

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

ASSAM



ASSAM

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	5.30
2. IMR	-	-	3.82
3. Adult (15-49 yrs) HIV Prevalence (%)	0.18	0.08	0.13
4. People living with HIV	22,533	10,615	33,148
5. ART coverage (%)	57.59	49.52	55.15
6. Children living with HIV	319	296	615
7. Annual new HIV infections	1,233	524	1,757
8. Annual AIDS-related deaths (ARD)	121	121	243
9. Change in annual new HIV infections since 2010 (%)	8.44	8.04	8.32
10. Change in annual ARD since 2010 (%)	-69.29	-17.12	-55.00
11. EVTH need	-	262	262

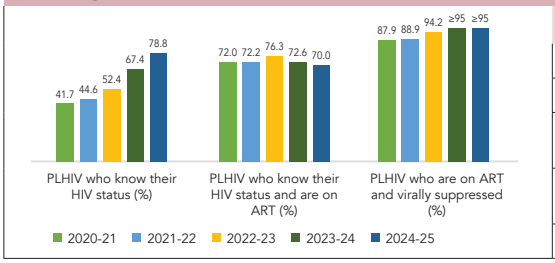
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	39,721	99.40	-	1.21
2. Men who have sex with men	16,667	91.50	-	4.90
3. Injecting Drug Users	26,156	-	98.50	22.10
4. Hijra/Transgender People	2,481	-	-	-
5. Migrants	20,000	77.40	-	0.80
6. Truckers	25,000	-	-	1.60
7. Prison inmates	57,381	17.60	47.70	4.17

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	25.30	19.20	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	27.40	19.00	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	75.60	76.10	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	69.10	72.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	1.10	0.30	-
5.1 Condom use during last higher-risk intercourse (%)	62.60	40.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	1.79	0.49	-
6.1 Condom use during last higher-risk intercourse (%)	69.23	25.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	22,533	10,615	33,148
2. PLHIV who know their HIV Status	19,298	6,738	26,109
3. PLHIV who know their HIV status and are on ART	12,978	5,257	18,281
4. PLHIV who are on ART and tested for their viral load	6,885	3,635	10,551
4.1 PLHIV who are virally suppressed	6,702	3,502	10,235

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	500
2. Colleges with operational Red Ribbon Clubs (RRC)	320
3. Persons trained under mainstreaming	40
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				28
	Male	Female	TG	Total
2. Clients managed				1,70,603
3. RPR Tests conducted at DSRC	12,656	10,549	98	23,303
4. Syphilis seropositivity (%) at DSRC	3.62	1.57	14.29	2.74

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	73
2. OST centres (Excluding Satellite OST centres)	6

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	39,721
2. Coverage (%)	51.40
3. Condoms distributed	40,27,467
4. Tested for HIV (April 2024-September 2024)	15,929
4.1. HIV sero-positive (%)	0.14
4.1.1. Linked to ART	28
5. Tested for HIV (October 2024 -March 2025)	18,002
5.1. HIV sero-positive (%)	0.09
5.1.1. Linked to ART	14
6. Clinic Visits	63,811
7. STI/RTI treated	1,153
8. Presumptive treatment	4,239

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	16,667
2. Coverage (%)	41.53
3. Condoms distributed	10,42,426
4. Tested for HIV (April 2024-September 2024)	5,677
4.1. HIV sero-positive (%)	0.92
4.1.1. Linked to ART	48
5. Tested for HIV (October 2024 -March 2025)	6,282
5.1. HIV sero-positive (%)	0.41
5.1.1. Linked to ART	23
6. Clinic Visits	23,421
7. STI/RTI treated	346
8. Presumptive treatment	1,253

D. Injecting drug users

Indicator	2024-25
1. Estimated size	26,156
2. Coverage (%)	89.02
3. Needles distributed	46,03,481
4. Syringes distributed	46,63,887
5. On OST	4,047
6. Tested for HIV (April 2024-September 2024)	14,552
6.1. HIV sero-positive (%)	4.99
6.1.1 Linked to ART	603
7. Tested for HIV (October 2023 -March 2024)	16,219
7.1. HIV sero-positive (%)	3.21
7.1.1. Linked to ART	445

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	2,481
2. Coverage (%)	37.88
3. Condoms distributed	1,57,602
4. Tested for HIV (April 2024-September 2024)	812
4.1. HIV sero-positive (%)	0.12
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	864
5.1. HIV sero-positive (%)	0.23
5.1.1. Put on ART	1
6. Clinic Visits	3,300
7. STI/RTI treated	66
8. Presumptive treatment	131

F. Migrants

Indicator	2024-25
1. Estimated size	20,000
2. Coverage (%)	93.00
3. Tested for HIV	10,453
3.1 HIV sero-positive (%)	0.52
3.2. Linked to ART	40

G. Truckers

Indicator	2024-25
1. Estimated size	25,000
2. Coverage (%)	≥95
3. Tested for HIV	8,301
3.1. HIV sero-positive (%)	0.28
3.2. On ART	19

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	31
2. Prisons covered under programme	31
3. Total inmates admitted in prisons	57,381
4. Inmates Covered in prisons (%)	33.1
5. Tested for HIV in prisons	18,993
5.1. HIV sero-positive (%)	2.25
5.2. On ART (%)	87.1
6. Total OCS	47
7. OCS covered under programme	16
8. Total inmates admitted in OCS	550
9. Inmates Covered in OCS (%)	28.2
10.Tested for HIV in OCS	155
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.00

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	1
2. Vulnerable population covered	639
3. Tested for HIV	30
3.1. HIV sero-positive (%)	6.67
3.2. Linked to ART (%)	≥95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	6
1.1. OSTC in Public Health Settings	6
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	12
2. IDU on OST	4,047

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	107
2. Sampoorna Suraksha Kendras	14

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	2,39,469	1,74,582	718	4,14,769
1.1 HIV Positives	5,858	607	18	6,483
1.2 HIV sero-positivity (%)	2.45	0.35	2.51	1.56
2. Contacts of HIV positive people tested#				4,993
2.1 HIV Positives*				1,752
2.2 HIV sero-positivity (%)				35.09
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				2,081

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	9
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	8
4. Care Support Centres	3

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	5,858	785	18	6,661
2. New PLHIV Registered at ART center	4,720	783	13	5,516
2.1 Initiated on ART	4,540	753	13	5,306
3. PLHIV alive and on ART#	12,978	5,257	46	18,281
4. 12 months retention on ART (%)				92.4
5. Lost to follow-up cases	5,762	1,184	24	6,970

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	11,419
2.1. Suppressed test result (%)	94.82
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	3
4.1 Accredited SRL	3
5. CD4 machines	5
5.1 CD4 tests conducted	11,331
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	98
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	9

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	7,32,178
2. HIV testing coverage (%)	40.9
3. HIV sero-positivity (%) among tested	0.06
4. HIV Positive PW (old + new detections)	269
4.1 On life-long ART	229
5. Live births among HIV positive PW	190
5.1 Babies given ARV Prophylaxis (%)	87.9
6. Babies tested HIV (6 week- 6 month)	138
6.1 Babies confirmed HIV Positive (6 week- 6 month)	1
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	85
7.2 Babies confirmed HIV positive at 18 months	4
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	7
9. HIV positive babies initiated on ART	6

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	45.8
2. Sero-positivity (%) among tested	0.08
3. Put on treatment	234

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	17,076	6,585	19,813	980	2,336	-	4,593	6,762	58,145
	Quarter 2	18,457	7,103	22,389	816	3,348	-	4,763	6,470	63,346
	Quarter 3	19,680	7,716	24,623	835	4,231	45	3,720	5,183	66,033
	Quarter 4	21,147	8,124	24,440	923	8,899	110	3,499	3,624	70,766
Tested for TB	Quarter 1	11	17	152	-	13	-	394	114	701
	Quarter 2	18	12	211	-	108	-	47	38	434
	Quarter 3	120	5	277	2	117	-	1	30	552
	Quarter 4	41	7	317	1	195	-	109	61	731
Diagnosed with TB	Quarter 1	-	-	2	-	1	-	-	-	3
	Quarter 2	2	-	34	-	2	-	-	-	38
	Quarter 3	7	-	28	-	1	-	-	-	36
	Quarter 4	1	1	27	-	-	-	-	-	29
Initiated on TB treatment	Quarter 1	-	-	2	-	2	-	-	-	4
	Quarter 2	-	-	5	-	2	-	-	-	7
	Quarter 3	1	-	4	-	1	-	-	-	6
	Quarter 4	1	-	4	-	-	-	-	-	5

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	5,988	5,987	88	38	24	234		
May - 24	7,022	7,022	210	144	32	234		
Jun - 24	7,220	7,219	152	87	20	259		
Jul - 24	7,090	7,067	217	164	31	332		
Aug - 24	7,165	7,165	118	79	30	549		
Sep - 24	7,011	7,011	107	63	20	540		
Oct - 24	6,938	6,938	99	72	12	398		
Nov - 24	6,808	6,808	135	117	17	275		
Dec - 24	8,115	8,115	114	58	19	349		
Jan - 25	7,485	7,485	117	95	23	260		
Feb - 25	6,872	6,872	136	124	16	143		
Mar - 25	7,725	7,725	157	137	26	191		
April 2024-March 2025							421	318

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Assam
	Rank	**27**
Sl. No.	Obtained Score [%]	54.0
	Obtained Score [N]	102
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	79
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	70
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	67
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	76
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	55
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	61
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	85
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	39
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	75
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	76
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	35
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	65
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	36
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	40
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	91
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	38
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	73
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	43
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	16
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	31
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	92
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	72
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	18
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	2
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	98
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	50
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	39
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	33
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	100
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	74
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	21-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	07-02-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	18-02-2025
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	86
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	86

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

BIHAR



BIHAR

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.99
2. IMR	-	-	2.87
3. Adult (15-49 yrs) HIV Prevalence (%)	0.18	0.14	0.16
4. People living with HIV	88,986	65,310	1,54,296
5. ART coverage (%)	57.07	64.41	60.29
6. Children living with HIV	2,823	2,595	5,418
7. Annual new HIV infections	4,566	3,128	7,694
8. Annual AIDS-related deaths (ARD)	857	408	1,265
9. Change in annual new HIV infections since 2010 (%)	-11.22	-11.71	-11.42
10. Change in annual ARD since 2010 (%)	-61.57	-76.74	-68.26
11. EVTH need	-	1,389	1,389

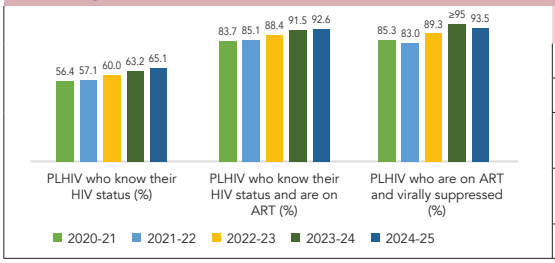
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	11,682	93.90	-	0.41
2. Men who have sex with men	2,376	-	-	-
3. Injecting Drug Users	4,585	-	87.50	2.00
4. Hijra/Transgender People	846	-	-	-
5. Migrants	-	-	-	-
6. Truckers	15,000	-	-	-
7. Prison inmates	338,197	45.50	68.80	0.17

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	25.10	10.30	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	25.30	10.10	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	81.50	76.70	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	65.20	68.60	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	5.00	0.40	-
5.1 Condom use during last higher-risk intercourse (%)	50.90	23.40	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	9.04	0.56	-
6.1 Condom use during last higher-risk intercourse (%)	51.45	33.33	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	88,986	65,310	1,54,296
2. PLHIV who know their HIV Status	55,182	45,044	1,00,416
3. PLHIV who know their HIV status and are on ART	50,784	42,068	93,023
4. PLHIV who are on ART and tested for their viral load	14,629	12,959	27,629
4.1 PLHIV who are virally suppressed	13,665	12,116	25,821

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	560
2. Colleges with operational Red Ribbon Clubs (RRC)	456
3. Persons trained under mainstreaming	1,180
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				44
	Male	Female	TG	Total
2. Clients managed				5,04,259
3. RPR Tests conducted at DSRC	84,160	1,65,070	204	2,49,434
4. Syphilis seropositivity (%) at DSRC	1.46	0.27	32.35	0.70

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	13
2. OST centres (Excluding Satellite OST centres)	2

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	11,682
2. Coverage (%)	53.33
3. Condoms distributed	18,45,347
4. Tested for HIV (April 2024-September 2024)	4,910
4.1. HIV sero-positive (%)	0.22
4.1.1. Linked to ART	10
5. Tested for HIV (October 2024 -March 2025)	5,204
5.1. HIV sero-positive (%)	0.19
5.1.1. Linked to ART	9
6. Clinic Visits	19,792
7. STI/RTI treated	155
8. Presumptive treatment	694

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	2,376
2. Coverage (%)	59.22
3. Condoms distributed	3,11,669
4. Tested for HIV (April 2024-September 2024)	965
4.1. HIV sero-positive (%)	0.93
4.1.1. Linked to ART	8
5. Tested for HIV (October 2024 -March 2025)	956
5.1. HIV sero-positive (%)	1.15
5.1.1. Linked to ART	11
6. Clinic Visits	3,983
7. STI/RTI treated	25
8. Presumptive treatment	126

D. Injecting drug users

Indicator	2024-25
1. Estimated size	4,585
2. Coverage (%)	66.50
3. Needles distributed	13,84,947
4. Syringes distributed	7,80,698
5. On OST	287
6. Tested for HIV (April 2024-September 2024)	2,643
6.1. HIV sero-positive (%)	1.32
6.1.1 Linked to ART	28
7. Tested for HIV (October 2023 -March 2024)	2,634
7.1. HIV sero-positive (%)	1.40
7.1.1. Linked to ART	31

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	846
2. Coverage (%)	0
3. Condoms distributed	0
4. Tested for HIV (April 2024-September 2024)	0
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	0
5.1. HIV sero-positive (%)	-
5.1.1. Put on ART	0
6. Clinic Visits	0
7. STI/RTI treated	0
8. Presumptive treatment	0

F. Migrants

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	0
3.1 HIV sero-positive (%)	-
3.2. Linked to ART	0

G. Truckers

Indicator	2024-25
1. Estimated size	15,000
2. Coverage (%)	67.00
3. Tested for HIV	3,071
3.1. HIV sero-positive (%)	0.49
3.2. On ART	15

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	59
2. Prisons covered under programme	59
3. Total inmates admitted in prisons	3,38,197
4. Inmates Covered in prisons (%)	66.8
5. Tested for HIV in prisons	2,25,979
5.1. HIV sero-positive (%)	0.16
5.2. On ART (%)	85.4
6. Total OCS	19
7. OCS covered under programme	14
8. Total inmates admitted in OCS	100
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	1,612
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.00

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	3
2. Vulnerable population covered	1,00,761
3. Tested for HIV	52,101
3.1. HIV sero-positive (%)	0.19
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	2
1.1. OSTC in Public Health Settings	2
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	287

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	186
2. Sampoorna Suraksha Kendras	18

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	11,62,757	8,55,913	15,995	20,34,665
1.1 HIV Positives	6,074	3,227	48	9,349
1.2 HIV sero-positivity (%)	0.52	0.38	0.30	0.46
2. Contacts of HIV positive people tested#				29,069
2.1 HIV Positives*				1,950
2.2 HIV sero-positivity (%)				6.71
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				10,244

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	28
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	9
4. Care Support Centres	15

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	6,074	3,872	48	9,994
2. New PLHIV Registered at ART center	6,291	3,834	30	10,155
2.1 Initiated on ART	6,152	3,775	28	9,955
3. PLHIV alive and on ART#	50,784	42,068	171	93,023
4. 12 months retention on ART (%)				93.9
5. Lost to follow-up cases	3,363	2,076	18	5,457

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	3
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	44,500
2.1. Suppressed test result (%)	93.72
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	2
4.1 Accredited SRL	2
5. CD4 machines	15
5.1 CD4 tests conducted	15,158
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	28
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	12

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	35,59,146
2. HIV testing coverage (%)	91.8
3. HIV sero-positivity (%) among tested	0.02
4. HIV Positive PW (old + new detections)	1,252
4.1 On life-long ART	980
5. Live births among HIV positive PW	797
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	701
6.1 Babies confirmed HIV Positive (6 week- 6 month)	4
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	545
7.2 Babies confirmed HIV positive at 18 months	17
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	29
9. HIV positive babies initiated on ART	19

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	64.3
2. Sero-positivity (%) among tested	0.02
3. Put on treatment	505

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	5,043	1,036	2,706	-	16,938	-	-	2,290	28,013
	Quarter 2	5,135	1,036	2,827	-	38,300	32	-	2,909	50,239
	Quarter 3	5,158	1,007	2,887	-	57,379	510	-	2,328	69,269
	Quarter 4	5,297	1,066	2,746	-	92,011	733	-	2,369	1,04,222
Tested for TB	Quarter 1	48	17	110	-	158	-	-	1	334
	Quarter 2	52	6	217	-	154	-	-	2	431
	Quarter 3	38	2	152	-	177	-	-	1	370
	Quarter 4	26	9	193	-	2,076	-	-	-	2,304
Diagnosed with TB	Quarter 1	1	1	1	-	16	-	-	1	20
	Quarter 2	-	-	-	-	22	-	-	1	23
	Quarter 3	-	-	-	-	24	-	-	-	24
	Quarter 4	1	-	2	-	23	-	-	-	26
Initiated on TB treatment	Quarter 1	1	1	1	-	16	-	-	1	20
	Quarter 2	-	-	-	-	22	-	-	1	23
	Quarter 3	-	-	-	-	24	-	-	-	24
	Quarter 4	1	-	1	-	23	-	-	-	25

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	61,066	53,082	945	828	135	147		
May - 24	68,045	61,567	927	775	115	164		
Jun - 24	70,327	63,891	874	739	100	179		
Jul - 24	74,048	66,562	1,023	916	109	185		
Aug - 24	70,852	62,740	965	877	88	737		
Sep - 24	71,677	63,995	1,014	891	94	569		
Oct - 24	73,566	66,055	1,177	962	107	390		
Nov - 24	72,555	65,560	1,075	957	80	207		
Dec - 24	74,657	66,184	1,312	1,200	84	632		
Jan - 25	76,220	67,570	1,394	1,099	117	170		
Feb - 25	71,389	64,256	2,879	2,093	116	403		
Mar - 25	74,903	67,611	2,333	2,139	120	220		
April 2024- March 2025							1,496	1,243

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Bihar
	Rank	**26**
Sl. No.	Obtained Score [%]	54.5
	Obtained Score [N]	103
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	65
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	93
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	93
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	11
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	42
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	49
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	105
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	67
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	101
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	84
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	20
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	131
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	91
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	64
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	98
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	34
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	88
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	69
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	77
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	57
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	76
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	42
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	3
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	5
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	28
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	0
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	3
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	5
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	39
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	0
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	60
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	22-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	17-12-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	01-07-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	43
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	67

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

CHANDIGARH



CHANDIGARH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	5.50
2. IMR	-	-	2.96
3. Adult (15-49 yrs) HIV Prevalence (%)	0.37	0.21	0.30
4. People living with HIV	2,016	1,000	3,016
5. ART coverage (%)	>95	>95	>95
6. Children living with HIV	25	23	48
7. Annual new HIV infections	113	53	166
8. Annual AIDS-related deaths (ARD)	23	13	35
9. Change in annual new HIV infections since 2010 (%)	-2.59	1.92	-1.78
10. Change in annual ARD since 2010 (%)	15.00	44.44	25.00
11. EVTH need	-	20	20

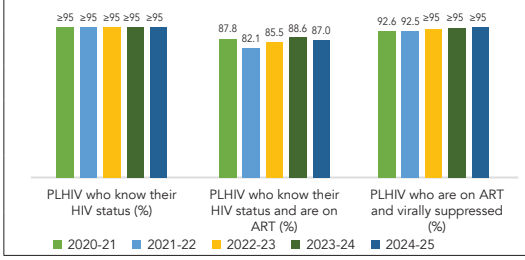
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	3,333	100.00	-	0.27
2. Men who have sex with men	2,569	88.20	-	2.00
3. Injecting Drug Users	1,908	-	100.00	4.40
4. Hijra/Transgender People	164	-	-	-
5. Migrants	25,000	92.40	-	0.80
6. Truckers	15,330	-	-	-
7. Prison inmates	3,675	77.80	89.70	3.25

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	54.10	20.30	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	43.20	21.00	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	88.40	65.80	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	76.00	48.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	1.80	0.00	-
5.1 Condom use during last higher-risk intercourse (%)	46.50	NA	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	5.00	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	50.00	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	2,016	1,000	3,016
2. PLHIV who know their HIV Status	4,025	1,939	5,996
3. PLHIV who know their HIV status and are on ART	3,428	1,762	5,214
4. PLHIV who are on ART and tested for their viral load	2,945	1,526	4,483
4.1 PLHIV who are virally suppressed	2,900	1,501	4,410

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	150
2. Colleges with operational Red Ribbon Clubs (RRC)	25
3. Persons trained under mainstreaming	51
4. No. of calls received at helpline	-

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				5
	Male	Female	TG	Total
2. Clients managed				26,388
3. RPR Tests conducted at DSRC	1,570	5,836	112	7,518
4. Syphilis seropositivity (%) at DSRC	5.86	0.39	0.89	1.54

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	12
2. OST centres (Excluding Satellite OST centres)	4

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	3,333
2. Coverage (%)	≥95
3. Condoms distributed	14,17,513
4. Tested for HIV (April 2024-September 2024)	4,058
4.1. HIV sero-positive (%)	0.37
4.1.1. Linked to ART	15
5. Tested for HIV (October 2024 -March 2025)	4,443
5.1. HIV sero-positive (%)	0.41
5.1.1. Linked to ART	17
6. Clinic Visits	12,280
7. STI/RTI treated	165
8. Presumptive treatment	585

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	2,569
2. Coverage (%)	≥95
3. Condoms distributed	8,86,893
4. Tested for HIV (April 2024-September 2024)	2,525
4.1. HIV sero-positive (%)	0.28
4.1.1. Linked to ART	7
5. Tested for HIV (October 2024 -March 2025)	2,558
5.1. HIV sero-positive (%)	1.56
5.1.1. Linked to ART	39
6. Clinic Visits	10,212
7. STI/RTI treated	79
8. Presumptive treatment	511

D. Injecting drug users

Indicator	2024-25
1. Estimated size	1,908
2. Coverage (%)	≥95
3. Needles distributed	7,77,393
4. Syringes distributed	4,53,965
5. On OST	927
6. Tested for HIV (April 2024-September 2024)	2,235
6.1. HIV sero-positive (%)	0.22
6.1.1 Linked to ART	4
7. Tested for HIV (October 2023 -March 2024)	2,414
7.1. HIV sero-positive (%)	0.08
7.1.1. Linked to ART	2

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	164
2. Coverage (%)	≥95
3. Condoms distributed	64,585
4. Tested for HIV (April 2024-September 2024)	162
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	169
5.1. HIV sero-positive (%)	0.59
5.1.1. Put on ART	1
6. Clinic Visits	654
7. STI/RTI treated	8
8. Presumptive treatment	30

F. Migrants

Indicator	2024-25
1. Estimated size	25,000
2. Coverage (%)	≥95
3. Tested for HIV	10,231
3.1 HIV sero-positive (%)	0.15
3.2. Linked to ART	12

G. Truckers

Indicator	2024-25
1. Estimated size	15,330
2. Coverage (%)	65.23
3. Tested for HIV	4,344
3.1. HIV sero-positive (%)	0.09
3.2. On ART	4

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	1
2. Prisons covered under programme	1
3. Total inmates admitted in prisons	3,675
4. Inmates Covered in prisons (%)	35.9
5. Tested for HIV in prisons	1,320
5.1. HIV sero-positive (%)	0.76
5.2. On ART (%)	50.0
6. Total OCS	4
7. OCS covered under programme	3
8. Total inmates admitted in OCS	500
9. Inmates Covered in OCS (%)	31.8
10.Tested for HIV in OCS	159
10.1. HIV sero-positive (%)	0.63
10.2. On ART (%)	>95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	4
1.1. OSTC in Public Health Settings	-
1.2. OSTC in NGO Settings	4
1.3 No. of Satellite OST Centres	-
2. IDU on OST	927

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	13
2. Sampoorna Suraksha Kendras	1

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	59,597	40,648	261	1,00,506
1.1 HIV Positives	513	105	-	618
1.2 HIV sero-positivity (%)	0.86	0.26	0.00	0.61
2. Contacts of HIV positive people tested#				2,125
2.1 HIV Positives*				32
2.2 HIV sero-positivity (%)				1.51
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				883

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	2
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	3
4. Care Support Centres	1

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	513	128	-	641
2. New PLHIV Registered at ART center	402	104	3	509
2.1 Initiated on ART	355	96	3	454
3. PLHIV alive and on ART#	3,428	1,762	24	5,214
4. 12 months retention on ART (%)				95.5
5. Lost to follow-up cases	367	99	5	471

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	6,488
2.1. Suppressed test result (%)	95.65
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	1
5.1 CD4 tests conducted	5,115
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	15,372
2. HIV testing coverage (%)	>=95
3. HIV sero-positivity (%) among tested	0.13
4. HIV Positive PW (old + new detections)	50
4.1 On life-long ART	47
5. Live births among HIV positive PW	57
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	30
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	41
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.23
3. Put on treatment	44

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	3,131	2,543	2,194	158	480	-	2,778	2,724	14,008
	Quarter 2	3,453	2,481	2,308	162	350	19	2,724	2,495	13,992
	Quarter 3	3,383	2,548	2,373	164	245	29	2,888	2,429	14,059
	Quarter 4	3,534	2,639	2,440	174	92	22	3,122	2,411	14,434
Tested for TB	Quarter 1	18	17	-	-	2	-	24	2	63
	Quarter 2	10	15	-	-	4	-	13	7	49
	Quarter 3	16	12	-	-	4	-	8	8	48
	Quarter 4	127	16	-	-	-	-	4	3	150
Diagnosed with TB	Quarter 1	1	-	-	-	-	-	5	-	6
	Quarter 2	2	1	-	-	-	-	5	-	8
	Quarter 3	-	1	-	-	-	-	-	-	1
	Quarter 4	1	1	-	-	-	-	-	-	2
Initiated on TB treatment	Quarter 1	1	-	-	-	-	-	5	-	6
	Quarter 2	2	1	-	-	-	-	5	-	8
	Quarter 3	-	1	-	-	-	-	-	-	1
	Quarter 4	-	-	-	-	-	-	-	-	-

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	2,205	2,205	31	20	6	21		
May - 24	2,840	2,840	54	39	9	56		
Jun - 24	2,353	2,353	37	32	3	22		
Jul - 24	2,211	2,211	45	39	11	23		
Aug - 24	2,929	2,929	43	39	10	28		
Sep - 24	2,262	2,262	57	53	8	29		
Oct - 24	2,475	2,475	35	33	-	19		
Nov - 24	3,443	3,443	51	49	4	37		
Dec - 24	2,578	2,578	35	32	5	33		
Jan - 25	2,473	2,473	37	34	7	25		
Feb - 25	3,040	3,040	44	41	8	15		
Mar - 25	2,669	2,669	43	41	3	26		
April 2024- March 2025							127	110

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Chandigarh
Rank		1
Sl. No.	Obtained Score [%]	80.2
	Obtained Score [N]	142
	Maximum Score [N]	177
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	47
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	182
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	83
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	40
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	72
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	71
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	76
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	112
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	98
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	106
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	98
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	112
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	53
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	82
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	90
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	87
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	83
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	8
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	3
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	50
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	NA
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	NA
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	NA
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	NA
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	75
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	22-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	13-09-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	16-11-2023
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	92

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

CHHATTISGARH



CHHATTISGARH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.09
2. IMR	-	-	0.64
3. Adult (15-49 yrs) HIV Prevalence (%)	0.16	0.14	0.15
4. People living with HIV	20,360	17,917	38,276
5. ART coverage (%)	61.41	57.15	59.79
6. Children living with HIV	794	753	1,547
7. Annual new HIV infections	400	399	800
8. Annual AIDS-related deaths (ARD)	382	445	827
9. Change in annual new HIV infections since 2010 (%)	-76.57	-73.68	-75.17
10. Change in annual ARD since 2010 (%)	-76.04	-65.50	-71.32
11. EVTH need	-	390	390

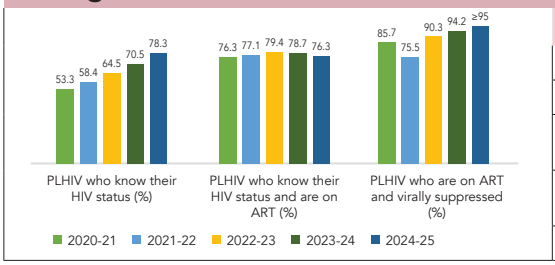
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	18,375	98.40	-	1.22
2. Men who have sex with men	2,889	99.00	-	2.06
3. Injecting Drug Users	3,923	-	99.60	10.43
4. Hijra/Transgender People	1,118	-	-	6.00
5. Migrants	231,000	89.80	-	0.80
6. Truckers	62,000	83.70	49.60	0.67
7. Prison inmates	72,696	48.30	82.60	1.07

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	30.70	23.00	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	29.90	22.00	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	77.70	79.40	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	74.50	72.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	5.00	0.50	-
5.1 Condom use during last higher-risk intercourse (%)	56.00	21.20	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	9.08	0.40	-
6.1 Condom use during last higher-risk intercourse (%)	54.84	16.67	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	20,360	17,917	38,276
2. PLHIV who know their HIV Status	16,895	12,906	29,987
3. PLHIV who know their HIV status and are on ART	12,502	10,240	22,886
4. PLHIV who are on ART and tested for their viral load	5,686	4,732	10,462
4.1 PLHIV who are virally suppressed	5,568	4,640	10,249

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	576
2. Colleges with operational Red Ribbon Clubs (RRC)	275
3. Persons trained under mainstreaming	870
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				31
	Male	Female	TG	Total
2. Clients managed				3,28,738
3. RPR Tests conducted at DSRC	93,839	1,07,583	1,966	2,03,388
4. Syphilis seropositivity (%) at DSRC	1.18	0.95	1.12	1.06

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	44
2. OST centres (Excluding Satellite OST centres)	6

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	18,375
2. Coverage (%)	≥95
3. Condoms distributed	73,06,348
4. Tested for HIV (April 2024-September 2024)	22,245
4.1. HIV sero-positive (%)	0.30
4.1.1. Linked to ART	66
5. Tested for HIV (October 2024 -March 2025)	25,155
5.1. HIV sero-positive (%)	0.35
5.1.1. Linked to ART	76
6. Clinic Visits	91,335
7. STI/RTI treated	2,595
8. Presumptive treatment	4,117

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	2,889
2. Coverage (%)	≥95
3. Condoms distributed	12,64,622
4. Tested for HIV (April 2024-September 2024)	4,499
4.1. HIV sero-positive (%)	0.51
4.1.1. Linked to ART	22
5. Tested for HIV (October 2024 -March 2025)	5,273
5.1. HIV sero-positive (%)	0.72
5.1.1. Linked to ART	39
6. Clinic Visits	20,250
7. STI/RTI treated	584
8. Presumptive treatment	821

D. Injecting drug users

Indicator	2024-25
1. Estimated size	3,923
2. Coverage (%)	≥95
3. Needles distributed	8,52,785
4. Syringes distributed	7,34,043
5. On OST	1,720
6. Tested for HIV (April 2024-September 2024)	4,412
6.1. HIV sero-positive (%)	0.41
6.1.1 Linked to ART	7
7. Tested for HIV (October 2023 -March 2024)	4,803
7.1. HIV sero-positive (%)	0.69
7.1.1. Linked to ART	22

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	1,118
2. Coverage (%)	≥95
3. Condoms distributed	4,35,195
4. Tested for HIV (April 2024-September 2024)	1,196
4.1. HIV sero-positive (%)	0.75
4.1.1. Linked to ART	7
5. Tested for HIV (October 2024 -March 2025)	1,311
5.1. HIV sero-positive (%)	0.69
5.1.1. Put on ART	7
6. Clinic Visits	5,346
7. STI/RTI treated	180
8. Presumptive treatment	239

F. Migrants

Indicator	2024-25
1. Estimated size	2,31,000
2. Coverage (%)	≥95
3. Tested for HIV	69,755
3.1 HIV sero-positive (%)	0.10
3.2. Linked to ART	61

G. Truckers

Indicator	2024-25
1. Estimated size	62,000
2. Coverage (%)	≥95
3. Tested for HIV	37,680
3.1. HIV sero-positive (%)	0.18
3.2. On ART	45

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	33
2. Prisons covered under programme	33
3. Total inmates admitted in prisons	72,696
4. Inmates Covered in prisons (%)	54.6
5. Tested for HIV in prisons	39,665
5.1. HIV sero-positive (%)	0.15
5.2. On ART (%)	66.7
6. Total OCS	3
7. OCS covered under programme	5
8. Total inmates admitted in OCS	58
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	329
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.00

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	6
2. Vulnerable population covered	1,34,985
3. Tested for HIV	1,29,782
3.1. HIV sero-positive (%)	0.14
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	6
1.1. OSTC in Public Health Settings	6
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	1,720

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	140
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	2,78,661	3,05,004	1,450	5,85,115
1.1 HIV Positives	2,020	1,091	33	3,144
1.2 HIV sero-positivity (%)	0.72	0.36	2.28	0.54
2. Contacts of HIV positive people tested#				5,526
2.1 HIV Positives*				420
2.2 HIV sero-positivity (%)				7.60
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				715

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	8
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	18
4. Care Support Centres	3

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	2,020	1,293	33	3,346
2. New PLHIV Registered at ART center	2,019	1,286	18	3,323
2.1 Initiated on ART	1,794	1,190	14	2,998
3. PLHIV alive and on ART#	12,502	10,240	144	22,886
4. 12 months retention on ART (%)				91.5
5. Lost to follow-up cases	3,438	2,178	39	5,655

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	17,424
2.1. Suppressed test result (%)	94.78
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	0
5. CD4 machines	5
5.1 CD4 tests conducted	6,220
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	76
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	744,239
2. HIV testing coverage (%)	71.0
3. HIV sero-positivity (%) among tested	0.04
4. HIV Positive PW (old + new detections)	372
4.1 On life-long ART	362
5. Live births among HIV positive PW	290
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	186
6.1 Babies confirmed HIV Positive (6 week- 6 month)	1
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	40
7.2 Babies confirmed HIV positive at 18 months	7
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	8
9. HIV positive babies initiated on ART	4

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	58.1
2. Sero-positivity (%) among tested	0.12
3. Put on treatment	358

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	17,855	4,281	3,639	1,228	3,506	26	16,615	16,978	64,128
	Quarter 2	19,729	4,692	4,016	1,236	3,334	35	17,923	17,410	68,375
	Quarter 3	20,176	4,925	3,817	1,315	9,330	44	22,552	18,725	80,884
	Quarter 4	21,666	5,308	4,166	1,459	16,965	58	41,549	24,559	1,15,730
Tested for TB	Quarter 1	599	120	119	58	48	-	162	75	1,181
	Quarter 2	686	137	60	74	234	-	138	117	1,446
	Quarter 3	761	137	33	80	1,012	1	153	103	2,280
	Quarter 4	890	451	46	59	1,831	-	135	165	3,577
Diagnosed with TB	Quarter 1	15	1	-	-	5	-	1	-	22
	Quarter 2	21	1	1	-	14	-	-	2	39
	Quarter 3	21	-	-	-	12	1	-	1	35
	Quarter 4	25	3	-	-	13	-	8	9	58
Initiated on TB treatment	Quarter 1	15	1	-	-	5	-	1	-	22
	Quarter 2	21	1	1	-	13	-	-	2	38
	Quarter 3	21	-	-	-	10	1	-	1	33
	Quarter 4	25	3	-	-	13	-	8	8	57

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	11,793	11,249	747	729	24	36		
May - 24	10,871	10,005	341	271	43	49		
Jun - 24	3	-	2	3	-	48		
Jul - 24	11,239	10,806	993	911	34	73		
Aug - 24	11,551	11,164	1,036	911	21	36		
Sep - 24	11,271	10,699	979	887	24	159		
Oct - 24	11,038	10,810	813	682	20	62		
Nov - 24	11,104	10,901	406	291	22	76		
Dec - 24	11,242	11,042	419	296	26	70		
Jan - 25	11,650	11,436	416	258	32	104		
Feb - 25	11,677	11,497	374	269	21	133		
Mar - 25	11,847	11,391	404	386	30	114		
April 2024- March 2025							373	340

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Chhattisgarh
Rank		22
Sl. No.	Obtained Score [%]	58.2
	Obtained Score [N]	110
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	78
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	76
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	41
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	152
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	93
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	56
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	89
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	91
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	67
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	89
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	73
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	60
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	71
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	32
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	64
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	113
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	28
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	90
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	81
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	47
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	11
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	3
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	0
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	76
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	75
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	0
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	0
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	0
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	0
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	85
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	27-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	29-01-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	Pending
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	30

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

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DADRA & NAGAR HAVELI AND DAMAN & DIU

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.84
2. IMR	-	-	4.65
3. Adult (15-49 yrs) HIV Prevalence (%)	0.19	0.14	0.18
4. People living with HIV	1,425	498	1,923
5. ART coverage (%)	-	-	-
6. Children living with HIV	17	11	28
7. Annual new HIV infections	69	24	93
8. Annual AIDS-related deaths (ARD)	7	4	11
9. Change in annual new HIV infections since 2010 (%)	97.14	41.18	78.85
10. Change in annual ARD since 2010 (%)	-81.58	-80.00	-81.03
11. EVTH need	-	9	9

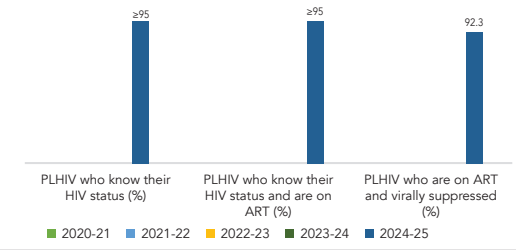
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	-	-	-	-
2. Men who have sex with men	-	-	-	-
3. Injecting Drug Users	-	-	-	-
4. Hijra/Transgender People	-	-	-	-
5. Migrants	1,34,800	-	-	-
6. Truckers	81,640	-	-	-
7. Prison inmates	620	-	-	-

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	28.10	25.30	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	31.10	24.60	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	55.70	82.30	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	77.40	73.50	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	7.30	0.00	-
5.1 Condom use during last higher-risk intercourse (%)	84.00	NA	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	6.48	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	100.00	NA	-

2. Progress on 95-95-95 (2024-25)#



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	-	-	-
2. PLHIV who know their HIV Status	-	-	-
3. PLHIV who know their HIV status and are on ART	-	-	-
4. PLHIV who are on ART and tested for their viral load	-	-	-
4.1 PLHIV who are virally suppressed	-	-	-

* Including of H/TG PLHIV # Interim progress to be reconciled

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	90
2. Colleges with operational Red Ribbon Clubs (RRC)	24
3. Persons trained under mainstreaming	20
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				4
	Male	Female	TG	Total
2. Clients managed				11,557
3. RPR Tests conducted at DSRC	3,813	3,396	-	7,209
4. Syphilis seropositivity (%) at DSRC	1.91	0.47	-	1.23

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	-
2. OST centres (Excluding Satellite OST centres)	-

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Condoms distributed	-
4. Tested for HIV (April 2024-September 2024)	-
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	-
5. Tested for HIV (October 2024 -March 2025)	-
5.1. HIV sero-positive (%)	-
5.1.1. Linked to ART	-
6. Clinic Visits	-
7. STI/RTI treated	-
8. Presumptive treatment	-

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Condoms distributed	-
4. Tested for HIV (April 2024-September 2024)	-
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	-
5. Tested for HIV (October 2024 -March 2025)	-
5.1. HIV sero-positive (%)	-
5.1.1. Linked to ART	-
6. Clinic Visits	-
7. STI/RTI treated	-
8. Presumptive treatment	-

D. Injecting drug users

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Needles distributed	-
4. Syringes distributed	-
5. On OST	-
6. Tested for HIV (April 2024-September 2024)	-
6.1. HIV sero-positive (%)	-
6.1.1 Linked to ART	-
7. Tested for HIV (October 2023 -March 2024)	-
7.1. HIV sero-positive (%)	-
7.1.1. Linked to ART	-

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Condoms distributed	-
4. Tested for HIV (April 2024-September 2024)	-
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	-
5. Tested for HIV (October 2024 -March 2025)	-
5.1. HIV sero-positive (%)	-
5.1.1. Put on ART	-
6. Clinic Visits	-
7. STI/RTI treated	-
8. Presumptive treatment	-

F. Migrants

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	-
3.1 HIV sero-positive (%)	-
3.2. Linked to ART	-

G. Truckers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. On ART	-

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	2
2. Prisons covered under programme	2
3. Total inmates admitted in prisons	575
4. Inmates Covered in prisons (%)	0.50
5. Tested for HIV in prisons	288
5.1. HIV sero-positive (%)	0.35
5.2. On ART (%)	≥95
6. Total OCS	-
7. OCS covered under programme	-
8. Total inmates admitted in OCS	-
9. Inmates Covered in OCS (%)	-
10.Tested for HIV in OCS	-
10.1. HIV sero-positive (%)	-
10.2. On ART (%)	-

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	-
1.1. OSTC in Public Health Settings	-
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	-

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	3
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	33,603	23,840	-	57,443
1.1 HIV Positives	88	33	-	121
1.2 HIV sero-positivity (%)	0.26	0.14	-	0.21
2. Contacts of HIV positive people tested#				72
2.1 HIV Positives*				16
2.2 HIV sero-positivity (%)				22.22
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	1
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	-
4. Care Support Centres	-

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	88	38	-	126
2. New PLHIV Registered at ART center	94	39	1	134
2.1 Initiated on ART	94	39	1	134
3. PLHIV alive and on ART#	380	222	1	603
4. 12 months retention on ART (%)				96.1
5. Lost to follow-up cases	-	-	-	-

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	-
1.1 Accredited Viral load laboratories (out of 64 VL labs)	-
2. Viral load tests conducted	436
2.1. Suppressed test result (%)	91.28
3. National reference laboratories (NRL)	-
3.1 Accredited NRL	-
4. State reference laboratories (SRL)	-
4.1 Accredited SRL	-
5. CD4 machines	-
5.1 CD4 tests conducted	-
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	-
6.2. Average Discordance (%)	-
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	14,372
2. HIV testing coverage (%)	>=95
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	9
4.1 On life-long ART	10
5. Live births among HIV positive PW	5
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	5
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	3
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.04
3. Put on treatment	9

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	No
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	-	-	-	-	59	-	-	-	59
	Quarter 2	-	-	-	-	77	-	-	-	77
	Quarter 3	-	-	-	-	75	-	-	-	75
	Quarter 4	-	-	-	-	77	-	-	-	77
Tested for TB	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	31	-	-	-	31
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	-	-	-	-	-
Diagnosed with TB	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	-	-	-	-	-
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	-	-	-	-	-
Initiated on TB treatment	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	-	-	-	-	-
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	-	-	-	-	-

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	169	169	10	10	-	7		
May - 24	256	256	7	7	-	6		
Jun - 24	185	185	8	8	-	6		
Jul - 24	253	253	9	9	1	9		
Aug - 24	204	204	11	11	2	6		
Sep - 24	248	248	6	6	2	5		
Oct - 24	199	199	7	7	2	9		
Nov - 24	129	129	9	9	-	9		
Dec - 24	208	208	9	9	-	3		
Jan - 25	229	229	11	-	-	6		
Feb - 25	155	155	19	-	-	6		
Mar - 25	246	246	17	17	1	8		
April 2024- March 2025							11	11

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		DNH & DD
Rank		4
Sl. No.	Obtained Score [%]	66.7
	Obtained Score [N]	108
	Maximum Score [N]	162
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	92
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	55
5	Status of AEP integration in state school curriculum [G: Yes, R: No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Not Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	0
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	NA
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	0
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	0
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	50
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	0
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	0
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	NA
17	Status of Fund released to TI (G=Yes, R=No)	No
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	156
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	62
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	70
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	100
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	101
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	100
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	169
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	64
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	64
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	102
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	0
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	4
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	NA
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	0
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	0
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	NA
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	NA
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	NA
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	NA
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	30
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	27-07-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	03-04-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	23-03-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	89
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	NA
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	91

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

DELHI



DELHI

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.38
2. IMR	-	-	1.93
3. Adult (15-49 yrs) HIV Prevalence (%)	0.35	0.25	0.30
4. People living with HIV	36,741	22,338	59,079
5. ART coverage (%)	76.59	67.32	73.82
6. Children living with HIV	659	559	1,218
7. Annual new HIV infections	1,552	1,038	2,590
8. Annual AIDS-related deaths (ARD)	426	501	927
9. Change in annual new HIV infections since 2010 (%)	-30.99	-21.48	-27.45
10. Change in annual ARD since 2010 (%)	-29.82	46.92	-2.11
11. EVTH need	-	377	377

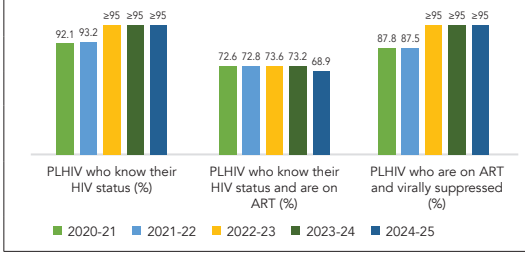
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	88,399	99.70	-	0.60
2. Men who have sex with men	27,026	100.00	-	0.80
3. Injecting Drug Users	32,481	-	75.90	8.53
4. Hijra/Transgender People	17,907	-	-	2.20
5. Migrants	2,77,822	15.90	-	0.80
6. Truckers	60,000	99.30	-	1.40
7. Prison inmates	62,727	5.90	20.20	2.63

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	43.80	29.50	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	36.30	25.10	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	85.90	80.00	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	80.30	73.20	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	7.20	0.60	-
5.1 Condom use during last higher-risk intercourse (%)	72.80	86.50	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	11.36	0.75	-
6.1 Condom use during last higher-risk intercourse (%)	70.00	100.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	36,741	22,338	59,079
2. PLHIV who know their HIV Status	43,250	19,252	63,256
3. PLHIV who know their HIV status and are on ART	28,142	15,039	43,610
4. PLHIV who are on ART and tested for their viral load	22,072	12,109	34,508
4.1 PLHIV who are virally suppressed	21,651	11,962	33,934

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	290
2. Colleges with operational Red Ribbon Clubs (RRC)	87
3. Persons trained under mainstreaming	51
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				28
	Male	Female	TG	Total
2. Clients managed				3,20,672
3. RPR Tests conducted at DSRC	18,834	33,957	157	52,948
4. Syphilis seropositivity (%) at DSRC	6.42	0.96	19.75	2.96

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	79
2. OST centres (Excluding Satellite OST centres)	12

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	88,399
2. Coverage (%)	≥95
3. Condoms distributed	1,13,36,865
4. Tested for HIV (April 2024-September 2024)	54,877
4.1. HIV sero-positive (%)	0.12
4.1.1. Linked to ART	55
5. Tested for HIV (October 2024 -March 2025)	63,103
5.1. HIV sero-positive (%)	0.08
5.1.1. Linked to ART	45
6. Clinic Visits	230,317
7. STI/RTI treated	3,162
8. Presumptive treatment	5,769

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	27,026
2. Coverage (%)	≥95
3. Condoms distributed	34,54,730
4. Tested for HIV (April 2024-September 2024)	10,489
4.1. HIV sero-positive (%)	0.67
4.1.1. Linked to ART	30
5. Tested for HIV (October 2024 -March 2025)	13,425
5.1. HIV sero-positive (%)	0.22
5.1.1. Linked to ART	25
6. Clinic Visits	91,674
7. STI/RTI treated	252
8. Presumptive treatment	1,102

D. Injecting drug users

Indicator	2024-25
1. Estimated size	32,481
2. Coverage (%)	77.36
3. Needles distributed	1,16,01,707
4. Syringes distributed	59,91,365
5. On OST	3,013
6. Tested for HIV (April 2024-September 2024)	15,546
6.1. HIV sero-positive (%)	1.05
6.1.1 Linked to ART	100
7. Tested for HIV (October 2023 -March 2024)	19,488
7.1. HIV sero-positive (%)	0.49
7.1.1. Linked to ART	96

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	17,907
2. Coverage (%)	93.59
3. Condoms distributed	23,68,652
4. Tested for HIV (April 2024-September 2024)	8,791
4.1. HIV sero-positive (%)	0.33
4.1.1. Linked to ART	18
5. Tested for HIV (October 2024 -March 2025)	11,673
5.1. HIV sero-positive (%)	0.20
5.1.1. Put on ART	20
6. Clinic Visits	54,985
7. STI/RTI treated	219
8. Presumptive treatment	693

F. Migrants

Indicator	2024-25
1. Estimated size	2,77,822
2. Coverage (%)	≥95
3. Tested for HIV	38,191
3.1 HIV sero-positive (%)	0.26
3.2. Linked to ART	90

G. Truckers

Indicator	2024-25
1. Estimated size	60,000
2. Coverage (%)	66.67
3. Tested for HIV	6,947
3.1. HIV sero-positive (%)	0.27
3.2. On ART	18

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	16
2. Prisons covered under programme	15
3. Total inmates admitted in prisons	62,727
4. Inmates Covered in prisons (%)	31.0
5. Tested for HIV in prisons	19,447
5.1. HIV sero-positive (%)	1.79
5.2. On ART (%)	88.0
6. Total OCS	2
7. OCS covered under programme	0
8. Total inmates admitted in OCS	5,000
9. Inmates Covered in OCS (%)	0.5
10.Tested for HIV in OCS	26
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	12
1.1. OSTC in Public Health Settings	8
1.2. OSTC in NGO Settings	4
1.3 No. of Satellite OST Centres	-
2. IDU on OST	3,013-

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	85
2. Sampoorna Suraksha Kendras	5

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	6,46,627	4,86,413	23,375	11,56,415
1.1 HIV Positives	4,914	1,352	85	6,351
1.2 HIV sero-positivity (%)	0.76	0.28	0.36	0.55
2. Contacts of HIV positive people tested#				24,882
2.1 HIV Positives*				568
2.2 HIV sero-positivity (%)				2.28
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				7,650

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	12
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	1
3. Link ART Centres	1
4. Care Support Centres	5

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	4,914	1,547	85	6,546
2. New PLHIV Registered at ART center	4,130	1,268	59	5,457
2.1 Initiated on ART	3,770	1,198	55	5,023
3. PLHIV alive and on ART#	28,142	15,039	430	43,610
4. 12 months retention on ART (%)				90.4
5. Lost to follow-up cases	14,813	4,389	325	19,527

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	2
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	38,172
2.1. Suppressed test result (%)	95.65
3. National reference laboratories (NRL)	2
3.1 Accredited NRL	2
4. State reference laboratories (SRL)	4
4.1 Accredited SRL	4
5. CD4 machines	9
5.1 CD4 tests conducted	29,888
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	98
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	10

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	3,70,321
2. HIV testing coverage (%)	90.2
3. HIV sero-positivity (%) among tested	0.06
4. HIV Positive PW (old + new detections)	360
4.1 On life-long ART	356
5. Live births among HIV positive PW	340
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	279
6.1 Babies confirmed HIV Positive (6 week- 6 month)	4
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	286
7.2 Babies confirmed HIV positive at 18 months	5
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	14
9. HIV positive babies initiated on ART	11

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	87.1
2. Sero-positivity (%) among tested	0.05
3. Put on treatment	145

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	75,087	22,754	16,145	13,893	14,627	-	30,986	5,649	1,79,141
	Quarter 2	77,038	24,196	18,036	14,768	2,648	-	31,379	5,385	1,73,450
	Quarter 3	75,206	23,550	21,049	14,552	2,311	-	32,846	5,286	1,74,800
	Quarter 4	79,604	23,775	21,755	15,423	3,279	26	31,787	5,226	1,80,875
Tested for TB	Quarter 1	632	45	183	38	130	-	40	32	1,100
	Quarter 2	655	48	133	56	202	-	105	35	1,234
	Quarter 3	693	48	139	74	313	-	75	34	1,376
	Quarter 4	691	39	165	54	155	-	60	39	1,203
Diagnosed with TB	Quarter 1	30	1	23	2	29	-	3	1	89
	Quarter 2	17	4	22	-	41	-	9	-	93
	Quarter 3	14	1	18	1	27	-	14	-	75
	Quarter 4	15	-	16	1	36	-	10	-	78
Initiated on TB treatment	Quarter 1	32	1	23	3	27	-	3	-	89
	Quarter 2	21	3	22	-	41	-	9	-	96
	Quarter 3	15	1	18	-	27	-	14	-	75
	Quarter 4	13	-	14	1	31	-	10	-	69

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	27,809	23,096	494	378	90	38		
May - 24	27,412	22,984	459	379	107	13		
Jun - 24	27,412	22,984	459	379	107	13		
Jul - 24	28,223	24,058	511	423	104	40		
Aug - 24	27,947	23,336	496	389	102	31		
Sep - 24	22,710	18,922	483	365	86	191		
Oct - 24	27,472	22,773	418	330	82	389		
Nov - 24	26,026	21,747	520	409	74	310		
Dec - 24	28,113	23,484	714	575	100	222		
Jan - 25	27,682	22,814	741	639	119	270		
Feb - 25	25,664	21,383	654	574	77	125		
Mar - 25	27,660	22,473	601	515	65	135		
April 2024- March 2025							1,333	1,278

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Delhi
Rank		5
Sl. No.	Obtained Score [%]	60.8
	Obtained Score [N]	115
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	69
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	16
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	90
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	95
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	67
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	28
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	75
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	51
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	24
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	97
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	91
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	88
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	97
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	49
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	82
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	75
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	47
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	38
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	85
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	91
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	16
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	2
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	98
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	75
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	9
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	39
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	43
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	96
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	14-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	03-09-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	27-06-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	86
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	14
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	77

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

GOA



GOA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.06
2. IMR	-	-	1.53
3. Adult (15-49 yrs) HIV Prevalence (%)	0.26	0.26	0.27
4. People living with HIV	2,322	2,054	4,376
5. ART coverage (%)	78.29	81.55	79.94
6. Children living with HIV	39	38	76
7. Annual new HIV infections	46	44	90
8. Annual AIDS-related deaths (ARD)	13	11	24
9. Change in annual new HIV infections since 2010 (%)	-24.59	-12.00	-18.92
10. Change in annual ARD since 2010 (%)	-95.71	-94.24	-95.14
11. EVTH need	-	28	28

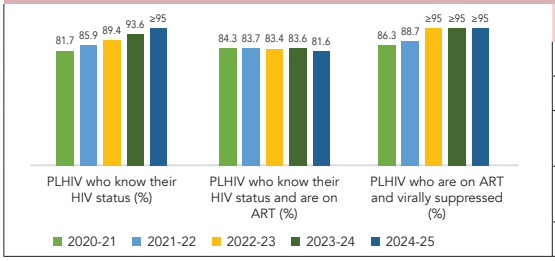
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	5,040	99.20	-	1.33
2. Men who have sex with men	3,339	100.00	-	2.20
3. Injecting Drug Users	302	-	99.60	0.00
4. Hijra/Transgender People	132	-	-	-
5. Migrants	35,000	-	-	-
6. Truckers	23,000	-	-	-
7. Prison inmates	2,078	-	-	-

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	67.20	49.00	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	72.80	52.90	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	79.80	80.10	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	83.00	79.80	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	8.80	5.20	-
5.1 Condom use during last higher-risk intercourse (%)	96.60	100.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	15.12	2.82	-
6.1 Condom use during last higher-risk intercourse (%)	92.31	100.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	2,322	2,054	4,376
2. PLHIV who know their HIV Status	2,313	1,964	4,285
3. PLHIV who know their HIV status and are on ART	1,818	1,675	3,498
4. PLHIV who are on ART and tested for their viral load	1,613	1,547	3,163
4.1 PLHIV who are virally suppressed	1,594	1,518	3,115

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	528
2. Colleges with operational Red Ribbon Clubs (RRC)	171
3. Persons trained under mainstreaming	80
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				4
	Male	Female	TG	Total
2. Clients managed				37,605
3. RPR Tests conducted at DSRC	2,065	1,903	1	3,969
4. Syphilis seropositivity (%) at DSRC	3.15	0.37	0.00	1.81

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	16
2. OST centres (Excluding Satellite OST centres)	1

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	5,040
2. Coverage (%)	≥95
3. Condoms distributed	21,88,477
4. Tested for HIV (April 2024-September 2024)	6,406
4.1. HIV sero-positive (%)	0.06
4.1.1. Linked to ART	4
5. Tested for HIV (October 2024 -March 2025)	6,478
5.1. HIV sero-positive (%)	0.02
5.1.1. Linked to ART	0
6. Clinic Visits	26,024
7. STI/RTI treated	183
8. Presumptive treatment	886

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	3,339
2. Coverage (%)	≥95
3. Condoms distributed	9,60,885
4. Tested for HIV (April 2024-September 2024)	4,104
4.1. HIV sero-positive (%)	0.19
4.1.1. Linked to ART	8
5. Tested for HIV (October 2024 -March 2025)	4,182
5.1. HIV sero-positive (%)	0.17
5.1.1. Linked to ART	7
6. Clinic Visits	16,704
7. STI/RTI treated	91
8. Presumptive treatment	764

D. Injecting drug users

Indicator	2024-25
1. Estimated size	302
2. Coverage (%)	≥95
3. Needles distributed	2,35,365
4. Syringes distributed	2,35,365
5. On OST	108
6. Tested for HIV (April 2024-September 2024)	810
6.1. HIV sero-positive (%)	0.00
6.1.1 Linked to ART	0
7. Tested for HIV (October 2023 -March 2024)	1,111
7.1. HIV sero-positive (%)	0.00
7.1.1. Linked to ART	0

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	132
2. Coverage (%)	≥95
3. Condoms distributed	50,201
4. Tested for HIV (April 2024-September 2024)	163
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	192
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	795
7. STI/RTI treated	23
8. Presumptive treatment	34

F. Migrants

Indicator	2024-25
1. Estimated size	35,000
2. Coverage (%)	≥95
3. Tested for HIV	18,180
3.1 HIV sero-positive (%)	0.06
3.2. Linked to ART	9

G. Truckers

Indicator	2024-25
1. Estimated size	23,000
2. Coverage (%)	43.48
3. Tested for HIV	4,322
3.1. HIV sero-positive (%)	0.00
3.2. On ART	0

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	1
2. Prisons covered under programme	1
3. Total inmates admitted in prisons	2,078
4. Inmates Covered in prisons (%)	65.8
5. Tested for HIV in prisons	1,367
5.1. HIV sero-positive (%)	0.37
5.2. On ART (%)	≥95
6. Total OCS	3
7. OCS covered under programme	5
8. Total inmates admitted in OCS	210
9. Inmates Covered in OCS (%)	33.8
10.Tested for HIV in OCS	71
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	1
1.1. OSTC in Public Health Settings	-
1.2. OSTC in NGO Settings	1
1.3 No. of Satellite OST Centres	-
2. IDU on OST	108

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	12
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	80,792	49,985	611	1,31,388
1.1 HIV Positives	169	73	-	242
1.2 HIV sero-positivity (%)	0.21	0.15	0.00	0.18
2. Contacts of HIV positive people tested#				1,802
2.1 HIV Positives*				32
2.2 HIV sero-positivity (%)				1.78
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	2
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	3
4. Care Support Centres	1

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	169	78	-	247
2. New PLHIV Registered at ART center	165	77	-	242
2.1 Initiated on ART	159	77	-	236
3. PLHIV alive and on ART#	1,818	1,675	5	3,498
4. 12 months retention on ART (%)				94.9
5. Lost to follow-up cases	369	190	2	561

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	3,475
2.1. Suppressed test result (%)	96.92
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	1
5.1 CD4 tests conducted	1,774
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100.0
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	10

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	17,759
2. HIV testing coverage (%)	83.4
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	17
4.1 On life-long ART	17
5. Live births among HIV positive PW	16
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	18
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	-
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.05
3. Put on treatment	10

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	6,147	4,152	606	192	236	-	1,968	2,589	15,890
	Quarter 2	6,397	4,219	793	190	285	-	1,941	2,482	16,307
	Quarter 3	6,409	4,284	784	229	263	59	4,180	2,402	18,610
	Quarter 4	6,768	4,332	1,030	209	583	-	3,402	2,656	18,980
Tested for TB	Quarter 1	-	8	-	-	-	-	27	-	35
	Quarter 2	2	-	-	-	-	-	22	-	24
	Quarter 3	1	12	3	1	-	-	-	-	17
	Quarter 4	-	32	-	-	-	-	-	-	32
Diagnosed with TB	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	-	-	-	-	-
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	-	-	-	-	-
Initiated on TB treatment	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	-	-	-	-	-
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	-	-	-	-	-

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	2,576	2,152	16	11	-	16		
May - 24	2,348	2,050	7	7	2	8		
Jun - 24	2,241	1,908	14	12	-	12		
Jul - 24	2,401	2,117	18	14	-	19		
Aug - 24	2,397	2,020	24	14	-	15		
Sep - 24	2,272	1,911	24	10	1	12		
Oct - 24	2,457	2,269	6	6	-	5		
Nov - 24	2,534	2,336	12	9	-	7		
Dec - 24	2,631	2,406	17	17	-	3		
Jan - 25	2,802	2,490	32	32	2	17		
Feb - 25	2,276	2,254	22	22	-	14		
Mar - 25	2,341	2,252	17	17	-	14		
April 2024- March 2025							57	54

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Goa
	Rank	**4**
Sl. No.	Obtained Score [%]	74.0
	Obtained Score [N]	131
	Maximum Score [N]	177
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	82
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	64
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	155
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	94
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	70
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	92
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	86
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	19
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	110
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	67
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	83
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	100
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	55
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	113
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	58
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	14
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	35
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	97
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	11
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	5
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	50
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	NA
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	NA
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	NA
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	NA
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	95
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	09-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	11-02-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	09-07-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	93
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	76

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

GUJARAT



GUJARAT

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	1.96
2. IMR	-	-	1.15
3. Adult (15-49 yrs) HIV Prevalence (%)	0.20	0.17	0.18
4. People living with HIV	69,164	51,635	1,20,799
5. ART coverage (%)	78.38	71.67	75.83
6. Children living with HIV	1,599	1,365	2,965
7. Annual new HIV infections	1,273	1,089	2,362
8. Annual AIDS-related deaths (ARD)	301	396	697
9. Change in annual new HIV infections since 2010 (%)	-62.23	-60.15	-61.30
10. Change in annual ARD since 2010 (%)	-78.11	-65.20	-72.26
11. EVTH need	-	979	979

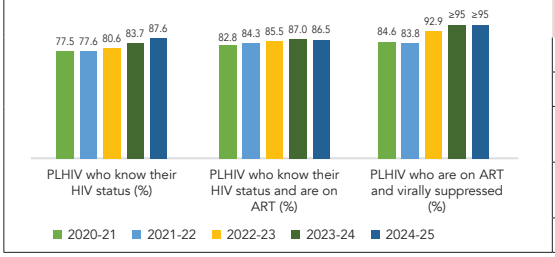
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	37,118	96.90	-	1.10
2. Men who have sex with men	34,299	100.00	-	2.71
3. Injecting Drug Users	779	-	99.40	3.20
4. Hijra/Transgender People	2,605	-	-	2.00
5. Migrants	13,14,462	27.80	-	0.13
6. Truckers	1,20,000	95.90	22.90	0.50
7. Prison inmates	84,486	91.90	94.70	0.50

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	35.70	28.50	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	33.40	27.20	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	87.90	86.30	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	72.40	70.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	5.50	0.70	-
5.1 Condom use during last higher-risk intercourse (%)	42.90	51.20	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	8.72	1.45	-
6.1 Condom use during last higher-risk intercourse (%)	45.52	52.17	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	69,164	51,635	1,20,799
2. PLHIV who know their HIV Status	63,139	42,220	1,05,851
3. PLHIV who know their HIV status and are on ART	54,207	37,007	91,602
4. PLHIV who are on ART and tested for their viral load	43,891	30,124	74,261
4.1 PLHIV who are virally suppressed	42,963	29,480	72,686

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	20,258
2. Colleges with operational Red Ribbon Clubs (RRC)	451
3. Persons trained under mainstreaming	403
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				60
	Male	Female	TG	Total
2. Clients managed				3,67,376
3. RPR Tests conducted at DSRC	78,384	92,656	120	1,71,160
4. Syphilis seropositivity (%) at DSRC	3.3	1.16	20	2.15

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	95
2. OST centres (Excluding Satellite OST centres)	2

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	37,118
2. Coverage (%)	≥95
3. Condoms distributed	1,44,14,487
4. Tested for HIV (April 2024-September 2024)	31,389
4.1. HIV sero-positive (%)	0.06
4.1.1. Linked to ART	19
5. Tested for HIV (October 2024 -March 2025)	32,238
5.1. HIV sero-positive (%)	0.05
5.1.1. Linked to ART	17
6. Clinic Visits	1,23,751
7. STI/RTI treated	2,139
8. Presumptive treatment	4,417

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	34,299
2. Coverage (%)	≥95
3. Condoms distributed	92,71,716
4. Tested for HIV (April 2024-September 2024)	28,954
4.1. HIV sero-positive (%)	0.15
4.1.1. Linked to ART	46
5. Tested for HIV (October 2024 -March 2025)	29,500
5.1. HIV sero-positive (%)	0.21
5.1.1. Linked to ART	57
6. Clinic Visits	1,16,738
7. STI/RTI treated	1,355
8. Presumptive treatment	4,055

D. Injecting drug users

Indicator	2024-25
1. Estimated size	779
2. Coverage (%)	≥95
3. Needles distributed	1,84,901
4. Syringes distributed	1,84,851
5. On OST	96
6. Tested for HIV (April 2024-September 2024)	975
6.1. HIV sero-positive (%)	0.10
6.1.1 Linked to ART	1
7. Tested for HIV (October 2023 -March 2024)	994
7.1. HIV sero-positive (%)	0.30
7.1.1. Linked to ART	3

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	2,605
2. Coverage (%)	79.66
3. Condoms distributed	4,40,909
4. Tested for HIV (April 2024-September 2024)	1,867
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	1,910
5.1. HIV sero-positive (%)	0.10
5.1.1. Put on ART	1
6. Clinic Visits	7,603
7. STI/RTI treated	48
8. Presumptive treatment	165

F. Migrants

Indicator	2024-25
1. Estimated size	13,14,462
2. Coverage (%)	78.76
3. Tested for HIV	1,17,181
3.1 HIV sero-positive (%)	0.08
3.2. Linked to ART	89

G. Truckers

Indicator	2024-25
1. Estimated size	1,20,000
2. Coverage (%)	45.83
3. Tested for HIV	24,044
3.1. HIV sero-positive (%)	0.08
3.2. On ART	18

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	32
2. Prisons covered under programme	37
3. Total inmates admitted in prisons	84,486
4. Inmates Covered in prisons (%)	44.7
5. Tested for HIV in prisons	37,772
5.1. HIV sero-positive (%)	0.20
5.2. On ART (%)	86.8
6. Total OCS	11
7. OCS covered under programme	7
8. Total inmates admitted in OCS	600
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	698
10.1. HIV sero-positive (%)	0.14
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	16
2. Vulnerable population covered	1,01,940
3. Tested for HIV	48,113
3.1. HIV sero-positive (%)	0.20
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	3
1.1. OSTC in Public Health Settings	2
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	1
2. IDU on OST	96

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	261
2. Sampoorna Suraksha Kendras	15

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	11,84,117	8,76,256	3,715	20,64,088
1.1 HIV Positives	5,435	2,297	30	7,762
1.2 HIV sero-positivity (%)	0.46	0.26	0.81	0.38
2. Contacts of HIV positive people tested#				29,235
2.1 HIV Positives*				884
2.2 HIV sero-positivity (%)				3.02
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				12,000

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	48
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	58
4. Care Support Centres	25

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	5,435	2,763	30	8,228
2. New PLHIV Registered at ART center	5,089	2,681	30	7,800
2.1 Initiated on ART	4,826	2,595	28	7,449
3. PLHIV alive and on ART#	54,207	37,007	388	91,602
4. 12 months retention on ART (%)				94.4
5. Lost to follow-up cases	6,803	3,726	96	10,625

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	4
1.1 Accredited Viral load laboratories (out of 64 VL labs)	3
2. Viral load tests conducted	85,880
2.1. Suppressed test result (%)	92.85
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	5
4.1 Accredited SRL	5
5. CD4 machines	25
5.1 CD4 tests conducted	61,260
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	98.08
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	13,46,089
2. HIV testing coverage (%)	83.3
3. HIV sero-positivity (%) among tested	0.04
4. HIV Positive PW (old + new detections)	1,029
4.1 On life-long ART	958
5. Live births among HIV positive PW	806
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	750
6.1 Babies confirmed HIV Positive (6 week- 6 month)	3
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	631
7.2 Babies confirmed HIV positive at 18 months	6
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	18
9. HIV positive babies initiated on ART	17

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	94.2
2. Sero-positivity (%) among tested	0.08
3. Put on treatment	984

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	28,354	25,102	1,047	2,579	5,712	197	40,821	13,616	1,17,428
	Quarter 2	28,930	27,134	913	2,691	7,049	164	41,681	12,882	1,21,444
	Quarter 3	29,707	27,509	941	2,832	6,155	105	45,991	13,556	1,26,796
	Quarter 4	29,589	27,003	988	2,864	18,662	222	44,469	13,269	1,37,066
Tested for TB	Quarter 1	1,135	1,298	52	192	73	-	556	97	3,403
	Quarter 2	1,365	1,739	66	199	123	-	475	104	4,071
	Quarter 3	1,869	1,592	69	217	112	-	601	153	4,613
	Quarter 4	1,849	1,574	89	270	427	-	709	217	5,135
Diagnosed with TB	Quarter 1	5	1	-	-	2	-	11	-	19
	Quarter 2	8	5	-	-	4	-	12	-	29
	Quarter 3	13	6	-	-	2	-	18	1	40
	Quarter 4	2	9	-	-	14	-	12	-	37
Initiated on TB treatment	Quarter 1	5	1	-	-	2	-	9	-	17
	Quarter 2	9	7	-	-	4	-	13	-	33
	Quarter 3	13	5	-	-	2	-	17	1	38
	Quarter 4	1	8	-	-	14	-	10	-	33

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	60,404	59,310	2,968	2,934	168	354		
May - 24	55,198	54,154	2,901	2,858	155	459		
Jun - 24	46,245	45,509	3,476	2,657	170	472		
Jul - 24	52,237	51,552	4,477	3,030	136	677		
Aug - 24	52,237	51,552	4,477	3,030	136	677		
Sep - 24	50,654	50,102	4,517	3,259	146	865		
Oct - 24	50,822	50,288	4,382	3,125	152	695		
Nov - 24	43,161	42,899	4,059	2,788	161	521		
Dec - 24	50,599	50,349	8,479	5,335	143	410		
Jan - 25	50,805	49,185	8,137	8,031	139	414		
Feb - 25	47,394	45,907	7,879	7,776	153	355		
Mar - 25	51,751	51,558	4,815	4,697	168	384		
April 2024-March 2025							2,220	2,108

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Gujarat
	Rank	**7**
Sl. No.	Obtained Score [%]	72.0
	Obtained Score [N]	136
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	2
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	150
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	95
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	93
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	46
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	89
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	91
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	17
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	151
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	74
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	83
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	97
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23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	93
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	54
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	81
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	89
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	95
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	98
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	8
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	6
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	99
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	80
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	100
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	1
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	47
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	89
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	100
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	100
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	78
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	06-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	26-02-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	Pending
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	94
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	90

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

HARYANA



HARYANA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.86
2. IMR	-	-	3.48
3. Adult (15-49 yrs) HIV Prevalence (%)	0.29	0.18	0.24
4. People living with HIV	38,316	21,325	59,641
5. ART coverage (%)	62.19	68.31	64.60
6. Children living with HIV	834	697	1,531
7. Annual new HIV infections	1,936	964	2,900
8. Annual AIDS-related deaths (ARD)	165	104	269
9. Change in annual new HIV infections since 2010 (%)	-24.20	-26.02	-24.79
10. Change in annual ARD since 2010 (%)	-82.20	-75.70	-80.16
11. EVTH need	-	579	579

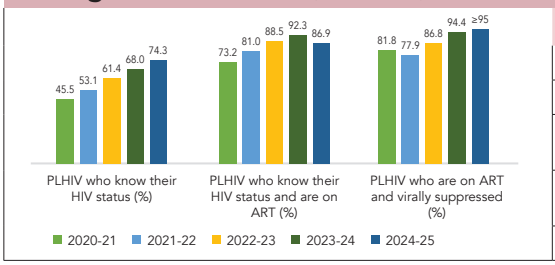
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	17,668	99.10	-	1.60
2. Men who have sex with men	8,022	98.50	-	5.13
3. Injecting Drug Users	19,025	-	98.60	12.05
4. Hijra/Transgender People	1,435	-	-	-
5. Migrants	1,31,755	39.50	-	1.40
6. Truckers	15,000	66.30	40.70	0.62
7. Prison inmates	93,792	59.30	77.30	2.75

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	36.40	19.70	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	31.70	17.50	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	84.50	75.20	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	78.90	64.30	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	6.70	0.20	-
5.1 Condom use during last higher-risk intercourse (%)	70.10	35.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	10.94	0.38	-
6.1 Condom use during last higher-risk intercourse (%)	65.29	20.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	38,316	21,325	59,642
2. PLHIV who know their HIV Status	27,914	16,249	44,314
3. PLHIV who know their HIV status and are on ART	23,828	14,567	38,528
4. PLHIV who are on ART and tested for their viral load	15,853	10,956	26,892
4.1 PLHIV who are virally suppressed	15,235	10,718	26,034

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	3,397
2. Colleges with operational Red Ribbon Clubs (RRC)	439
3. Persons trained under mainstreaming	1,662
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				31
	Male	Female	TG	Total
2. Clients managed				2,46,207
3. RPR Tests conducted at DSRC	48,678	1,08,091	506	1,57,275
4. Syphilis seropositivity (%) at DSRC	1.57	0.27	1.58	0.68

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	43
2. OST centres (Excluding Satellite OST centres)	13

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	17,668
2. Coverage (%)	≥95
3. Condoms distributed	29,34,333
4. Tested for HIV (April 2024-September 2024)	12,925
4.1. HIV sero-positive (%)	0.40
4.1.1. Linked to ART	38
5. Tested for HIV (October 2024 -March 2025)	15,775
5.1. HIV sero-positive (%)	0.24
5.1.1. Linked to ART	26
6. Clinic Visits	49,701
7. STI/RTI treated	1,532
8. Presumptive treatment	2,006

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	8,022
2. Coverage (%)	92.98
3. Condoms distributed	13,59,106
4. Tested for HIV (April 2024-September 2024)	5,160
4.1. HIV sero-positive (%)	1.30
4.1.1. Linked to ART	62
5. Tested for HIV (October 2024 -March 2025)	6,167
5.1. HIV sero-positive (%)	0.70
5.1.1. Linked to ART	34
6. Clinic Visits	22,889
7. STI/RTI treated	604
8. Presumptive treatment	673

D. Injecting drug users

Indicator	2024-25
1. Estimated size	19,025
2. Coverage (%)	65.99
3. Needles distributed	34,38,862
4. Syringes distributed	24,62,036
5. On OST	2,237
6. Tested for HIV (April 2024-September 2024)	6,931
6.1. HIV sero-positive (%)	2.74
6.1.1 Linked to ART	163
7. Tested for HIV (October 2023 -March 2024)	9,495
7.1. HIV sero-positive (%)	2.55
7.1.1. Linked to ART	164

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	1,435
2. Coverage (%)	75.90
3. Condoms distributed	1,74,172
4. Tested for HIV (April 2024-September 2024)	781
4.1. HIV sero-positive (%)	1.28
4.1.1. Linked to ART	11
5. Tested for HIV (October 2024 -March 2025)	1,028
5.1. HIV sero-positive (%)	0.39
5.1.1. Put on ART	3
6. Clinic Visits	3,486
7. STI/RTI treated	97
8. Presumptive treatment	322

F. Migrants

Indicator	2024-25
1. Estimated size	1,31,755
2. Coverage (%)	≥95
3. Tested for HIV	32,303
3.1 HIV sero-positive (%)	0.20
3.2. Linked to ART	65

G. Truckers

Indicator	2024-25
1. Estimated size	15,000
2. Coverage (%)	≥95
3. Tested for HIV	13,351
3.1. HIV sero-positive (%)	0.46
3.2. On ART	54

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	20
2. Prisons covered under programme	20
3. Total inmates admitted in prisons	93,792
4. Inmates Covered in prisons (%)	56.9
5. Tested for HIV in prisons	53,370
5.1. HIV sero-positive (%)	0.75
5.2. On ART (%)	≥95
6. Total OCS	2
7. OCS covered under programme	6
8. Total inmates admitted in OCS	150
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	453
10.1. HIV sero-positive (%)	0
10.2. On ART (%)	0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	15
1.1. OSTC in Public Health Settings	13
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	2
2. IDU on OST	2,237

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	104
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	4,71,731	4,01,616	1,105	8,74,452
1.1 HIV Positives	4,558	1,401	26	5,985
1.2 HIV sero-positivity (%)	0.97	0.35	2.35	0.68
2. Contacts of HIV positive people tested#				3,164
2.1 HIV Positives*				302
2.2 HIV sero-positivity (%)				9.54
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				5,321

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	27
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	5
4. Care Support Centres	1

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	4,558	1,753	26	6,337
2. New PLHIV Registered at ART center	4,639	1,959	38	6,636
2.1 Initiated on ART	4,567	1,939	38	6,544
3. PLHIV alive and on ART#	23,828	14,567	133	38,528
4. 12 months retention on ART (%)				93.5
5. Lost to follow-up cases	3,425	1,376	18	4,819

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	28,126
2.1. Suppressed test result (%)	92.94
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	5
5.1 CD4 tests conducted	12,115
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	97.4
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	2

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	6,06,650
2. HIV testing coverage (%)	89.3
3. HIV sero-positivity (%) among tested	0.06
4. HIV Positive PW (old + new detections)	635
4.1 On life-long ART	592
5. Live births among HIV positive PW	568
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	528
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	433
7.2 Babies confirmed HIV positive at 18 months	2
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	10
9. HIV positive babies initiated on ART	10

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.03
3. Put on treatment	195

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	No
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	10,453	4,724	5,801	566	8,782	-	12,358	11,753	54,437
	Quarter 2	13,093	5,565	7,711	861	16,741	92	22,421	13,073	79,557
	Quarter 3	13,369	5,392	7,761	978	11,479	318	21,463	12,355	73,115
	Quarter 4	13,698	5,723	8,459	1,015	16,519	43	16,498	11,889	73,844
Tested for TB	Quarter 1	26	45	207	5	305	-	9	16	613
	Quarter 2	18	42	185	5	352	-	14	16	632
	Quarter 3	21	47	207	5	379	-	17	11	687
	Quarter 4	29	31	168	6	418	-	17	13	682
Diagnosed with TB	Quarter 1	4	4	26	-	15	-	-	3	52
	Quarter 2	-	9	11	-	14	-	4	2	40
	Quarter 3	1	-	5	-	15	-	7	2	30
	Quarter 4	1	4	4	1	27	-	3	2	42
Initiated on TB treatment	Quarter 1	4	5	26	-	15	-	1	3	54
	Quarter 2	-	8	9	-	14	-	3	2	36
	Quarter 3	1	1	6	-	15	-	7	2	32
	Quarter 4	1	4	4	1	27	-	2	-	39

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	13,953	13,200	449	420	59	526		
May - 24	13,793	13,618	714	714	75	511		
Jun - 24	13,375	13,164	646	646	88	332		
Jul - 24	13,784	13,774	682	670	81	349		
Aug - 24	15,299	14,995	694	675	37	267		
Sep - 24	15,170	15,000	798	798	54	460		
Oct - 24	14,531	14,242	806	806	60	353		
Nov - 24	15,633	15,318	945	945	57	324		
Dec - 24	15,484	15,358	1,067	1,067	56	348		
Jan - 25	14,500	14,417	879	837	67	337		
Feb - 25	14,707	14,658	927	887	49	345		
Mar - 25	15,760	15,717	998	998	66	443		
April 2024-March 2025							615	575

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

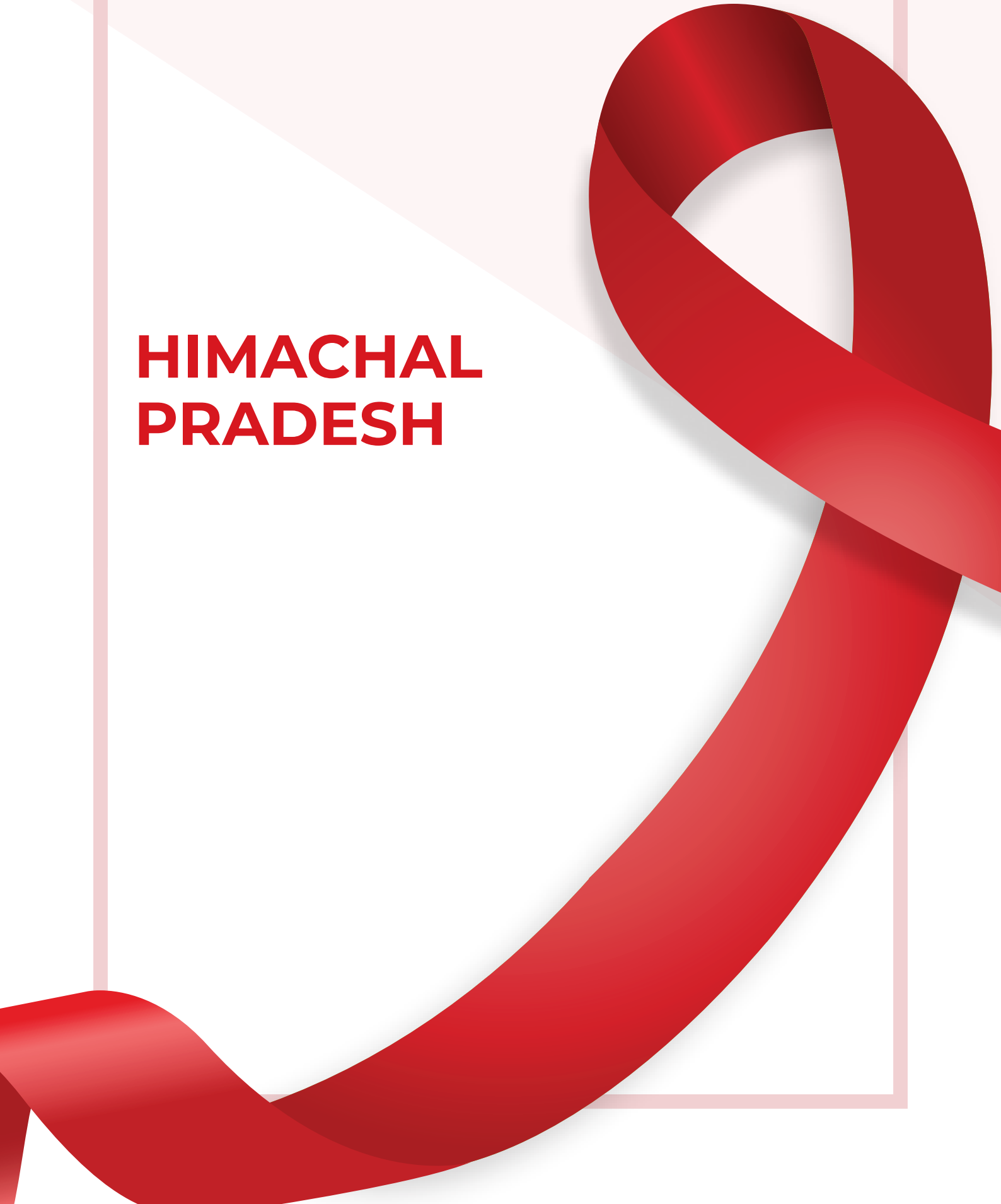
States/UTs		Haryana
Rank		21
Sl. No.	Obtained Score [%]	59.8
	Obtained Score [N]	113
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	74
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	88
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	55
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Not Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	83
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	86
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	77
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	59
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	69
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	70
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	36
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	124
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	78
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	117
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	96
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	17
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	93
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	84
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	99
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	99
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	98
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	74
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	6
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	1
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	97
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	25
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	1
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	6
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	21
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	46
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	83
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	15-07-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	15-10-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	10-03-2025
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	87
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	71
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	72

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
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1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

HIMACHAL PRADESH



HIMACHAL PRADESH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.68
2. IMR	-	-	1.57
3. Adult (15-49 yrs) HIV Prevalence (%)	0.12	0.10	0.11
4. People living with HIV	4,462	3,491	7,953
5. ART coverage (%)	75.26	79.78	77.32
6. Children living with HIV	72	64	136
7. Annual new HIV infections	120	92	213
8. Annual AIDS-related deaths (ARD)	29	17	46
9. Change in annual new HIV infections since 2010 (%)	-63.30	-54.23	-59.66
10. Change in annual ARD since 2010 (%)	-91.32	-82.47	-89.33
11. EVTH need	-	32	32

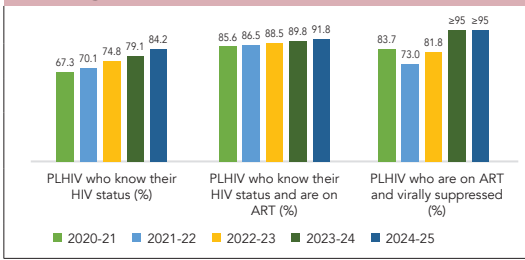
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	13,210	99.60	-	0.24
2. Men who have sex with men	1,252	100.00	-	2.80
3. Injecting Drug Users	3,662	-	98.80	6.40
4. Hijra/Transgender People	258	-	-	-
5. Migrants	1,45,880	97.10	-	0.00
6. Truckers	14,000	-	-	-
7. Prison inmates	8,801	63.20	73.30	0.00

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	40.80	36.20	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	37.30	34.00	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	87.10	89.70	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	85.20	80.70	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	5.90	0.20	-
5.1 Condom use during last higher-risk intercourse (%)	76.20	28.80	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	8.07	0.67	-
6.1 Condom use during last higher-risk intercourse (%)	66.67	33.33	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	4,462	3,491	7,953
2. PLHIV who know their HIV Status	3,737	2,955	6,698
3. PLHIV who know their HIV status and are on ART	3,358	2,785	6,149
4. PLHIV who are on ART and tested for their viral load	2,811	2,412	5,226
4.1 PLHIV who are virally suppressed	2,713	2,368	5,084

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	1,849
2. Colleges with operational Red Ribbon Clubs (RRC)	471
3. Persons trained under mainstreaming	143
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				20
	Male	Female	TG	Total
2. Clients managed				1,46,933
3. RPR Tests conducted at DSRC	43,649	43,157	-	86,806
4. Syphilis seropositivity (%) at DSRC	0.53	0.28	-	0.41

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	18
2. OST centres (Excluding Satellite OST centres)	2

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	13,210
2. Coverage (%)	86.42
3. Condoms distributed	16,96,087
4. Tested for HIV (April 2024-September 2024)	9,155
4.1. HIV sero-positive (%)	0.05
4.1.1. Linked to ART	4
5. Tested for HIV (October 2024 -March 2025)	10,607
5.1. HIV sero-positive (%)	0.16
5.1.1. Linked to ART	13
6. Clinic Visits	36,283
7. STI/RTI treated	1,448
8. Presumptive treatment	2,678

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	1,252
2. Coverage (%)	≥95
3. Condoms distributed	3,00,366
4. Tested for HIV (April 2024-September 2024)	1,349
4.1. HIV sero-positive (%)	0.67
4.1.1. Linked to ART	9
5. Tested for HIV (October 2024 -March 2025)	1,638
5.1. HIV sero-positive (%)	1.16
5.1.1. Linked to ART	14
6. Clinic Visits	5,762
7. STI/RTI treated	205
8. Presumptive treatment	306

D. Injecting drug users

Indicator	2024-25
1. Estimated size	3,662
2. Coverage (%)	≥95
3. Needles distributed	7,81,009
4. Syringes distributed	7,29,907
5. On OST	303
6. Tested for HIV (April 2024-September 2024)	3,221
6.1. HIV sero-positive (%)	0.78
6.1.1 Linked to ART	22
7. Tested for HIV (October 2023 -March 2024)	3,945
7.1. HIV sero-positive (%)	1.42
7.1.1. Linked to ART	39

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	258
2. Coverage (%)	58.16
3. Condoms distributed	13,868
4. Tested for HIV (April 2024-September 2024)	74
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	137
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	334
7. STI/RTI treated	8
8. Presumptive treatment	88

F. Migrants

Indicator	2024-25
1. Estimated size	1,45,880
2. Coverage (%)	71.61
3. Tested for HIV	15,135
3.1 HIV sero-positive (%)	0.32
3.2. Linked to ART	45

G. Truckers

Indicator	2024-25
1. Estimated size	14,000
2. Coverage (%)	71.43
3. Tested for HIV	4,625
3.1. HIV sero-positive (%)	0.17
3.2. On ART	6

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	16
2. Prisons covered under programme	14
3. Total inmates admitted in prisons	8,801
4. Inmates Covered in prisons (%)	90.2
5. Tested for HIV in prisons	7,939
5.1. HIV sero-positive (%)	0.26
5.2. On ART (%)	76.2
6. Total OCS	2
7. OCS covered under programme	3
8. Total inmates admitted in OCS	75
9. Inmates Covered in OCS (%)	89.3
10.Tested for HIV in OCS	67
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	4
1.1. OSTC in Public Health Settings	2
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	2
2. IDU on OST	303

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	57
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	1,98,524	1,52,319	186	3,51,029
1.1 HIV Positives	567	187	1	755
1.2 HIV sero-positivity (%)	0.29	0.12	0.54	0.22
2. Contacts of HIV positive people tested#				1,849
2.1 HIV Positives*				50
2.2 HIV sero-positivity (%)				2.70
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	7
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	1
4. Care Support Centres	2

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	567	204	1	772
2. New PLHIV Registered at ART center	495	190	1	686
2.1 Initiated on ART	462	178	1	641
3. PLHIV alive and on ART#	3,358	2,785	6	6,149
4. 12 months retention on ART (%)				86.5
5. Lost to follow-up cases	115	23	-	138

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	5,900
2.1. Suppressed test result (%)	92.63
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	6
5.1 CD4 tests conducted	6,605
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	97.02
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	105,951
2. HIV testing coverage (%)	60.0
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	38
4.1 On life-long ART	32
5. Live births among HIV positive PW	12
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	18
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	1
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	67.0
2. Sero-positivity (%) among tested	0.05
3. Put on treatment	29

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	7,279	1,347	2,937	16	280	-	9,191	1,793	22,843
	Quarter 2	9,170	1,489	3,032	51	2,315	14	7,903	2,143	26,117
	Quarter 3	10,019	1,494	3,477	83	2,018	40	7,523	2,522	27,176
	Quarter 4	10,417	1,797	3,859	124	3,021	21	7,552	2,623	29,414
Tested for TB	Quarter 1	99	15	22	-	23	-	28	2	189
	Quarter 2	104	34	23	-	241	-	21	2	425
	Quarter 3	93	13	29	-	320	2	14	2	473
	Quarter 4	108	11	116	-	306	4	41	5	591
Diagnosed with TB	Quarter 1	4	1	3	-	3	-	5	-	16
	Quarter 2	2	1	2	-	1	-	3	-	9
	Quarter 3	-	2	1	-	5	-	1	-	9
	Quarter 4	-	-	1	-	3	-	2	-	6
Initiated on TB treatment	Quarter 1	2	1	1	-	3	-	5	-	12
	Quarter 2	2	1	2	-	1	-	3	-	9
	Quarter 3	-	1	1	-	5	-	2	-	9
	Quarter 4	1	-	-	-	3	-	2	-	6

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	3,778	3,769	50	50	3	36		
May - 24	3,828	3,816	63	63	2	48		
Jun - 24	3,881	3,869	48	48	6	28		
Jul - 24	3,764	3,750	46	46	3	47		
Aug - 24	3,575	3,560	47	47	3	37		
Sep - 24	3,698	3,625	44	44	3	25		
Oct - 24	3,974	3,961	44	44	7	40		
Nov - 24	3,954	3,941	45	35	2	35		
Dec - 24	4,378	4,370	33	33	5	32		
Jan - 25	4,430	4,422	73	73	4	26		
Feb - 25	3,593	3,584	55	55	4	27		
Mar - 25	3,229	3,048	44	33	4	54		
April 2024- March 2025							92	85

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Himachal Pradesh
Rank		8
Sl. No.	Obtained Score [%]	72.0
	Obtained Score [N]	136
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	84
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	92
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	59
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	95
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	90
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	94
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	82
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	89
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	15
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	154
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	49
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	55
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	88
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	39
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	150
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	119
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	77
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	83
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	99
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	4
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	2
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	97
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	75
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	0
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	23
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	54
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	100
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	80
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	06-07-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	07-02-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	02-03-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	80

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

JAMMU & KASHMIR AND LADAKH



JAMMU & KASHMIR AND LADAKH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.87
2. IMR	-	-	1.08
3. Adult (15-49 yrs) HIV Prevalence (%)	0.07	0.04	0.06
4. People living with HIV	4,480	2,286	6,766
5. ART coverage (%)	51.76	69.86	58.10
6. Children living with HIV	63	57	120
7. Annual new HIV infections	140	54	194
8. Annual AIDS-related deaths (ARD)	102	20	122
9. Change in annual new HIV infections since 2010 (%)	-71.77	-71.88	-71.80
10. Change in annual ARD since 2010 (%)	-55.26	-67.74	-57.79
11. EVTH need	-	29	29

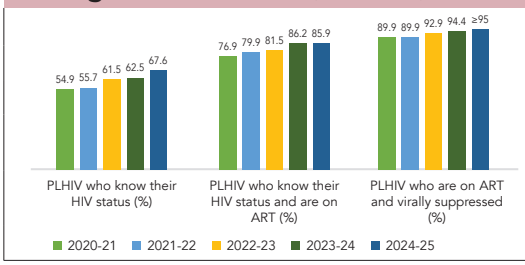
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	4,634	-	-	0.00
2. Men who have sex with men	677	-	-	-
3. Injecting Drug Users	10,162	-	98.20	0.61
4. Hijra/Transgender People	614	-	-	-
5. Migrants	25,000	-	-	0.00
6. Truckers	20,000	-	-	-
7. Prison inmates	15,509	-	-	-

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	33.60	15.80	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	33.80	17.20	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	66.20	59.80	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	74.60	65.00	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	0.60	0.00	-
5.1 Condom use during last higher-risk intercourse (%)	66.10	NA	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	0.45	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	66.67	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	4,480	2,286	6,766
2. PLHIV who know their HIV Status	2,764	1,796	4,577
3. PLHIV who know their HIV status and are on ART	2,319	1,597	3,931
4. PLHIV who are on ART and tested for their viral load	1,217	877	2,101
4.1 PLHIV who are virally suppressed	1,163	840	2,010

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	1,000
2. Colleges with operational Red Ribbon Clubs (RRC)	362
3. Persons trained under mainstreaming	35
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				6
	Male	Female	TG	Total
2. Clients managed				38,028
3. RPR Tests conducted at DSRC	2,382	5,814	6	8,202
4. Syphilis seropositivity (%) at DSRC	1.89	0.07	83.33	0.66

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	25
2. OST centres (Excluding Satellite OST centres)	6

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	4,634
2. Coverage (%)	77.32
3. Condoms distributed	80,777
4. Tested for HIV (April 2024-September 2024)	3,187
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	3,425
5.1. HIV sero-positive (%)	0.03
5.1.1. Linked to ART	1
6. Clinic Visits	11,196
7. STI/RTI treated	946
8. Presumptive treatment	658

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	677
2. Coverage (%)	≥95
3. Condoms distributed	32,517
4. Tested for HIV (April 2024-September 2024)	788
4.1. HIV sero-positive (%)	0.25
4.1.1. Linked to ART	2
5. Tested for HIV (October 2024 -March 2025)	897
5.1. HIV sero-positive (%)	0.00
5.1.1. Linked to ART	0
6. Clinic Visits	3,196
7. STI/RTI treated	166
8. Presumptive treatment	140

D. Injecting drug users

Indicator	2024-25
1. Estimated size	10,162
2. Coverage (%)	60.53
3. Needles distributed	16,21,905
4. Syringes distributed	8,76,426
5. On OST	866
6. Tested for HIV (April 2024-September 2024)	5,395
6.1. HIV sero-positive (%)	0.43
6.1.1 Linked to ART	22
7. Tested for HIV (October 2023 -March 2024)	5,003
7.1. HIV sero-positive (%)	0.04
7.1.1. Linked to ART	3

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	614
2. Coverage (%)	0
3. Condoms distributed	0
4. Tested for HIV (April 2024-September 2024)	0
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	0
5.1. HIV sero-positive (%)	-
5.1.1. Put on ART	0
6. Clinic Visits	0
7. STI/RTI treated	0
8. Presumptive treatment	0

F. Migrants

Indicator	2024-25
1. Estimated size	25,000
2. Coverage (%)	≥95
3. Tested for HIV	9,801
3.1 HIV sero-positive (%)	0.12
3.2. Linked to ART	9

G. Truckers

Indicator	2024-25
1. Estimated size	20,000
2. Coverage (%)	≥95
3. Tested for HIV	10,212
3.1. HIV sero-positive (%)	0.08
3.2. On ART	3

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	16
2. Prisons covered under programme	16
3. Total inmates admitted in prisons	15,509
4. Inmates Covered in prisons (%)	77.5
5. Tested for HIV in prisons	11,930
5.1. HIV sero-positive (%)	0.06
5.2. On ART (%)	71.4
6. Total OCS	4
7. OCS covered under programme	6
8. Total inmates admitted in OCS	600
9. Inmates Covered in OCS (%)	28.7
10.Tested for HIV in OCS	172
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	6
1.1. OSTC in Public Health Settings	6
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	866

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	35
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	1,91,366	1,36,448	72	3,27,886
1.1 HIV Positives	302	112	1	415
1.2 HIV sero-positivity (%)	0.16	0.08	1.39	0.13
2. Contacts of HIV positive people tested#				429
2.1 HIV Positives*				23
2.2 HIV sero-positivity (%)				5.36
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				221

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	3
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	3
4. Care Support Centres	1

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	302	129	1	432
2. New PLHIV Registered at ART center	285	117	1	403
2.1 Initiated on ART	275	112	1	388
3. PLHIV alive and on ART#	2,319	1,597	15	3,931
4. 12 months retention on ART (%)				94.7
5. Lost to follow-up cases	281	97	2	380

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	2,759
2.1. Suppressed test result (%)	90.61
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	2
4.1 Accredited SRL	2
5. CD4 machines	2
5.1 CD4 tests conducted	3,255
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	12

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	2,24,187
2. HIV testing coverage (%)	67.5
3. HIV sero-positivity (%) among tested	0.01
4. HIV Positive PW (old + new detections)	33
4.1 On life-long ART	29
5. Live births among HIV positive PW	28
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	20
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	13
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	18.22
2. Sero-positivity (%) among tested	0.00
3. Put on treatment	2

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	2,162	1,962	5,102	-	1,754	93	5,384	1,803	18,260
	Quarter 2	2,402	1,819	5,386	-	2,741	102	5,613	2,067	20,130
	Quarter 3	2,539	1,862	5,197	-	2,682	198	6,208	3,005	21,691
	Quarter 4	2,427	1,591	5,193	-	6,855	122	4,951	2,604	23,743
Tested for TB	Quarter 1	-	-	32	-	569	60	56	76	793
	Quarter 2	-	-	35	-	177	34	29	81	356
	Quarter 3	-	-	23	-	77	10	31	84	225
	Quarter 4	-	-	41	-	979	89	40	57	1,206
Diagnosed with TB	Quarter 1	-	-	-	-	1	-	-	7	8
	Quarter 2	-	-	-	-	3	-	-	6	9
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	14	-	-	-	14
Initiated on TB treatment	Quarter 1	-	-	-	-	1	-	-	5	6
	Quarter 2	-	-	-	-	3	-	-	4	7
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	14	-	-	-	14

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	2,944	2,944	16	16	5	22		
May - 24	3,049	3,049	16	16	4	34		
Jun - 24	2,851	2,851	25	25	3	35		
Jul - 24	3,122	3,122	307	45	8	30		
Aug - 24	3,186	3,186	300	19	3	46		
Sep - 24	2,871	2,871	18	18	1	26		
Oct - 24	3,046	3,046	21	21	5	42		
Nov - 24	2,503	2,503	12	12	4	17		
Dec - 24	2,987	2,987	15	15	3	14		
Jan - 25	2,601	2,601	9	9	-	26		
Feb - 25	2,633	2,633	11	11	5	17		
Mar - 25	3,069	3,069	17	17	5	14		
April 2024-March 2025							48	44

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	J&K & Ladakh
	Rank	**6**
Sl. No.	Obtained Score [%]	60.5
	Obtained Score [N]	107
	Maximum Score [N]	177
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	68
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	86
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	69
5	Status of AEP integration in state school curriculum [G: Yes, R: No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	86
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	66
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	90
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	82
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	76
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	73
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	29
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	98
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	68
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	18
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	100
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	23
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	71
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	16
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	13
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	75
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	77
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	5
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	4
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	0
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	NA
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	NA
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	NA
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	NA
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	79
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	20-06-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	03-02-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	01-05-2025
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	93
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	0
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	98

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

JHARKHAND



JHARKHAND

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	3.45
2. IMR	-	-	2.12
3. Adult (15-49 yrs) HIV Prevalence (%)	0.08	0.07	0.07
4. People living with HIV	13,122	11,147	24,268
5. ART coverage (%)	68.69	71.60	70.40
6. Children living with HIV	533	499	1,032
7. Annual new HIV infections	442	396	838
8. Annual AIDS-related deaths (ARD)	91	58	149
9. Change in annual new HIV infections since 2010 (%)	-52.68	-46.27	-49.85
10. Change in annual ARD since 2010 (%)	-67.84	-73.76	-70.44
11. EVTH need	-	307	307

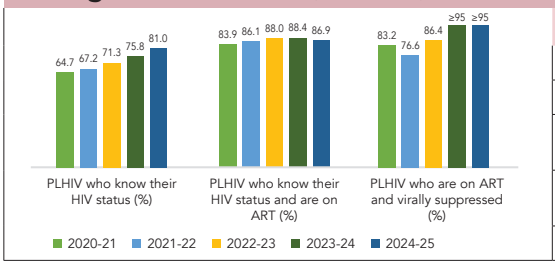
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	11,860	97.70	-	0.30
2. Men who have sex with men	1,742	100.00	-	0.20
3. Injecting Drug Users	779	-	95.10	0.00
4. Hijra/Transgender People	483	-	-	-
5. Migrants	20,000	-	-	-
6. Truckers	35,000	-	-	0.00
7. Prison inmates	58,207	28.60	33.30	0.38

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	31.10	13.80	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	28.40	15.20	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	86.20	77.20	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	75.30	67.50	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	3.60	0.40	-
5.1 Condom use during last higher-risk intercourse (%)	38.30	23.10	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	5.71	0.68	-
6.1 Condom use during last higher-risk intercourse (%)	35.59	30.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	13,122	11,147	24,268
2. PLHIV who know their HIV Status	10,488	9,060	19,658
3. PLHIV who know their HIV status and are on ART	9,013	7,981	17,084
4. PLHIV who are on ART and tested for their viral load	6,542	5,793	12,387
4.1 PLHIV who are virally suppressed	6,320	5,628	11,996

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	15,127
2. Colleges with operational Red Ribbon Clubs (RRC)	321
3. Persons trained under mainstreaming	105
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				28
	Male	Female	TG	Total
2. Clients managed				99,510
3. RPR Tests conducted at DSRC	7,209	9,398	10	16,617
4. Syphilis seropositivity (%) at DSRC	0.92	0.16	50.00	0.52

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	33
2. OST centres (Excluding Satellite OST centres)	3

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	11,860
2. Coverage (%)	≥95
3. Condoms distributed	29,57,887
4. Tested for HIV (April 2024-September 2024)	17,348
4.1. HIV sero-positive (%)	0.02
4.1.1. Linked to ART	3
5. Tested for HIV (October 2024 -March 2025)	17,520
5.1. HIV sero-positive (%)	0.03
5.1.1. Linked to ART	6
6. Clinic Visits	69,503
7. STI/RTI treated	1,170
8. Presumptive treatment	2,469

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	1,742
2. Coverage (%)	≥95
3. Condoms distributed	4,11,950
4. Tested for HIV (April 2024-September 2024)	2,661
4.1. HIV sero-positive (%)	0.23
4.1.1. Linked to ART	6
5. Tested for HIV (October 2024 -March 2025)	2,915
5.1. HIV sero-positive (%)	0.34
5.1.1. Linked to ART	8
6. Clinic Visits	10,644
7. STI/RTI treated	75
8. Presumptive treatment	292

D. Injecting drug users

Indicator	2024-25
1. Estimated size	779
2. Coverage (%)	≥95
3. Needles distributed	4,63,073
4. Syringes distributed	4,25,511
5. On OST	128
6. Tested for HIV (April 2024-September 2024)	1,377
6.1. HIV sero-positive (%)	0.51
6.1.1 Linked to ART	7
7. Tested for HIV (October 2023 -March 2024)	1,539
7.1. HIV sero-positive (%)	0.19
7.1.1. Linked to ART	3

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	483
2. Coverage (%)	≥95
3. Condoms distributed	1,01,844
4. Tested for HIV (April 2024-September 2024)	738
4.1. HIV sero-positive (%)	0.14
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	845
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	3,087
7. STI/RTI treated	28
8. Presumptive treatment	141

F. Migrants

Indicator	2024-25
1. Estimated size	20,000
2. Coverage (%)	≥95
3. Tested for HIV	9,856
3.1 HIV sero-positive (%)	0.14
3.2. Linked to ART	14

G. Truckers

Indicator	2024-25
1. Estimated size	35,000
2. Coverage (%)	92.9
3. Tested for HIV	12,852
3.1. HIV sero-positive (%)	0.02
3.2. On ART	2

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	32
2. Prisons covered under programme	32
3. Total inmates admitted in prisons	58,207
4. Inmates Covered in prisons (%)	64.8
5. Tested for HIV in prisons	37,702
5.1. HIV sero-positive (%)	0.07
5.2. On ART (%)	92.3
6. Total OCS	2
7. OCS covered under programme	5
8. Total inmates admitted in OCS	300
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	382
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	3
1.1. OSTC in Public Health Settings	3
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	128

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	65
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	2,42,475	2,17,605	524	4,60,604
1.1 HIV Positives	1,328	718	44	2,090
1.2 HIV sero-positivity (%)	0.55	0.33	8.40	0.45
2. Contacts of HIV positive people tested#				5,095
2.1 HIV Positives*				128
2.2 HIV sero-positivity (%)				2.51
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				1,309

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	13
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	8
4. Care Support Centres	5

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	1,328	827	44	2,199
2. New PLHIV Registered at ART center	1,317	821	30	2,168
2.1 Initiated on ART	1,280	809	30	2,119
3. PLHIV alive and on ART#	9,013	7,981	90	17,084
4. 12 months retention on ART (%)				95.1
5. Lost to follow-up cases	550	355	10	915

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	14,351
2.1. Suppressed test result (%)	92.17
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	3
4.1 Accredited SRL	2
5. CD4 machines	7
5.1 CD4 tests conducted	5,675
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100.0
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	10,20,306
2. HIV testing coverage (%)	61.3
3. HIV sero-positivity (%) among tested	0.02
4. HIV Positive PW (old + new detections)	280
4.1 On life-long ART	282
5. Live births among HIV positive PW	175
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	123
6.1 Babies confirmed HIV Positive (6 week- 6 month)	3
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	71
7.2 Babies confirmed HIV positive at 18 months	3
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	11
9. HIV positive babies initiated on ART	7

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	72.4
2. Sero-positivity (%) among tested	0.02
3. Put on treatment	114

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	15,978	2,435	1,532	685	5,324	4	6,157	6,375	38,490
	Quarter 2	16,377	2,667	1,488	698	11,299	85	6,213	6,936	45,763
	Quarter 3	17,428	2,723	1,632	791	9,158	221	5,842	9,029	46,824
	Quarter 4	18,149	2,806	1,792	806	14,299	64	6,411	10,282	54,609
Tested for TB	Quarter 1	65	1	3	-	28	-	1	-	98
	Quarter 2	79	-	-	-	74	-	6	-	159
	Quarter 3	60	3	3	-	997	2	1	-	1,066
	Quarter 4	86	1	1	-	2,303	-	8	-	2,399
Diagnosed with TB	Quarter 1	-	-	-	-	4	-	-	-	4
	Quarter 2	1	-	-	-	5	-	-	-	6
	Quarter 3	-	-	-	-	8	-	-	-	8
	Quarter 4	-	1	-	-	20	-	-	-	21
Initiated on TB treatment	Quarter 1	-	-	-	-	4	-	-	-	4
	Quarter 2	1	-	-	-	5	-	-	-	6
	Quarter 3	-	-	-	-	8	-	-	-	8
	Quarter 4	-	1	-	-	20	-	-	-	21

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	11,880	11,302	392	357	25	107		
May - 24	11,539	10,948	339	314	26	148		
Jun - 24	11,468	11,209	335	307	27	127		
Jul - 24	12,421	12,258	368	345	33	121		
Aug - 24	12,372	12,263	2,631	330	22	193		
Sep - 24	11,840	11,680	2,133	354	16	222		
Oct - 24	12,478	12,375	409	357	18	89		
Nov - 24	12,102	11,996	472	396	14	151		
Dec - 24	13,083	12,961	512	429	19	178		
Jan - 25	12,976	12,298	743	614	17	167		
Feb - 25	11,822	11,252	472	420	19	144		
Mar - 25	12,423	12,325	487	442	21	158		
April 2024- March 2025							374	349

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Jharkhand
	Rank	**20**
Sl. No.	Obtained Score [%]	62.4
	Obtained Score [N]	118
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	81
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	47
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	75
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	186
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	84
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	61
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	83
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	82
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	16
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	86
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	65
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	77
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	98
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	31
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	70
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	19
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	47
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	43
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	96
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	88
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	6
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	7
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	67
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	75
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	1
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	0
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	0
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	50
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	0
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	59
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	10-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	23-10-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	07-08-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	86
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	96

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

KARNATAKA



KARNATAKA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	1.59
2. IMR	-	-	0.50
3. Adult (15-49 yrs) HIV Prevalence (%)	0.41	0.47	0.44
4. People living with HIV	1,37,988	1,53,359	2,91,348
5. ART coverage (%)	65.53	72.46	69.40
6. Children living with HIV	2,189	2,024	4,213
7. Annual new HIV infections	2,335	2,282	4,618
8. Annual AIDS-related deaths (ARD)	3,397	2,277	5,675
9. Change in annual new HIV infections since 2010 (%)	-65.85	-65.82	-65.83
10. Change in annual ARD since 2010 (%)	-79.26	-84.23	-81.58
11. EVTH need	-	1,306	1,306

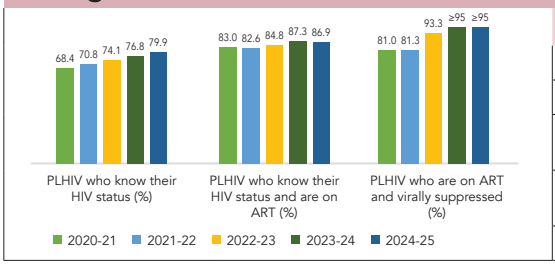
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	153,337	99.60	-	1.83
2. Men who have sex with men	45,631	88.60	-	4.04
3. Injecting Drug Users	4,331	-	100.00	0.00
4. Hijra/Transgender People	10,926	-	-	1.73
5. Migrants	210,000	86.60	-	0.40
6. Truckers	85,000	96.90	-	1.60
7. Prison inmates	68,550	69.70	64.00	1.03

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	26.60	24.50	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	24.40	26.80	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	78.80	73.70	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	74.80	69.50	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	2.80	0.40	-
5.1 Condom use during last higher-risk intercourse (%)	59.20	74.60	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	4.23	0.08	-
6.1 Condom use during last higher-risk intercourse (%)	56.86	100.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	1,37,988	1,53,359	2,91,348
2. PLHIV who know their HIV Status	1,07,315	1,24,663	2,32,795
3. PLHIV who know their HIV status and are on ART	90,426	1,11,124	2,02,190
4. PLHIV who are on ART and tested for their viral load	70,474	85,326	1,56,254
4.1 PLHIV who are virally suppressed	68,112	83,445	1,51,993

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	7,850
2. Colleges with operational Red Ribbon Clubs (RRC)	1,736
3. Persons trained under mainstreaming	2,863
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				54
	Male	Female	TG	Total
2. Clients managed				8,25,662
3. RPR Tests conducted at DSRC	98,680	1,61,225	3,977	2,63,882
4. Syphilis seropositivity (%) at DSRC	0.97	0.27	0.78	0.54

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	80
2. OST centres (Excluding Satellite OST centres)	2

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	1,53,337
2. Coverage (%)	≥95
3. Condoms distributed	2,08,29,847
4. Tested for HIV (April 2024-September 2024)	1,17,892
4.1. HIV sero-positive (%)	0.14
4.1.1. Linked to ART	164
5. Tested for HIV (October 2024 -March 2025)	1,21,942
5.1. HIV sero-positive (%)	0.14
5.1.1. Linked to ART	161
6. Clinic Visits	4,87,667
7. STI/RTI treated	5,669
8. Presumptive treatment	24,472

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	45,631
2. Coverage (%)	≥95
3. Condoms distributed	89,61,997
4. Tested for HIV (April 2024-September 2024)	49,954
4.1. HIV sero-positive (%)	0.30
4.1.1. Linked to ART	150
5. Tested for HIV (October 2024 -March 2025)	50,599
5.1. HIV sero-positive (%)	0.32
5.1.1. Linked to ART	160
6. Clinic Visits	1,91,501
7. STI/RTI treated	1,867
8. Presumptive treatment	9,055

D. Injecting drug users

Indicator	2024-25
1. Estimated size	4,331
2. Coverage (%)	74.24
3. Needles distributed	12,34,488
4. Syringes distributed	6,17,244
5. On OST	157
6. Tested for HIV (April 2024-September 2024)	2,739
6.1. HIV sero-positive (%)	0.15
6.1.1 Linked to ART	5
7. Tested for HIV (October 2023 -March 2024)	3,083
7.1. HIV sero-positive (%)	0.03
7.1.1. Linked to ART	0

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	10,926
2. Coverage (%)	≥95
3. Condoms distributed	27,73,600
4. Tested for HIV (April 2024-September 2024)	10,131
4.1. HIV sero-positive (%)	0.30
4.1.1. Linked to ART	29
5. Tested for HIV (October 2024 -March 2025)	10,342
5.1. HIV sero-positive (%)	0.31
5.1.1. Put on ART	33
6. Clinic Visits	41,330
7. STI/RTI treated	276
8. Presumptive treatment	1,838

F. Migrants

Indicator	2024-25
1. Estimated size	2,10,000
2. Coverage (%)	≥95
3. Tested for HIV	71,795
3.1 HIV sero-positive (%)	0.11
3.2. Linked to ART	74

G. Truckers

Indicator	2024-25
1. Estimated size	85,000
2. Coverage (%)	≥95
3. Tested for HIV	18,128
3.1. HIV sero-positive (%)	0.18
3.2. On ART	19

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	59
2. Prisons covered under programme	50
3. Total inmates admitted in prisons	68,550
4. Inmates Covered in prisons (%)	70.2
5. Tested for HIV in prisons	48,129
5.1. HIV sero-positive (%)	0.19
5.2. On ART (%)	68.1
6. Total OCS	81
7. OCS covered under programme	51
8. Total inmates admitted in OCS	4,084
9. Inmates Covered in OCS (%)	40.8
10.Tested for HIV in OCS	1,666
10.1. HIV sero-positive (%)	0.06
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	11
2. Vulnerable population covered	1,59,662
3. Tested for HIV	63,316
3.1. HIV sero-positive (%)	0.38
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	2
1.1. OSTC in Public Health Settings	2
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	157

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	443
2. Sampoorna Suraksha Kendras	7

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	20,15,602	18,29,118	32,074	38,76,794
1.1 HIV Positives	7,383	4,999	71	12,453
1.2 HIV sero-positivity (%)	0.37	0.27	0.22	0.32
2. Contacts of HIV positive people tested#				88,735
2.1 HIV Positives*				2,265
2.2 HIV sero-positivity (%)				2.55
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				6,406

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	89
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	1
3. Link ART Centres	301
4. Care Support Centres	36

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	7,383	5,396	71	12,850
2. New PLHIV Registered at ART center	7,121	5,302	73	12,496
2.1 Initiated on ART	7,062	5,260	73	12,395
3. PLHIV alive and on ART#	90,426	1,11,124	639	2,02,190
4. 12 months retention on ART (%)				94.8
5. Lost to follow-up cases	8,996	7,094	135	16,225

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	8
1.1 Accredited Viral load laboratories (out of 64 VL labs)	6
2. Viral load tests conducted	1,91,954
2.1. Suppressed test result (%)	92.89
3. National reference laboratories (NRL)	1
3.1 Accredited NRL	1
4. State reference laboratories (SRL)	10
4.1 Accredited SRL	10
5. CD4 machines	51
5.1 CD4 tests conducted	1,11,368
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	98.6
6.2. Average Discordance (%)	0.17
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	194

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	10,95,291
2. HIV testing coverage (%)	88.1
3. HIV sero-positivity (%) among tested	0.04
4. HIV Positive PW (old + new detections)	1,356
4.1 On life-long ART	1,349
5. Live births among HIV positive PW	1,039
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	891
6.1 Babies confirmed HIV Positive (6 week- 6 month)	2
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	926
7.2 Babies confirmed HIV positive at 18 months	11
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	29
9. HIV positive babies initiated on ART	16

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.01
3. Put on treatment	167

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	1,70,594	62,672	2,557	21,651	6,851	156	42,054	20,405	3,26,940
	Quarter 2	1,76,902	68,446	3,485	22,393	14,829	416	47,391	20,324	3,54,186
	Quarter 3	1,75,308	69,364	3,767	23,919	8,115	196	47,781	18,480	3,46,930
	Quarter 4	1,91,528	78,260	5,657	24,981	10,953	832	50,363	18,025	3,80,599
Tested for TB	Quarter 1	3,119	1,137	1	56	321	-	229	13	4,876
	Quarter 2	3,151	1,180	-	139	519	4	338	18	5,349
	Quarter 3	2,670	558	-	111	494	1	406	7	4,247
	Quarter 4	2,943	1,174	-	207	866	-	202	4	5,396
Diagnosed with TB	Quarter 1	6	-	-	1	3	-	1	-	11
	Quarter 2	11	7	-	3	8	-	2	-	31
	Quarter 3	7	5	-	1	2	-	3	-	18
	Quarter 4	13	3	-	-	13	-	2	-	31
Initiated on TB treatment	Quarter 1	6	-	-	1	3	-	2	-	12
	Quarter 2	11	2	-	1	7	-	2	-	23
	Quarter 3	7	5	-	1	2	-	1	-	16
	Quarter 4	12	4	-	-	12	-	1	-	29

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	1,47,714	1,44,089	5,279	5,200	220	1,352		
May - 24	1,51,357	1,47,612	9,598	5,634	238	1,517		
Jun - 24	1,45,709	1,43,014	5,704	5,615	219	1,920		
Jul - 24	1,54,899	1,51,009	6,241	6,192	211	2,039		
Aug - 24	1,46,773	1,43,126	6,095	6,039	206	2,248		
Sep - 24	1,42,585	1,39,427	6,026	5,949	214	1,690		
Oct - 24	1,37,775	1,34,896	5,868	5,818	247	1,313		
Nov - 24	1,24,666	1,22,291	5,722	5,646	237	1,399		
Dec - 24	1,22,635	1,20,192	6,679	6,609	240	1,323		
Jan - 25	1,29,750	1,26,773	8,044	7,858	246	1,339		
Feb - 25	1,16,628	1,13,979	7,233	7,103	229	1,238		
Mar - 25	1,24,638	1,21,850	6,166	6,074	239	1,352		
April 2024-March 2025							3,251	3,184

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Karnataka
	Rank	**11**
Sl. No.	Obtained Score [%]	69.8
	Obtained Score [N]	132
	Maximum Score [N]	189
	Key Indicators	**Percentage**
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2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	59
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	94
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	122
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	84
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25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	43
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	70
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	98
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	93
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	4
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	6
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	99
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	75
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	35
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39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	97
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	67
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	91
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	08-05-2024
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45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	87
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Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

KERALA



KERALA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	1.24
2. IMR	-	-	0.59
3. Adult (15-49 yrs) HIV Prevalence (%)	0.07	0.06	0.07
4. People living with HIV	12,580	11,028	23,608
5. ART coverage (%)	81.49	74.08	78.20
6. Children living with HIV	192	184	376
7. Annual new HIV infections	154	138	292
8. Annual AIDS-related deaths (ARD)	76	144	221
9. Change in annual new HIV infections since 2010 (%)	-75.71	-76.04	-75.85
10. Change in annual ARD since 2010 (%)	-84.58	-73.18	-78.54
11. EVTH need	-	72	72

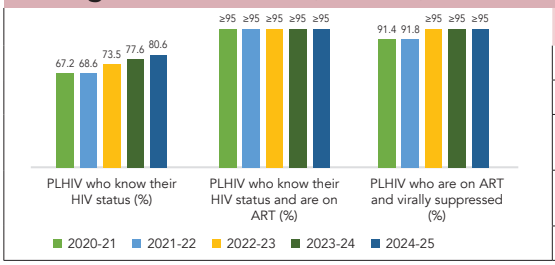
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	16,623	95.10	-	0.28
2. Men who have sex with men	13,836	80.70	-	0.45
3. Injecting Drug Users	3,276	-	99.50	0.00
4. Hijra/Transgender People	2,604	-	-	0.53
5. Migrants	1,50,000	-	80.00	0.20
6. Truckers	20,000	-	-	0.80
7. Prison inmates	51,225	35.00	82.80	0.25

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	45.20	34.80	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	40.60	30.20	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	65.30	71.00	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	78.90	71.70	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	0.50	0.00	-
5.1 Condom use during last higher-risk intercourse (%)	47.90	NA	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	0.51	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	0.00	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	12,580	11,028	23,608
2. PLHIV who know their HIV Status	10,888	8,094	19,031
3. PLHIV who know their HIV status and are on ART	10,251	8,170	18,462
4. PLHIV who are on ART and tested for their viral load	8,790	7,142	15,967
4.1 PLHIV who are virally suppressed	8,795	7,124	15,955

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	2,050
2. Colleges with operational Red Ribbon Clubs (RRC)	318
3. Persons trained under mainstreaming	-
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				23
	Male	Female	TG	Total
2. Clients managed				1,40,156
3. RPR Tests conducted at DSRC	23,716	20,061	423	44,200
4. Syphilis seropositivity (%) at DSRC	4.71	1.62	3.07	3.29

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	64
2. OST centres (Excluding Satellite OST centres)	10

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	16,623
2. Coverage (%)	≥95
3. Condoms distributed	32,06,844
4. Tested for HIV (April 2024-September 2024)	18,243
4.1. HIV sero-positive (%)	0.01
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	14,192
5.1. HIV sero-positive (%)	0.05
5.1.1. Linked to ART	6
6. Clinic Visits	65,841
7. STI/RTI treated	456
8. Presumptive treatment	2,354

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	13,836
2. Coverage (%)	≥95
3. Condoms distributed	20,66,767
4. Tested for HIV (April 2024-September 2024)	15,165
4.1. HIV sero-positive (%)	0.09
4.1.1. Linked to ART	14
5. Tested for HIV (October 2024 -March 2025)	11,255
5.1. HIV sero-positive (%)	0.07
5.1.1. Linked to ART	8
6. Clinic Visits	52,217
7. STI/RTI treated	176
8. Presumptive treatment	1,353

D. Injecting drug users

Indicator	2024-25
1. Estimated size	3,276
2. Coverage (%)	≥95
3. Needles distributed	7,82,556
4. Syringes distributed	3,91,143
5. On OST	640
6. Tested for HIV (April 2024-September 2024)	3,158
6.1. HIV sero-positive (%)	0.25
6.1.1 Linked to ART	5
7. Tested for HIV (October 2023 -March 2024)	3,079
7.1. HIV sero-positive (%)	0.55
7.1.1. Linked to ART	11

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	2,604
2. Coverage (%)	≥95
3. Condoms distributed	6,27,161
4. Tested for HIV (April 2024-September 2024)	3,456
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	2,869
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	10,739
7. STI/RTI treated	45
8. Presumptive treatment	365

F. Migrants

Indicator	2024-25
1. Estimated size	1,50,000
2. Coverage (%)	≥95
3. Tested for HIV	43,003
3.1 HIV sero-positive (%)	0.15
3.2. Linked to ART	55

G. Truckers

Indicator	2024-25
1. Estimated size	20,000
2. Coverage (%)	≥95
3. Tested for HIV	10,632
3.1. HIV sero-positive (%)	0.08
3.2. On ART	3

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	57
2. Prisons covered under programme	56
3. Total inmates admitted in prisons	51,225
4. Inmates Covered in prisons (%)	74.8
5. Tested for HIV in prisons	38,318
5.1. HIV sero-positive (%)	0.18
5.2. On ART (%)	73.9
6. Total OCS	34
7. OCS covered under programme	22
8. Total inmates admitted in OCS	900
9. Inmates Covered in OCS (%)	57.8
10.Tested for HIV in OCS	520
10.1. HIV sero-positive (%)	0.19
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	10
1.1. OSTC in Public Health Settings	7
1.2. OSTC in NGO Settings	3
1.3 No. of Satellite OST Centres	1
2. IDU on OST	640

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	88
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	9,11,159	8,39,376	3,345	17,53,880
1.1 HIV Positives	935	262	1	1,198
1.2 HIV sero-positivity (%)	0.10	0.03	0.03	0.07
2. Contacts of HIV positive people tested#				5,750
2.1 HIV Positives*				202
2.2 HIV sero-positivity (%)				3.51
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	18
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	15
4. Care Support Centres	7

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	935	278	1	1,214
2. New PLHIV Registered at ART center	766	239	1	1,006
2.1 Initiated on ART	686	217	1	904
3. PLHIV alive and on ART#	10,251	8,170	41	18,462
4. 12 months retention on ART (%)				97.0
5. Lost to follow-up cases	686	150	6	842

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	17,440
2.1. Suppressed test result (%)	97.56
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	5
4.1 Accredited SRL	5
5. CD4 machines	9
5.1 CD4 tests conducted	9,786
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	99.1
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	25

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	3,73,288
2. HIV testing coverage (%)	>=95
3. HIV sero-positivity (%) among tested	0.00
4. HIV Positive PW (old + new detections)	65
4.1 On life-long ART	58
5. Live births among HIV positive PW	39
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	47
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	69
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	1
9. HIV positive babies initiated on ART	1

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.01
3. Put on treatment	32

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	20,355	13,932	2,936	2,972	8,768	279	24,935	4,694	78,871
	Quarter 2	21,399	13,685	3,190	3,128	9,580	76	24,952	4,982	80,992
	Quarter 3	21,391	13,892	3,253	2,966	9,678	92	25,693	4,908	81,873
	Quarter 4	19,107	14,319	3,360	3,169	10,404	73	25,230	4,880	80,542
Tested for TB	Quarter 1	36	66	23	4	368	36	96	-	629
	Quarter 2	121	146	10	14	458	-	174	-	923
	Quarter 3	193	272	57	41	610	5	250	-	1,428
	Quarter 4	192	97	5	19	479	1	238	-	1,031
Diagnosed with TB	Quarter 1	-	1	-	-	1	-	2	-	4
	Quarter 2	-	-	-	-	-	-	2	-	2
	Quarter 3	-	-	1	-	7	-	-	-	8
	Quarter 4	-	-	1	-	1	-	1	1	4
Initiated on TB treatment	Quarter 1	-	1	-	-	1	-	1	-	3
	Quarter 2	-	-	-	-	-	-	1	-	1
	Quarter 3	-	-	1	-	7	-	-	-	8
	Quarter 4	-	-	1	-	1	-	1	1	4

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	9,906	9,906	149	149	9	86		
May - 24	8,817	8,817	195	176	12	58		
Jun - 24	8,727	8,727	202	167	11	55		
Jul - 24	10,044	10,044	181	181	20	110		
Aug - 24	9,201	9,201	149	148	14	100		
Sep - 24	9,303	9,303	192	192	19	135		
Oct - 24	10,228	10,228	193	193	24	134		
Nov - 24	9,395	9,395	174	174	17	61		
Dec - 24	9,055	9,055	191	191	21	56		
Jan - 25	9,571	9,571	171	171	22	87		
Feb - 25	8,540	8,540	181	181	24	50		
Mar - 25	9,085	9,085	179	170	22	42		
April 2024- March 2025							166	145

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Kerala
	Rank	**13**
Sl. No.	Obtained Score [%]	68.8
	Obtained Score [N]	130
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	81
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	53
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	177
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	69
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	72
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	68
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	59
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	34
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	196
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	69
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	87
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	100
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	76
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	121
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	36
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	94
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	70
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HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

LAKSHDWEEP



LAKSHDWEEP

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	-
2. IMR	-	-	-
3. Adult (15-49 yrs) HIV Prevalence (%)	-	-	-
4. People living with HIV	-	-	-
5. ART coverage (%)	-	-	-
6. Children living with HIV	-	-	-
7. Annual new HIV infections	-	-	-
8. Annual AIDS-related deaths (ARD)	-	-	-
9. Change in annual new HIV infections since 2010 (%)	-	-	-
10. Change in annual ARD since 2010 (%)	-	-	-
11. EVTH need	-	-	-

B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	-			
2. Men who have sex with men	-	-		
3. Injecting Drug Users	-	-		
4. Hijra/Transgender People	-	-		
5. Migrants	-	-		
6. Truckers	-	-		
7. Prison inmates	-	-		

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)			
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)			
3. Adults willing to care for a relative with HIV/AIDS in own home (%)			
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)			
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)			
5.1 Condom use during last higher-risk intercourse (%)			
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)			
6.1 Condom use during last higher-risk intercourse (%)			

2. Progress on 95-95-95 (2024-25)

Indicators	Male	Female	Total*
1. Estimated PLHIV size (2023)			
2. PLHIV who know their HIV Status			
3. PLHIV who know their HIV status and are on ART			
4. PLHIV who are on ART and tested for their viral load			
4.1 PLHIV who are virally suppressed			

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	
2. Colleges with operational Red Ribbon Clubs (RRC)	
3. Persons trained under mainstreaming	
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator	2024-25			
1. NACO Supported Designated STI/RTI Clinics (DSRC)	Male	Female	TG	Total
2. Clients managed				
3. RPR Tests conducted at DSRC				
4. Syphilis seropositivity (%) at DSRC				

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	
2. OST centres (Excluding Satellite OST centres)	

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	
2. Coverage (%)	
3. Condoms distributed	
4. Tested for HIV (April 2024-September 2024)	
4.1. HIV sero-positive (%)	
4.1.1. Linked to ART	
5. Tested for HIV (October 2024 -March 2025)	
5.1. HIV sero-positive (%)	
5.1.1. Linked to ART	
6. Clinic Visits	
7. STI/RTI treated	
8. Presumptive treatment	

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	
2. Coverage (%)	
3. Condoms distributed	
4. Tested for HIV (April 2024-September 2024)	
4.1. HIV sero-positive (%)	
4.1.1. Linked to ART	
5. Tested for HIV (October 2024 -March 2025)	
5.1. HIV sero-positive (%)	
5.1.1. Linked to ART	
6. Clinic Visits	
7. STI/RTI treated	
8. Presumptive treatment	

D. Injecting drug users

Indicator	2024-25
1. Estimated size	
2. Coverage (%)	
3. Needles distributed	
4. Syringes distributed	
5. On OST	
6. Tested for HIV (April 2024-September 2024)	
6.1. HIV sero-positive (%)	
6.1.1 Linked to ART	
7. Tested for HIV (October 2023 -March 2024)	
7.1. HIV sero-positive (%)	
7.1.1. Linked to ART	

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	
2. Coverage (%)	
3. Condoms distributed	
4. Tested for HIV (April 2024-September 2024)	
4.1. HIV sero-positive (%)	
4.1.1. Linked to ART	
5. Tested for HIV (October 2024 -March 2025)	
5.1. HIV sero-positive (%)	
5.1.1. Put on ART	
6. Clinic Visits	
7. STI/RTI treated	
8. Presumptive treatment	

F. Migrants

Indicator	2024-25
1. Estimated size	
2. Coverage (%)	
3. Tested for HIV	
3.1 HIV sero-positive (%)	
3.2. Linked to ART	

G. Truckers

Indicator	2024-25
1. Estimated size	
2. Coverage (%)	
3. Tested for HIV	
3.1. HIV sero-positive (%)	
3.2. On ART	

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	
2. Prisons covered under programme	
3. Total inmates admitted in prisons	
4. Inmates Covered in prisons (%)	
5. Tested for HIV in prisons	
5.1. HIV sero-positive (%)	
5.2. On ART (%)	
6. Total OCS	
7. OCS covered under programme	
8. Total inmates admitted in OCS	
9. Inmates Covered in OCS (%)	
10.Tested for HIV in OCS	
10.1. HIV sero-positive (%)	
10.2. On ART (%)	

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	
2. Vulnerable population covered	
3. Tested for HIV	
3.1. HIV sero-positive (%)	
3.2. Linked to ART (%)	

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	
1.1. OSTC in Public Health Settings	
1.2. OSTC in NGO Settings	
1.3 No. of Satellite OST Centres	
2. IDU on OST	

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	1
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	1679	1567	0	3246
1.1 HIV Positives	0	0	0	0
1.2 HIV sero-positivity (%)	0.00	0.00	0.00	0.00
2. Contacts of HIV positive people tested#	0	0	0	0
2.1 HIV Positives*	0	0	0	0
2.2 HIV sero-positivity (%)	0.00	0.00	0.00	0.00
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**	0	0	0	0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	
2.2 Centre of Excellent (Paediatric)	
3. Link ART Centres	
4. Care Support Centres	

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)				
2. New PLHIV Registered at ART center				
2.1 Initiated on ART				
3. PLHIV alive and on ART#				
4. 12 months retention on ART (%)				
5. Lost to follow-up cases				

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	
1.1 Accredited Viral load laboratories (out of 64 VL labs)	
2. Viral load tests conducted	
2.1. Suppressed test result (%)	
3. National reference laboratories (NRL)	
3.1 Accredited NRL	
4. State reference laboratories (SRL)	
4.1 Accredited SRL	
5. CD4 machines	
5.1 CD4 tests conducted	
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	
6.2. Average Discordance (%)	
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	837
2. HIV testing coverage (%)	61.41
3. HIV sero-positivity (%) among tested	0.00
4. HIV Positive PW (old + new detections)	0
4.1 On life-long ART	0
5. Live births among HIV positive PW	0
5.1 Babies given ARV Prophylaxis (%)	0.00
6. Babies tested HIV (6 week- 6 month)	0
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	0
7.2 Babies confirmed HIV positive at 18 months	0
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	0
9. HIV positive babies initiated on ART	0

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	74.31
2. Sero-positivity (%) among tested	0.00
3. Put on treatment	0

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	
2. State designated/appointed ombudsman	

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Migrants	Truckers	Prison inmates	OCS inmates	Total
Screened for TB	Quarter 1									
	Quarter 2									
	Quarter 3									
	Quarter 4									
Tested for TB	Quarter 1									
	Quarter 2									
	Quarter 3									
	Quarter 4									
Diagnosed with TB	Quarter 1									
	Quarter 2									
	Quarter 3									
	Quarter 4									
Initiated on TB treatment	Quarter 1									
	Quarter 2									
	Quarter 3									
	Quarter 4									

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24								
May - 24								
Jun - 24								
Jul - 24								
Aug - 24								
Sep - 24								
Oct - 24								
Nov - 24								
Dec - 24								
Jan - 25								
Feb - 25								
Mar - 25								
April 2024-March 2025								

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Lakshdweep
	Rank	
Sl. No.	Obtained Score [%]	
	Obtained Score [N]	
	Maximum Score [N]	
	Key Indicators	**Percentage**
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Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable
Weight points	Indicators Sl. No.		

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

MADHYA PRADESH



MADHYA PRADESH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.29
2. IMR	-	-	1.07
3. Adult (15-49 yrs) HIV Prevalence (%)	0.10	0.09	0.10
4. People living with HIV	39,037	30,898	69,935
5. ART coverage (%)	67.83	63.56	66.18
6. Children living with HIV	1,118	1,033	2,151
7. Annual new HIV infections	870	731	1,601
8. Annual AIDS-related deaths (ARD)	356	364	720
9. Change in annual new HIV infections since 2010 (%)	-66.50	-63.76	-65.30
10. Change in annual ARD since 2010 (%)	-88.64	-82.00	-86.03
11. EVTH need	-	782	782

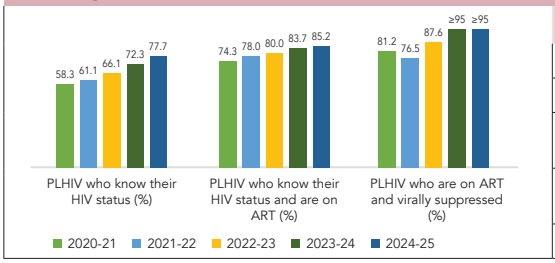
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	53,455	99.90	-	0.49
2. Men who have sex with men	18,085	96.30	-	1.33
3. Injecting Drug Users	11,919	-	97.10	4.40
4. Hijra/Transgender People	1,614	-	-	8.80
5. Migrants	1,25,834	-	-	0.20
6. Truckers	85,000	59.80	-	1.40
7. Prison inmates	1,74,621	65.20	78.30	1.42

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	26.20	18.70	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	23.70	17.30	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	73.90	71.50	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	60.70	59.60	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	5.50	0.50	-
5.1 Condom use during last higher-risk intercourse (%)	56.90	40.50	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	10.20	0.97	-
6.1 Condom use during last higher-risk intercourse (%)	51.57	50.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	39,037	30,898	69,935
2. PLHIV who know their HIV Status	31,381	22,743	54,343
3. PLHIV who know their HIV status and are on ART	26,478	19,638	46,283
4. PLHIV who are on ART and tested for their viral load	19,396	14,543	34,032
4.1 PLHIV who are virally suppressed	18,750	14,195	33,038

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	-
2. Colleges with operational Red Ribbon Clubs (RRC)	800
3. Persons trained under mainstreaming	52
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				66
	Male	Female	TG	Total
2. Clients managed				8,51,175
3. RPR Tests conducted at DSRC	1,05,749	1,82,714	599	2,89,062
4. Syphilis seropositivity (%) at DSRC	1.92	0.60	4.67	1.09

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	72
2. OST centres (Excluding Satellite OST centres)	18

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	53,455
2. Coverage (%)	≥95
3. Condoms distributed	82,39,947
4. Tested for HIV (April 2024-September 2024)	42,918
4.1. HIV sero-positive (%)	0.14
4.1.1. Linked to ART	55
5. Tested for HIV (October 2024 -March 2025)	44,444
5.1. HIV sero-positive (%)	0.13
5.1.1. Linked to ART	55
6. Clinic Visits	1,67,163
7. STI/RTI treated	3,515
8. Presumptive treatment	6,590

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	18,085
2. Coverage (%)	≥95
3. Condoms distributed	24,39,006
4. Tested for HIV (April 2024-September 2024)	16,284
4.1. HIV sero-positive (%)	0.61
4.1.1. Linked to ART	92
5. Tested for HIV (October 2024 -March 2025)	17,264
5.1. HIV sero-positive (%)	0.44
5.1.1. Linked to ART	74
6. Clinic Visits	66,007
7. STI/RTI treated	975
8. Presumptive treatment	2,869

D. Injecting drug users

Indicator	2024-25
1. Estimated size	11,919
2. Coverage (%)	≥95
3. Needles distributed	13,71,809
4. Syringes distributed	13,70,488
5. On OST	2,349
6. Tested for HIV (April 2024-September 2024)	8,882
6.1. HIV sero-positive (%)	0.57
6.1.1 Linked to ART	45
7. Tested for HIV (October 2023 -March 2024)	9,554
7.1. HIV sero-positive (%)	0.53
7.1.1. Linked to ART	49

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	1,614
2. Coverage (%)	80.13
3. Condoms distributed	1,53,561
4. Tested for HIV (April 2024-September 2024)	997
4.1. HIV sero-positive (%)	0.50
4.1.1. Linked to ART	5
5. Tested for HIV (October 2024 -March 2025)	1,114
5.1. HIV sero-positive (%)	1.44
5.1.1. Put on ART	16
6. Clinic Visits	4,423
7. STI/RTI treated	60
8. Presumptive treatment	241

F. Migrants

Indicator	2024-25
1. Estimated size	1,25,834
2. Coverage (%)	≥95
3. Tested for HIV	39,987
3.1 HIV sero-positive (%)	0.10
3.2. Linked to ART	37

G. Truckers

Indicator	2024-25
1. Estimated size	85,000
2. Coverage (%)	87.65
3. Tested for HIV	42,681
3.1. HIV sero-positive (%)	0.06
3.2. On ART	21

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	132
2. Prisons covered under programme	130
3. Total inmates admitted in prisons	1,74,621
4. Inmates Covered in prisons (%)	≥95
5. Tested for HIV in prisons	2,01,741
5.1. HIV sero-positive (%)	0.10
5.2. On ART (%)	≥95
6. Total OCS	66
7. OCS covered under programme	84
8. Total inmates admitted in OCS	500
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	3,351
10.1. HIV sero-positive (%)	0.24
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	10
2. Vulnerable population covered	99,761
3. Tested for HIV	95,564
3.1. HIV sero-positive (%)	0.09
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	18
1.1. OSTC in Public Health Settings	14
1.2. OSTC in NGO Settings	4
1.3 No. of Satellite OST Centres	1
2. IDU on OST	2,349

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	214
2. Sampoorna Suraksha Kendras	19

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	10,65,435	10,48,932	4,038	21,18,405
1.1 HIV Positives	4,527	1,994	39	6,560
1.2 HIV sero-positivity (%)	0.42	0.19	0.97	0.31
2. Contacts of HIV positive people tested#				15,388
2.1 HIV Positives*				2,369
2.2 HIV sero-positivity (%)				15.40
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				29,600

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	33
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	26
4. Care Support Centres	11

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	4,527	2,441	39	7,007
2. New PLHIV Registered at ART center	4,362	2,349	37	6,748
2.1 Initiated on ART	4,288	2,323	36	6,647
3. PLHIV alive and on ART#	26,478	19,638	167	46,283
4. 12 months retention on ART (%)				94.2
5. Lost to follow-up cases	3,148	1,793	35	4,976

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	2
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	42,427
2.1. Suppressed test result (%)	90.55
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	4
4.1 Accredited SRL	4
5. CD4 machines	16
5.1 CD4 tests conducted	27,096
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	93.8
6.2. Average Discordance (%)	0.25
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	18

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	21,53,045
2. HIV testing coverage (%)	66.1
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	845
4.1 On life-long ART	775
5. Live births among HIV positive PW	630
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	533
6.1 Babies confirmed HIV Positive (6 week- 6 month)	1
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	358
7.2 Babies confirmed HIV positive at 18 months	6
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	21
9. HIV positive babies initiated on ART	21

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	75.3
2. Sero-positivity (%) among tested	0.05
3. Put on treatment	854

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	42,044	17,861	9,916	1,710	61,338	477	24,353	21,074	1,78,773
	Quarter 2	44,642	17,590	10,088	1,592	43,337	913	24,071	18,941	1,61,174
	Quarter 3	39,496	16,813	10,023	1,356	37,234	1,380	16,933	15,247	1,38,482
	Quarter 4	36,884	15,284	18,639	931	64,312	2,097	15,189	14,649	1,67,985
Tested for TB	Quarter 1	1,385	506	580	2	7,993	3	171	117	10,757
	Quarter 2	1,719	909	677	5	5,201	10	354	394	9,269
	Quarter 3	1,345	592	673	17	6,930	-	109	176	9,842
	Quarter 4	1,079	765	711	20	12,713	12	82	130	15,512
Diagnosed with TB	Quarter 1	21	11	5	1	48	1	8	2	97
	Quarter 2	31	13	5	-	27	-	12	-	88
	Quarter 3	30	17	5	-	38	-	5	-	95
	Quarter 4	13	5	10	-	49	1	10	2	90
Initiated on TB treatment	Quarter 1	20	10	5	1	49	1	8	2	96
	Quarter 2	31	12	5	-	25	-	12	-	85
	Quarter 3	16	7	5	-	39	-	5	-	72
	Quarter 4	12	5	9	-	49	1	10	2	88

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	25,822	25,706	1,212	1,144	114	548		
May - 24	25,626	25,626	1,273	1,216	109	821		
Jun - 24	23,951	23,597	1,255	1,189	101	745		
Jul - 24	24,663	24,663	1,265	1,196	77	511		
Aug - 24	23,657	23,657	1,426	1,358	89	600		
Sep - 24	23,190	23,182	1,512	1,430	96	630		
Oct - 24	23,430	23,293	1,465	1,381	86	653		
Nov - 24	25,837	25,837	1,307	1,235	95	564		
Dec - 24	29,332	29,255	1,341	1,297	97	616		
Jan - 25	27,065	27,065	2,718	1,284	104	670		
Feb - 25	25,059	24,792	2,525	1,086	97	533		
Mar - 25	25,329	25,329	2,596	1,124	115	560		
April 2024-March 2025							1,373	1,341

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Madhya Pradesh
Rank		2
Sl. No.	Obtained Score [%]	75.7
	Obtained Score [N]	143
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	78
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	85
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	57
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	95
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	104
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	94
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	121
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	89
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	90
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	44
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	118
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	62
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	71
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	98
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	96
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	85
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	106
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	32
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	58
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	98
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	97
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	5
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	6
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	94
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	100
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	100
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	1
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	21
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	49
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	100
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	80
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	21-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	01-11-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	07-08-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	89
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	88

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

MAHARASHTRA



MAHARASHTRA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	1.34
2. IMR	-	-	0.47
3. Adult (15-49 yrs) HIV Prevalence (%)	0.28	0.29	0.29
4. People living with HIV	2,10,201	1,88,822	3,99,023
5. ART coverage (%)	75.52	84.91	80.27
6. Children living with HIV	4,533	3,964	8,497
7. Annual new HIV infections	2,799	2,535	5,334
8. Annual AIDS-related deaths (ARD)	5,051	1,808	6,858
9. Change in annual new HIV infections since 2010 (%)	-65.55	-61.49	-63.73
10. Change in annual ARD since 2010 (%)	-78.29	-84.26	-80.27
11. EVTH need	-	2,087	2,087

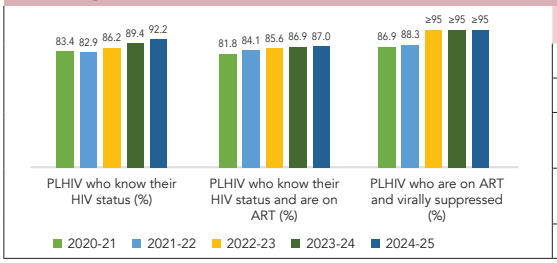
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	95,352	99.40	-	1.97
2. Men who have sex with men	40,187	99.60	-	4.33
3. Injecting Drug Users	1,096	-	91.90	10.44
4. Hijra/Transgender People	10,323	-	-	2.00
5. Migrants	13,74,914	73.70	-	0.40
6. Truckers	2,05,000	97.00	-	0.79
7. Prison inmates	1,42,320	88.10	87.50	1.13

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	42.60	34.40	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	37.20	35.20	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	78.80	75.40	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	74.10	71.20	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	4.40	0.40	-
5.1 Condom use during last higher-risk intercourse (%)	86.30	88.70	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	6.12	0.14	-
6.1 Condom use during last higher-risk intercourse (%)	91.18	100.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	2,10,201	1,88,822	3,99,023
2. PLHIV who know their HIV Status	1,88,651	1,77,636	3,68,023
3. PLHIV who know their HIV status and are on ART	1,58,743	1,60,326	3,20,289
4. PLHIV who are on ART and tested for their viral load	1,16,168	1,18,479	2,35,492
4.1 PLHIV who are virally suppressed	1,15,098	1,17,364	2,33,299

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	875
2. Colleges with operational Red Ribbon Clubs (RRC)	1,037
3. Persons trained under mainstreaming	824
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				80
	Male	Female	TG	Total
2. Clients managed				11,58,860
3. RPR Tests conducted at DSRC	2,72,237	2,70,873	1,562	5,44,672
4. Syphilis seropositivity (%) at DSRC	1.18	0.62	14.53	0.94

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	174
2. OST centres (Excluding Satellite OST centres)	3

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	95,351
2. Coverage (%)	≥95
3. Condoms distributed	3,02,27,223
4. Tested for HIV (April 2024-September 2024)	84,273
4.1. HIV sero-positive (%)	0.12
4.1.1. Linked to ART	95
5. Tested for HIV (October 2024 -March 2025)	87,632
5.1. HIV sero-positive (%)	0.10
5.1.1. Linked to ART	82
6. Clinic Visits	3,66,402
7. STI/RTI treated	6,971
8. Presumptive treatment	12,906

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	40,187
2. Coverage (%)	91.98
3. Condoms distributed	76,48,621
4. Tested for HIV (April 2024-September 2024)	28,786
4.1. HIV sero-positive (%)	0.29
4.1.1. Linked to ART	83
5. Tested for HIV (October 2024 -March 2025)	29,677
5.1. HIV sero-positive (%)	0.22
5.1.1. Linked to ART	63
6. Clinic Visits	1,25,602
7. STI/RTI treated	2,210
8. Presumptive treatment	4,221

D. Injecting drug users

Indicator	2024-25
1. Estimated size	1,096
2. Coverage (%)	91.42
3. Needles distributed	64,763
4. Syringes distributed	40,091
5. On OST	190
6. Tested for HIV (April 2024-September 2024)	766
6.1. HIV sero-positive (%)	0.00
6.1.1 Linked to ART	0
7. Tested for HIV (October 2023 -March 2024)	616
7.1. HIV sero-positive (%)	0.16
7.1.1. Linked to ART	1

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	10,323
2. Coverage (%)	≥95
3. Condoms distributed	55,14,556
4. Tested for HIV (April 2024-September 2024)	9,924
4.1. HIV sero-positive (%)	0.41
4.1.1. Linked to ART	37
5. Tested for HIV (October 2024 -March 2025)	10,489
5.1. HIV sero-positive (%)	0.64
5.1.1. Put on ART	56
6. Clinic Visits	42,399
7. STI/RTI treated	967
8. Presumptive treatment	1,707

F. Migrants

Indicator	2024-25
1. Estimated size	13,74,914
2. Coverage (%)	≥95
3. Tested for HIV	4,13,915
3.1 HIV sero-positive (%)	0.13
3.2. Linked to ART	481

G. Truckers

Indicator	2024-25
1. Estimated size	2,05,000
2. Coverage (%)	90.24
3. Tested for HIV	72,912
3.1. HIV sero-positive (%)	0.09
3.2. On ART	60

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	64
2. Prisons covered under programme	58
3. Total inmates admitted in prisons	1,42,320
4. Inmates Covered in prisons (%)	51.0
5. Tested for HIV in prisons	72,535
5.1. HIV sero-positive (%)	0.33
5.2. On ART (%)	≥95
6. Total OCS	93
7. OCS covered under programme	58
8. Total inmates admitted in OCS	15,260
9. Inmates Covered in OCS (%)	26.5
10.Tested for HIV in OCS	4,040
10.1. HIV sero-positive (%)	0.17
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	21
2. Vulnerable population covered	4,41,916
3. Tested for HIV	3,93,209
3.1. HIV sero-positive (%)	0.10
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	6
1.1. OSTC in Public Health Settings	1
1.2. OSTC in NGO Settings	2
1.3 No. of Satellite OST Centres	3
2. IDU on OST	190

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	536
2. Sampoorna Suraksha Kendras	8

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	29,23,841	22,60,576	19,587	52,04,004
1.1 HIV Positives	10,130	5,687	222	16,039
1.2 HIV sero-positivity (%)	0.35	0.25	1013	0.31
2. Contacts of HIV positive people tested#				1,42,032
2.1 HIV Positives*				3,147
2.2 HIV sero-positivity (%)				2.22
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				9,971

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	105
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	1
3. Link ART Centres	234
4. Care Support Centres	44

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	10,130	6,264	222	16,616
2. New PLHIV Registered at ART center	9,688	6,072	187	15,947
2.1 Initiated on ART	9,411	5,959	184	15,554
3. PLHIV alive and on ART#	1,58,743	1,60,326	1,220	3,20,289
4. 12 months retention on ART (%)				95.8
5. Lost to follow-up cases	26,145	17,760	445	44,350

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	14
1.1 Accredited Viral load laboratories (out of 64 VL labs)	13
2. Viral load tests conducted	2,75,858
2.1. Suppressed test result (%)	95.80
3. National reference laboratories (NRL)	2
3.1 Accredited NRL	2
4. State reference laboratories (SRL)	16
4.1 Accredited SRL	16
5. CD4 machines	65
5.1 CD4 tests conducted	1,24,228
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	98.00
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	153

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	21,90,879
2. HIV testing coverage (%)	93.59
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	2,058
4.1 On life-long ART	2,047
5. Live births among HIV positive PW	1,816
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	1,698
6.1 Babies confirmed HIV Positive (6 week- 6 month)	5
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	1,586
7.2 Babies confirmed HIV positive at 18 months	25
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	54
9. HIV positive babies initiated on ART	49

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.01
3. Put on treatment	433

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	83,464	27,110	710	9,442	12,296	941	1,14,283	43,614	2,91,860
	Quarter 2	86,731	27,243	803	9,859	12,314	197	1,18,517	44,290	2,99,954
	Quarter 3	87,906	29,141	821	10,788	15,337	285	1,18,522	44,853	3,07,653
	Quarter 4	91,477	29,571	788	10,845	22,297	427	1,23,136	44,556	3,23,097
Tested for TB	Quarter 1	1,554	270	4	323	898	686	1,004	548	5,287
	Quarter 2	2,015	252	1	228	479	7	1,088	491	4,561
	Quarter 3	1,948	268	-	232	1,051	15	1,252	610	5,376
	Quarter 4	2,148	449	4	310	2,734	24	1,315	483	7,467
Diagnosed with TB	Quarter 1	24	5	-	1	9	-	13	-	52
	Quarter 2	13	1	1	1	8	-	13	-	37
	Quarter 3	3	3	-	5	8	1	18	1	39
	Quarter 4	19	1	1	1	8	2	15	-	47
Initiated on TB treatment	Quarter 1	17	2	-	1	8	-	12	-	40
	Quarter 2	13	1	1	-	8	-	13	-	36
	Quarter 3	3	3	-	2	8	1	18	1	36
	Quarter 4	18	2	1	-	8	1	15	-	45

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	42,713	41,229	2,058	2,062	73	757		
May - 24	1,98,011	1,88,014	10,991	10,158	325	1,552		
Jun - 24	1,71,450	1,60,127	14,153	9,435	342	1,970		
Jul - 24	1,62,675	1,48,562	14,170	9,234	309	1,784		
Aug - 24	1,69,942	1,56,782	14,256	9,839	338	2,275		
Sep - 24	1,53,656	1,41,320	8,946	8,901	304	2,481		
Oct - 24	1,57,953	1,51,997	9,164	9,069	310	2,147		
Nov - 24	1,49,475	1,44,419	9,071	9,013	296	1,370		
Dec - 24	1,50,359	1,45,021	10,942	10,856	296	1,380		
Jan - 25	1,49,694	1,41,248	12,313	12,166	312	2,028		
Feb - 25	1,41,833	1,36,847	10,960	10,809	266	1,640		
Mar - 25	1,47,688	1,42,466	10,591	9,265	353	1,458		
April 2024-March 2025							4,593	4,467

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Maharashtra
	Rank	**6**
Sl. No.	Obtained Score [%]	72.0
	Obtained Score [N]	136
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	92
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	68
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
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7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
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10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
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19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	96
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	114
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33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	25
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
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38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	65
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	73
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	97
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	05-07-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	13-01-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	30-08-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	80
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	71
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	106

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

MANIPUR



MANIPUR

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.33
2. IMR	-	-	0.80
3. Adult (15-49 yrs) HIV Prevalence (%)	0.96	0.65	0.81
4. People living with HIV	13,857	9,607	23,464
5. ART coverage (%)	53.30	79.35	64.47
6. Children living with HIV	331	316	646
7. Annual new HIV infections	378	168	546
8. Annual AIDS-related deaths (ARD)	437	62	499
9. Change in annual new HIV infections since 2010 (%)	-49.87	-53.20	-50.94
10. Change in annual ARD since 2010 (%)	-59.72	-82.44	-65.30
11. EVTH need	-	155	155

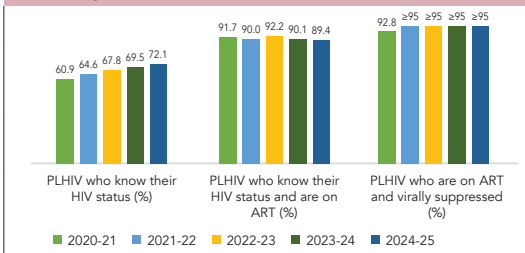
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	5,662	100.00	-	1.00
2. Men who have sex with men	1,507	95.70	-	5.25
3. Injecting Drug Users	24,985	-	97.40	1.45
4. Hijra/Transgender People	468	-	-	-
5. Migrants	16,000	-	-	-
6. Truckers	-	-	-	-
7. Prison inmates	1,904	100.00	81.80	2.99

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	55.90	50.60	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	48.40	48.70	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	87.00	82.00	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	85.90	85.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	3.00	0.10	-
5.1 Condom use during last higher-risk intercourse (%)	24.80	0.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	4.49	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	14.29	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	13,857	9,607	23,464
2. PLHIV who know their HIV Status	8,539	8,247	16,920
3. PLHIV who know their HIV status and are on ART	7,386	7,624	15,126
4. PLHIV who are on ART and tested for their viral load	5,945	6,254	12,287
4.1 PLHIV who are virally suppressed	5,916	6,230	12,234

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	775
2. Colleges with operational Red Ribbon Clubs (RRC)	61
3. Persons trained under mainstreaming	-
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				10
	Male	Female	TG	Total
2. Clients managed				66,323
3. RPR Tests conducted at DSRC	1,659	5,190	25	6,874
4. Syphilis seropositivity (%) at DSRC	5.85	0.50	36.00	1.92

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	53
2. OST centres (Excluding Satellite OST centres)	26

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	5,662
2. Coverage (%)	≥95
3. Condoms distributed	14,36,192
4. Tested for HIV (April 2024-September 2024)	3,408
4.1. HIV sero-positive (%)	0.21
4.1.1. Linked to ART	7
5. Tested for HIV (October 2024 -March 2025)	4,139
5.1. HIV sero-positive (%)	0.12
5.1.1. Linked to ART	4
6. Clinic Visits	21,006
7. STI/RTI treated	150
8. Presumptive treatment	926

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	1,507
2. Coverage (%)	≥95
3. Condoms distributed	2,14,582
4. Tested for HIV (April 2024-September 2024)	837
4.1. HIV sero-positive (%)	0.60
4.1.1. Linked to ART	5
5. Tested for HIV (October 2024 -March 2025)	739
5.1. HIV sero-positive (%)	0.27
5.1.1. Linked to ART	2
6. Clinic Visits	3,478
7. STI/RTI treated	22
8. Presumptive treatment	52

D. Injecting drug users

Indicator	2024-25
1. Estimated size	24,985
2. Coverage (%)	≥95
3. Needles distributed	61,91,551
4. Syringes distributed	61,91,551
5. On OST	5,050
6. Tested for HIV (April 2024-September 2024)	19,795
6.1. HIV sero-positive (%)	0.30
6.1.1 Linked to ART	57
7. Tested for HIV (October 2023 -March 2024)	20,873
7.1. HIV sero-positive (%)	0.13
7.1.1. Linked to ART	19

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	468
2. Coverage (%)	≥95
3. Condoms distributed	1,31,523
4. Tested for HIV (April 2024-September 2024)	615
4.1. HIV sero-positive (%)	0.16
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	673
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	2,424
7. STI/RTI treated	14
8. Presumptive treatment	42

F. Migrants

Indicator	2024-25
1. Estimated size	16,000
2. Coverage (%)	44.68
3. Tested for HIV	1,130
3.1 HIV sero-positive (%)	0.88
3.2. Linked to ART	7

G. Truckers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	0
3.1. HIV sero-positive (%)	-
3.2. On ART	0

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	5
2. Prisons covered under programme	2
3. Total inmates admitted in prisons	1,904
4. Inmates Covered in prisons (%)	36.9
5. Tested for HIV in prisons	703
5.1. HIV sero-positive (%)	0.57
5.2. On ART (%)	75.0
6. Total OCS	34
7. OCS covered under programme	70
8. Total inmates admitted in OCS	5,000
9. Inmates Covered in OCS (%)	47.6
10.Tested for HIV in OCS	2,381
10.1. HIV sero-positive (%)	0.17
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	9
2. Vulnerable population covered	24,569
3. Tested for HIV	16,415
3.1. HIV sero-positive (%)	0.21
3.2. Linked to ART (%)	91.18

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	58
1.1. OSTC in Public Health Settings	19
1.2. OSTC in NGO Settings	7
1.3 No. of Satellite OST Centres	32
2. IDU on OST	5,050

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	58
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	78,552	49,039	1,607	1,29,198
1.1 HIV Positives	526	236	7	769
1.2 HIV sero-positivity (%)	0.67	0.48	0.44	0.60
2. Contacts of HIV positive people tested#				6,832
2.1 HIV Positives*				227
2.2 HIV sero-positivity (%)				3.32
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				762

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	12
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	1
3. Link ART Centres	24
4. Care Support Centres	4

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	526	262	7	795
2. New PLHIV Registered at ART center	511	273	7	791
2.1 Initiated on ART	462	260	7	729
3. PLHIV alive and on ART#	7,386	7,624	117	15,126
4. 12 months retention on ART (%)				97.8
5. Lost to follow-up cases	813	493	11	1,317

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	13,598
2.1. Suppressed test result (%)	97.86
3. National reference laboratories (NRL)	1
3.1 Accredited NRL	1
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	10
5.1 CD4 tests conducted	6,238
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	88.3
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	26

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	50,815
2. HIV testing coverage (%)	68.0
3. HIV sero-positivity (%) among tested	0.08
4. HIV Positive PW (old + new detections)	134
4.1 On life-long ART	137
5. Live births among HIV positive PW	69
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	63
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	38
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	1
9. HIV positive babies initiated on ART	1

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	89.4
2. Sero-positivity (%) among tested	0.03
3. Put on treatment	14

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	2,603	883	10,377	189	204	139	29	-	14,424
	Quarter 2	2,414	867	10,445	205	170	431	46	-	14,578
	Quarter 3	3,614	813	9,187	193	203	528	49	-	14,587
	Quarter 4	4,046	835	9,303	269	362	1,297	615	-	16,727
Tested for TB	Quarter 1	34	2	163	1	-	-	-	-	200
	Quarter 2	26	2	239	1	-	-	-	-	268
	Quarter 3	38	1	219	-	-	-	-	-	258
	Quarter 4	59	-	227	-	46	213	-	-	545
Diagnosed with TB	Quarter 1	-	1	1	-	-	-	-	-	2
	Quarter 2	-	-	2	-	-	-	-	-	2
	Quarter 3	-	-	3	-	-	-	-	-	3
	Quarter 4	-	-	1	-	1	-	-	-	2
Initiated on TB treatment	Quarter 1	-	-	1	-	-	-	-	-	1
	Quarter 2	-	-	-	-	-	-	-	-	-
	Quarter 3	-	-	2	-	-	-	-	-	2
	Quarter 4	-	-	-	-	1	-	-	-	1

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	8,950	7,576	38	38	8	16		
May - 24	-	-	1	1	-	26		
Jun - 24	7,952	6,346	29	29	8	31		
Jul - 24	7,800	6,493	38	37	11	54		
Aug - 24	7,548	6,052	36	36	7	51		
Sep - 24	7,351	5,987	28	27	4	70		
Oct - 24	8,114	8,114	87	85	6	31		
Nov - 24	7,791	7,791	113	113	3	85		
Dec - 24	7,874	7,874	126	126	5	101		
Jan - 25	7,929	6,471	361	360	7	33		
Feb - 25	7,925	7,925	327	327	7	24		
Mar - 25	5,893	5,893	192	192	8	36		
April 2024-March 2025							100	95

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Manipur
	Rank	**19**
Sl. No.	Obtained Score [%]	63.0
	Obtained Score [N]	119
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	72
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	89
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	30
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	91
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	98
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	125
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	80
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	42
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	80
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	74
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	40
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	96
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	65
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	85
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	93
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	72
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	91
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	78
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	51
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	53
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	93
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	91
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	7
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	5
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	88
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	0
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	16
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	53
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	56
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	67
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	89
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	08-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	15-07-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	17-09-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	93
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	75

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

MEGHALAYA



MEGHALAYA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	7.37
2. IMR	-	-	8.73
3. Adult (15-49 yrs) HIV Prevalence (%)	0.42	0.38	0.40
4. People living with HIV	4,825	4,418	9,244
5. ART coverage (%)	61.57	80.20	70.50
6. Children living with HIV	177	174	351
7. Annual new HIV infections	351	331	681
8. Annual AIDS-related deaths (ARD)	17	16	33
9. Change in annual new HIV infections since 2010 (%)	48.73	70.62	58.74
10. Change in annual ARD since 2010 (%)	-66.00	-54.29	-61.18
11. EVTH need	-	284	284

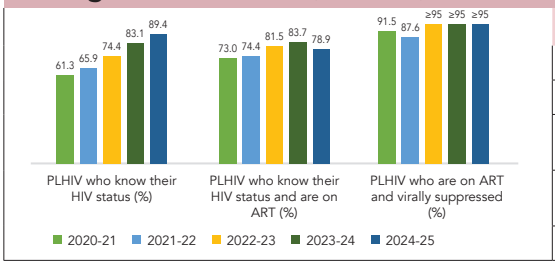
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	3,297	89.40	-	5.11
2. Men who have sex with men	344	-	-	-
3. Injecting Drug Users	3,175	-	58.70	4.11
4. Hijra/Transgender People	110	-	-	-
5. Migrants	50,300	-	-	-
6. Truckers	4,150	-	-	-
7. Prison inmates	2,781	33.30	66.70	5.50

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	15.90	14.50	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	14.30	13.40	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	67.20	64.50	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	37.50	27.30	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	2.60	1.10	-
5.1 Condom use during last higher-risk intercourse (%)	40.20	45.30	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	5.03	1.92	-
6.1 Condom use during last higher-risk intercourse (%)	40.74	46.15	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	4,825	4,418	9,243
2. PLHIV who know their HIV Status	4,049	4,209	8,262
3. PLHIV who know their HIV status and are on ART	2,971	3,543	6,517
4. PLHIV who are on ART and tested for their viral load	2,182	2,794	4,981
4.1 PLHIV who are virally suppressed	2,088	2,713	4,807

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	300
2. Colleges with operational Red Ribbon Clubs (RRC)	88
3. Persons trained under mainstreaming	-
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				10
	Male	Female	TG	Total
2. Clients managed				35,213
3. RPR Tests conducted at DSRC	9,498	10,834	3	20,335
4. Syphilis seropositivity (%) at DSRC	8.56	5.79	33.33	7.09

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	11
2. OST centres (Excluding Satellite OST centres)	6

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	3,297
2. Coverage (%)	74.44
3. Condoms distributed	4,40,727
4. Tested for HIV (April 2024-September 2024)	1,762
4.1. HIV sero-positive (%)	0.62
4.1.1. Linked to ART	15
5. Tested for HIV (October 2024 -March 2025)	1,789
5.1. HIV sero-positive (%)	0.34
5.1.1. Linked to ART	6
6. Clinic Visits	8,661
7. STI/RTI treated	236
8. Presumptive treatment	214

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	344
2. Coverage (%)	78.49
3. Condoms distributed	32,896
4. Tested for HIV (April 2024-September 2024)	208
4.1. HIV sero-positive (%)	0.48
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	221
5.1. HIV sero-positive (%)	0.00
5.1.1. Linked to ART	0
6. Clinic Visits	820
7. STI/RTI treated	3
8. Presumptive treatment	36

D. Injecting drug users

Indicator	2024-25
1. Estimated size	3,175
2. Coverage (%)	75.94
3. Needles distributed	3,14,050
4. Syringes distributed	3,48,470
5. On OST	1,075
6. Tested for HIV (April 2024-September 2024)	1,679
6.1. HIV sero-positive (%)	1.13
6.1.1 Linked to ART	10
7. Tested for HIV (October 2023 -March 2024)	1,596
7.1. HIV sero-positive (%)	0.56
7.1.1. Linked to ART	6

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	110
2. Coverage (%)	38.20
3. Condoms distributed	6,196
4. Tested for HIV (April 2024-September 2024)	21
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	30
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	115
7. STI/RTI treated	0
8. Presumptive treatment	2

F. Migrants

Indicator	2024-25
1. Estimated size	50,300
2. Coverage (%)	1.85
3. Tested for HIV	485
3.1 HIV sero-positive (%)	0.00
3.2. Linked to ART	0

G. Truckers

Indicator	2024-25
1. Estimated size	4,150
2. Coverage (%)	-
3. Tested for HIV	0
3.1. HIV sero-positive (%)	-
3.2. On ART	0

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	5
2. Prisons covered under programme	5
3. Total inmates admitted in prisons	2,781
4. Inmates Covered in prisons (%)	57.1
5. Tested for HIV in prisons	1,587
5.1. HIV sero-positive (%)	0.38
5.2. On ART (%)	50.0
6. Total OCS	2
7. OCS covered under programme	11
8. Total inmates admitted in OCS	20
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	136
10.1. HIV sero-positive (%)	1.47
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	2
2. Vulnerable population covered	4,036
3. Tested for HIV	3,123
3.1. HIV sero-positive (%)	1.89
3.2. Linked to ART (%)	71.19

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	6
1.1. OSTC in Public Health Settings	3
1.2. OSTC in NGO Settings	3
1.3 No. of Satellite OST Centres	5
2. IDU on OST	1,075

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	35
2. Sampoorna Suraksha Kendras	5

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	49,272	50,897	13	1,00,182
1.1 HIV Positives	705	437	3	1,145
1.2 HIV sero-positivity (%)	1.43	0.86	23.08	1.14
2. Contacts of HIV positive people tested#				1,993
2.1 HIV Positives*				154
2.2 HIV sero-positivity (%)				7.73
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				1,043

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	4
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	21
4. Care Support Centres	1

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	705	572	3	1,280
2. New PLHIV Registered at ART center	623	552	1	1,176
2.1 Initiated on ART	594	531	-	1,125
3. PLHIV alive and on ART#	2,971	3,543	3	6,517
4. 12 months retention on ART (%)				94.9
5. Lost to follow-up cases	1,071	671	1	1,743

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	5,370
2.1. Suppressed test result (%)	94.10
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	4
5.1 CD4 tests conducted	3,576
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	97.9
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	8

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	92,499
2. HIV testing coverage (%)	84.6
3. HIV sero-positivity (%) among tested	0.17
4. HIV Positive PW (old + new detections)	298
4.1 On life-long ART	284
5. Live births among HIV positive PW	318
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	203
6.1 Babies confirmed HIV Positive (6 week- 6 month)	2
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	195
7.2 Babies confirmed HIV positive at 18 months	6
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	11
9. HIV positive babies initiated on ART	10

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	89.7
2. Sero-positivity (%) among tested	1.32
3. Put on treatment	701

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	2,035	185	2,064	26	278	-	65	-	4,653
	Quarter 2	2,171	201	2,256	28	205	3	163	-	5,027
	Quarter 3	2,228	213	2,242	27	314	18	128	-	5,170
	Quarter 4	2,184	220	2,150	34	1,411	131	182	-	6,312
Tested for TB	Quarter 1	3	-	-	-	48	-	-	-	51
	Quarter 2	8	1	-	-	34	-	-	-	43
	Quarter 3	5	-	1	-	-	-	-	-	6
	Quarter 4	7	-	-	1	660	-	-	-	668
Diagnosed with TB	Quarter 1	-	-	-	-	1	-	-	-	1
	Quarter 2	-	-	-	-	2	-	-	-	2
	Quarter 3	-	-	1	-	-	-	-	-	1
	Quarter 4	1	-	-	-	-	-	-	-	1
Initiated on TB treatment	Quarter 1	-	-	-	-	1	-	-	-	1
	Quarter 2	-	-	-	-	2	-	-	-	2
	Quarter 3	-	-	1	-	-	-	-	-	1
	Quarter 4	1	-	-	-	-	-	-	-	1

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	3,642	3,561	14	14	-	72		
May - 24	3,402	3,384	11	11	-	88		
Jun - 24	3,324	3,286	15	15	2	134		
Jul - 24	3,324	3,286	15	15	2	134		
Aug - 24	3,413	3,397	18	18	3	78		
Sep - 24	3,527	3,507	12	12	2	75		
Oct - 24	3,798	3,755	12	11	5	78		
Nov - 24	3,379	3,341	19	17	3	69		
Dec - 24	3,238	3,218	10	10	2	126		
Jan - 25	3,609	3,569	15	14	4	118		
Feb - 25	3,422	3,383	13	11	3	112		
Mar - 25	3,489	3,461	15	13	3	82		
April 2024-March 2025							119	109

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Meghalaya
	Rank	**16**
Sl. No.	Obtained Score [%]	65.6
	Obtained Score [N]	124
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	89
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	79
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	70
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	92
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	75
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	77
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	68
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	81
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	74
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	89
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	108
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	96
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	102
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	64
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	31
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	64
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	117
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	42
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	81
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	86
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	87
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	17
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	2
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	98
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	40
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	100
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	1
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	0
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	39
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	100
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	85
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	14-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	16-01-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	25-06-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	71
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	102

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable
Weight points	Indicators Sl. No.		

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

MIZORAM



MIZORAM

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.13
2. IMR	-	-	3.26
3. Adult (15-49 yrs) HIV Prevalence (%)	3.06	2.44	2.75
4. People living with HIV	14,742	11,579	26,321
5. ART coverage (%)	72.27	61.89	67.70
6. Children living with HIV	409	397	806
7. Annual new HIV infections	624	464	1,088
8. Annual AIDS-related deaths (ARD)	55	79	135
9. Change in annual new HIV infections since 2010 (%)	-29.89	-29.59	-29.76
10. Change in annual ARD since 2010 (%)	-85.41	-66.95	-78.08
11. EVTH need	-	347	347

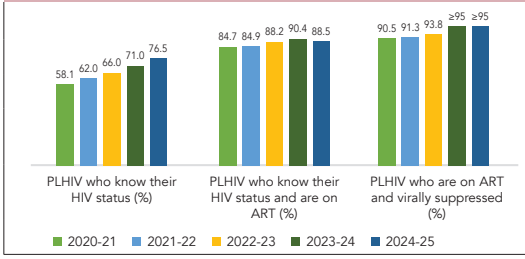
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	1,434	99.70	-	10.42
2. Men who have sex with men	841	100.00	-	3.20
3. Injecting Drug Users	10,397	-	89.40	24.94
4. Hijra/Transgender People	-	-	-	-
5. Migrants	50,300	-	-	3.20
6. Truckers	15,000	-	-	-
7. Prison inmates	8,030	-	69.70	21.50

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	65.60	64.10	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	60.00	68.90	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	95.70	86.70	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	89.40	88.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	3.30	0.70	-
5.1 Condom use during last higher-risk intercourse (%)	29.00	7.10	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	2.44	0.69	-
6.1 Condom use during last higher-risk intercourse (%)	57.14	33.33	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	14,742	11,579	26,321
2. PLHIV who know their HIV Status	12,135	8,006	20,141
3. PLHIV who know their HIV status and are on ART	10,653	7,167	17,820
4. PLHIV who are on ART and tested for their viral load	8,087	5,506	13,593
4.1 PLHIV who are virally suppressed	7,918	5,441	13,359

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	478
2. Colleges with operational Red Ribbon Clubs (RRC)	47
3. Persons trained under mainstreaming	50
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				10
	Male	Female	TG	Total
2. Clients managed				47,774
3. RPR Tests conducted at DSRC	10,135	5,377	-	15,512
4. Syphilis seropositivity (%) at DSRC	3.74	4.95	-	4.16

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	36
2. OST centres (Excluding Satellite OST centres)	17

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	1,434
2. Coverage (%)	88.80
3. Condoms distributed	3,65,453
4. Tested for HIV (April 2024-September 2024)	878
4.1. HIV sero-positive (%)	0.91
4.1.1. Linked to ART	8
5. Tested for HIV (October 2024 -March 2025)	909
5.1. HIV sero-positive (%)	1.43
5.1.1. Linked to ART	12
6. Clinic Visits	4,469
7. STI/RTI treated	120
8. Presumptive treatment	251

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	841
2. Coverage (%)	≥95
3. Condoms distributed	1,20,804
4. Tested for HIV (April 2024-September 2024)	835
4.1. HIV sero-positive (%)	1.32
4.1.1. Linked to ART	11
5. Tested for HIV (October 2024 -March 2025)	837
5.1. HIV sero-positive (%)	0.60
5.1.1. Linked to ART	5
6. Clinic Visits	3,912
7. STI/RTI treated	10
8. Presumptive treatment	45

D. Injecting drug users

Indicator	2024-25
1. Estimated size	10,397
2. Coverage (%)	≥95
3. Needles distributed	25,66,753
4. Syringes distributed	25,66,753
5. On OST	3,823
6. Tested for HIV (April 2024-September 2024)	8,567
6.1. HIV sero-positive (%)	1.12
6.1.1 Linked to ART	90
7. Tested for HIV (October 2023 -March 2024)	8,430
7.1. HIV sero-positive (%)	0.75
7.1.1. Linked to ART	53

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	0
2. Coverage (%)	0
3. Condoms distributed	0
4. Tested for HIV (April 2024-September 2024)	0
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	0
5.1. HIV sero-positive (%)	-
5.1.1. Put on ART	0
6. Clinic Visits	0
7. STI/RTI treated	0
8. Presumptive treatment	0

F. Migrants

Indicator	2024-25
1. Estimated size	50,300
2. Coverage (%)	53.84
3. Tested for HIV	18,027
3.1 HIV sero-positive (%)	0.17
3.2. Linked to ART	29

G. Truckers

Indicator	2024-25
1. Estimated size	15,000
2. Coverage (%)	-
3. Tested for HIV	0
3.1. HIV sero-positive (%)	-
3.2. On ART	0

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	10
2. Prisons covered under programme	10
3. Total inmates admitted in prisons	8,030
4. Inmates Covered in prisons (%)	18.6
5. Tested for HIV in prisons	1,491
5.1. HIV sero-positive (%)	2.35
5.2. On ART (%)	68.6
6. Total OCS	3
7. OCS covered under programme	33
8. Total inmates admitted in OCS	500
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	2,022
10.1. HIV sero-positive (%)	3.26
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	8
2. Vulnerable population covered	18,278
3. Tested for HIV	17,241
3.1. HIV sero-positive (%)	0.41
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	17
1.1. OSTC in Public Health Settings	13
1.2. OSTC in NGO Settings	4
1.3 No. of Satellite OST Centres	51
2. IDU on OST	3,823

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	39
2. Sampoorna Suraksha Kendras	8

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	69,663	37,033	6	1,06,702
1.1 HIV Positives	1,330	581	-	1,911
1.2 HIV sero-positivity (%)	1.91	1.57	0.00	1.79
2. Contacts of HIV positive people tested#				2,680
2.1 HIV Positives*				212
2.2 HIV sero-positivity (%)				7.91
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				2,570

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	14
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	18
4. Care Support Centres	3

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	1,330	691	-	2,021
2. New PLHIV Registered at ART center	1,356	713	-	2,069
2.1 Initiated on ART	1,350	712	-	2,062
3. PLHIV alive and on ART#	10,653	7,167	-	17,820
4. 12 months retention on ART (%)				96.4
5. Lost to follow-up cases	631	283	-	914

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	16,103
2.1. Suppressed test result (%)	95.91
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	8
5.1 CD4 tests conducted	7,775
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	98.8
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	58

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	23,116
2. HIV testing coverage (%)	>=95
3. HIV sero-positivity (%) among tested	0.45
4. HIV Positive PW (old + new detections)	341
4.1 On life-long ART	339
5. Live births among HIV positive PW	250
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	268
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	229
7.2 Babies confirmed HIV positive at 18 months	4
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	5
9. HIV positive babies initiated on ART	4

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	67.8
2. Sero-positivity (%) among tested	1.15
3. Put on treatment	178

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	843	1,028	12,102	-	218	913	4,603	-	19,707
	Quarter 2	902	1,823	12,579	-	268	250	4,495	-	20,317
	Quarter 3	943	2,426	12,069	-	559	292	5,416	-	21,705
	Quarter 4	1,011	2,575	12,701	-	628	348	5,945	-	23,208
Tested for TB	Quarter 1	3	1	19	-	-	-	-	-	23
	Quarter 2	2	-	52	-	16	-	1	-	71
	Quarter 3	7	-	59	-	4	-	-	-	70
	Quarter 4	4	1	7	-	1	22	-	-	35
Diagnosed with TB	Quarter 1	-	-	2	-	-	-	-	-	2
	Quarter 2	-	-	1	-	-	-	-	-	1
	Quarter 3	-	-	2	-	-	-	-	-	2
	Quarter 4	-	-	-	-	-	-	-	-	-
Initiated on TB treatment	Quarter 1	-	-	2	-	-	-	-	-	2
	Quarter 2	-	-	1	-	-	-	-	-	1
	Quarter 3	-	-	1	-	-	-	-	-	1
	Quarter 4	-	-	-	-	-	-	-	-	-

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	133	138	3	3	-	15		
May - 24	8,576	8,571	101	48	11	235		
Jun - 24	7,838	7,838	102	84	10	156		
Jul - 24	8,964	8,964	153	136	4	195		
Aug - 24	2	-	-	1	-	71		
Sep - 24	8,640	8,640	49	44	10	145		
Oct - 24	8,567	8,567	87	56	6	158		
Nov - 24	9,172	9,172	108	61	1	187		
Dec - 24	7,821	7,821	98	66	2	108		
Jan - 25	9,106	9,106	67	47	10	217		
Feb - 25	9,149	9,149	54	27	7	216		
Mar - 25	9,819	9,819	71	51	11	220		
April 2024-March 2025							218	216

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Mizoram
	Rank	**5**
Sl. No.	Obtained Score [%]	72.5
	Obtained Score [N]	137
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	77
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	89
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	15
5	Status of AEP integration in state school curriculum [G: Yes, R: No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	125
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	90
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	50
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	92
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	88
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	56
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	71
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	127
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	81
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	99
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	24
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	107
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	60
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	92
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	99
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	95
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	88
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	4
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	4
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	99
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	50
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	14
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	27
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	75
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	90
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	06-06-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	29-06-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	16-11-2023
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	80
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	92

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

NAGALAND



NAGALAND

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	3.91
2. IMR	-	-	2.72
3. Adult (15-49 yrs) HIV Prevalence (%)	1.39	1.34	1.37
4. People living with HIV	12,480	11,251	23,731
5. ART coverage (%)	60.40	68.11	64.11
6. Children living with HIV	432	406	838
7. Annual new HIV infections	492	436	928
8. Annual AIDS-related deaths (ARD)	103	66	169
9. Change in annual new HIV infections since 2010 (%)	-42.05	-37.54	-39.97
10. Change in annual ARD since 2010 (%)	-80.49	-79.75	-80.21
11. EVTH need	-	297	297

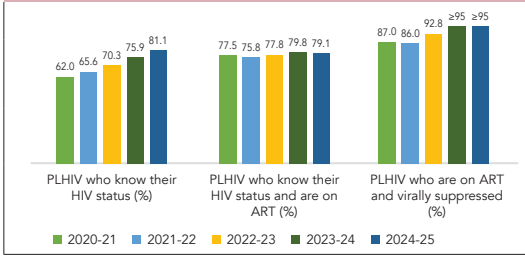
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	2,246	100.00	-	1.60
2. Men who have sex with men	1,239	100.00	-	3.21
3. Injecting Drug Users	16,802	-	79.80	2.12
4. Hijra/Transgender People	82	-	-	-
5. Migrants	5,000	-	-	-
6. Truckers	5,000	86.30	-	2.00
7. Prison inmates	2,641	-	64.10	6.64

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	40.10	25.60	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	31.90	21.10	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	64.80	63.40	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	63.70	56.80	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	8.80	2.30	-
5.1 Condom use during last higher-risk intercourse (%)	59.50	11.60	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	7.46	3.38	-
6.1 Condom use during last higher-risk intercourse (%)	66.67	6.25	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	12,480	11,251	23,731
2. PLHIV who know their HIV Status	9,690	9,535	19,239
3. PLHIV who know their HIV status and are on ART	7,538	7,663	15,214
4. PLHIV who are on ART and tested for their viral load	5,287	5,745	11,046
4.1 PLHIV who are virally suppressed	5,212	5,658	10,884

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	749
2. Colleges with operational Red Ribbon Clubs (RRC)	110
3. Persons trained under mainstreaming	113
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				12
	Male	Female	TG	Total
2. Clients managed				72,381
3. RPR Tests conducted at DSRC	5,630	4,698	-	10,328
4. Syphilis seropositivity (%) at DSRC	2.10	1.72	-	1.93

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	49
2. OST centres (Excluding Satellite OST centres)	32

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	2,246
2. Coverage (%)	≥95
3. Condoms distributed	7,82,714
4. Tested for HIV (April 2024-September 2024)	4,008
4.1. HIV sero-positive (%)	0.15
4.1.1. Linked to ART	3
5. Tested for HIV (October 2024 -March 2025)	3,917
5.1. HIV sero-positive (%)	0.10
5.1.1. Linked to ART	4
6. Clinic Visits	15,442
7. STI/RTI treated	48
8. Presumptive treatment	996

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	1,239
2. Coverage (%)	≥95
3. Condoms distributed	5,73,167
4. Tested for HIV (April 2024-September 2024)	2,403
4.1. HIV sero-positive (%)	0.25
4.1.1. Linked to ART	6
5. Tested for HIV (October 2024 -March 2025)	2,216
5.1. HIV sero-positive (%)	0.18
5.1.1. Linked to ART	4
6. Clinic Visits	9,106
7. STI/RTI treated	4
8. Presumptive treatment	226

D. Injecting drug users

Indicator	2024-25
1. Estimated size	16,802
2. Coverage (%)	≥95
3. Needles distributed	21,48,637
4. Syringes distributed	21,49,990
5. On OST	10,204
6. Tested for HIV (April 2024-September 2024)	22,743
6.1. HIV sero-positive (%)	0.43
6.1.1 Linked to ART	81
7. Tested for HIV (October 2023 -March 2024)	23,187
7.1. HIV sero-positive (%)	0.30
7.1.1. Linked to ART	69

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	82
2. Coverage (%)	≥95
3. Condoms distributed	38,956
4. Tested for HIV (April 2024-September 2024)	156
4.1. HIV sero-positive (%)	0.64
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	149
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	526
7. STI/RTI treated	3
8. Presumptive treatment	23

F. Migrants

Indicator	2024-25
1. Estimated size	5,000
2. Coverage (%)	≥95
3. Tested for HIV	4,999
3.1 HIV sero-positive (%)	0.14
3.2. Linked to ART	5

G. Truckers

Indicator	2024-25
1. Estimated size	5,000
2. Coverage (%)	≥95
3. Tested for HIV	3,063
3.1. HIV sero-positive (%)	0.10
3.2. On ART	3

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	12
2. Prisons covered under programme	12
3. Total inmates admitted in prisons	2,641
4. Inmates Covered in prisons (%)	58.4
5. Tested for HIV in prisons	1,543
5.1. HIV sero-positive (%)	4.47
5.2. On ART (%)	≥95
6. Total OCS	2
7. OCS covered under programme	2
8. Total inmates admitted in OCS	250
9. Inmates Covered in OCS (%)	2.4
10.Tested for HIV in OCS	6
10.1. HIV sero-positive (%)	16.67
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	10
2. Vulnerable population covered	42,746
3. Tested for HIV	18,399
3.1. HIV sero-positive (%)	0.18
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	32
1.1. OSTC in Public Health Settings	27
1.2. OSTC in NGO Settings	5
1.3 No. of Satellite OST Centres	32
2. IDU on OST	10,204

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	72
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	1,03,409	71,496	99	1,75,004
1.1 HIV Positives	1,164	751	1	1,916
1.2 HIV sero-positivity (%)	1.13	1.05	1.01	1.09
2. Contacts of HIV positive people tested#				1,557
2.1 HIV Positives*				99
2.2 HIV sero-positivity (%)				6.36
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				1,757

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	12
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	4
4. Care Support Centres	3

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	1,164	908	1	2,073
2. New PLHIV Registered at ART center	1,161	923	1	2,085
2.1 Initiated on ART	1,093	883	1	1,977
3. PLHIV alive and on ART#	7,538	7,663	13	15,214
4. 12 months retention on ART (%)				94.7
5. Lost to follow-up cases	1,803	1,525	-	3,328

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	12,007
2.1. Suppressed test result (%)	96.79
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	2
4.1 Accredited SRL	2
5. CD4 machines	12
5.1 CD4 tests conducted	9,329
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	99.6
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	57

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	23,913
2. HIV testing coverage (%)	91.7
3. HIV sero-positivity (%) among tested	0.72
4. HIV Positive PW (old + new detections)	278
4.1 On life-long ART	263
5. Live births among HIV positive PW	313
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	269
6.1 Babies confirmed HIV Positive (6 week- 6 month)	1
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	216
7.2 Babies confirmed HIV positive at 18 months	5
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	9
9. HIV positive babies initiated on ART	8

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.39
3. Put on treatment	100

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	2,089	1,609	9,341	127	180	-	1,220	85	14,651
	Quarter 2	2,447	1,654	9,447	132	210	-	1,250	116	15,256
	Quarter 3	2,549	1,677	10,103	116	195	2	1,260	58	15,960
	Quarter 4	2,896	1,770	11,493	151	498	-	1,205	46	18,059
Tested for TB	Quarter 1	26	-	97	-	23	-	3	-	149
	Quarter 2	32	2	109	-	35	-	-	-	178
	Quarter 3	24	2	122	-	6	-	1	-	155
	Quarter 4	25	20	248	-	19	-	-	-	312
Diagnosed with TB	Quarter 1	-	-	5	-	2	-	-	-	7
	Quarter 2	-	-	2	-	2	-	-	-	4
	Quarter 3	-	-	2	-	-	-	-	-	2
	Quarter 4	-	-	-	-	2	-	-	-	2
Initiated on TB treatment	Quarter 1	-	-	5	-	2	-	-	-	7
	Quarter 2	-	-	2	-	2	-	-	-	4
	Quarter 3	-	-	2	-	-	-	-	-	2
	Quarter 4	-	-	-	-	2	-	-	-	2

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	14	123	84	30	3	-		
May - 24	7,385	6,897	165	39	28	182		
Jun - 24	7,893	6,200	110	52	28	162		
Jul - 24	6,392	5,858	151	59	30	144		
Aug - 24	5,720	5,338	103	58	17	127		
Sep - 24	7,619	7,150	136	57	30	110		
Oct - 24	7,000	6,446	125	67	26	208		
Nov - 24	6,965	6,474	110	56	28	167		
Dec - 24	6,515	5,790	55	33	16	110		
Jan - 25	5,995	4,622	100	66	27	88		
Feb - 25	7,008	5,357	130	73	30	121		
Mar - 25	8,142	6,262	139	71	31	147		
April 2024- March 2025							333	299

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Nagaland
	Rank	**9**
Sl. No.	Obtained Score [%]	72.0
	Obtained Score [N]	136
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	81
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	79
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	63
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	210
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	79
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	60
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	76
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	77
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	67
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	98
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	72
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	90
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	95
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	24
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	86
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	69
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	100
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	99
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	90
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	82
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	8
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	3
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	100
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	100
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36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	25
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39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	100
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	0
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	97
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	18-04-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	28-06-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	01-08-2023
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	89
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	84

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

ODISHA



ODISHA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.33
2. IMR	-	-	0.80
3. Adult (15-49 yrs) HIV Prevalence (%)	0.12	0.11	0.12
4. People living with HIV	25,130	21,788	46,919
5. ART coverage (%)	63.22	54.63	60.32
6. Children living with HIV	788	742	1,530
7. Annual new HIV infections	546	544	1,090
8. Annual AIDS-related deaths (ARD)	291	534	825
9. Change in annual new HIV infections since 2010 (%)	-73.76	-70.32	-72.13
10. Change in annual ARD since 2010 (%)	-80.36	-52.62	-68.38
11. EVTH need	-	371	371

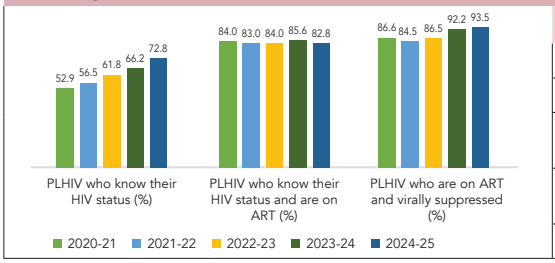
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	24,620	99.30	-	0.73
2. Men who have sex with men	5,977	-	-	1.20
3. Injecting Drug Users	4,526	-	92.00	2.20
4. Hijra/Transgender People	7,209	-	-	2.41
5. Migrants	92,000	64.70	-	1.20
6. Truckers	15,607	-	-	1.20
7. Prison inmates	97,911	-	-	0.25

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	24.60	21.40	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	22.10	18.10	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	77.50	71.30	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	56.90	63.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	1.10	0.20	-
5.1 Condom use during last higher-risk intercourse (%)	39.30	2.70	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	1.83	0.38	-
6.1 Condom use during last higher-risk intercourse (%)	35.00	0.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	25,130	21,788	46,919
2. PLHIV who know their HIV Status	19,528	13,944	34,166
3. PLHIV who know their HIV status and are on ART	15,888	11,903	28,302
4. PLHIV who are on ART and tested for their viral load	9,111	7,053	16,407
4.1 PLHIV who are virally suppressed	8,533	6,573	15,336

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	800
2. Colleges with operational Red Ribbon Clubs (RRC)	690
3. Persons trained under mainstreaming	-
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				40
	Male	Female	TG	Total
2. Clients managed				3,03,412
3. RPR Tests conducted at DSRC	75,474	67,743	3,672	1,46,889
4. Syphilis seropositivity (%) at DSRC	2.20	0.63	4.30	1.53

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	52
2. OST centres (Excluding Satellite OST centres)	5

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	24,620
2. Coverage (%)	72.17
3. Condoms distributed	36,28,175
4. Tested for HIV (April 2024-September 2024)	14,934
4.1. HIV sero-positive (%)	0.15
4.1.1. Linked to ART	21
5. Tested for HIV (October 2024 -March 2025)	15,966
5.1. HIV sero-positive (%)	0.12
5.1.1. Linked to ART	18
6. Clinic Visits	63,437
7. STI/RTI treated	2,120
8. Presumptive treatment	2,294

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	5,977
2. Coverage (%)	75.42
3. Condoms distributed	8,06,553
4. Tested for HIV (April 2024-September 2024)	3,431
4.1. HIV sero-positive (%)	0.44
4.1.1. Linked to ART	12
5. Tested for HIV (October 2024 -March 2025)	3,520
5.1. HIV sero-positive (%)	0.65
5.1.1. Linked to ART	17
6. Clinic Visits	14,121
7. STI/RTI treated	471
8. Presumptive treatment	551

D. Injecting drug users

Indicator	2024-25
1. Estimated size	4,526
2. Coverage (%)	82.57
3. Needles distributed	4,40,583
4. Syringes distributed	7,87,342
5. On OST	472
6. Tested for HIV (April 2024-September 2024)	3,042
6.1. HIV sero-positive (%)	0.16
6.1.1 Linked to ART	2
7. Tested for HIV (October 2023 -March 2024)	3,201
7.1. HIV sero-positive (%)	0.16
7.1.1. Linked to ART	5

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	7,209
2. Coverage (%)	68.66
3. Condoms distributed	11,43,326
4. Tested for HIV (April 2024-September 2024)	3,771
4.1. HIV sero-positive (%)	0.48
4.1.1. Linked to ART	20
5. Tested for HIV (October 2024 -March 2025)	4,010
5.1. HIV sero-positive (%)	0.50
5.1.1. Put on ART	18
6. Clinic Visits	16,465
7. STI/RTI treated	511
8. Presumptive treatment	586

F. Migrants

Indicator	2024-25
1. Estimated size	92,000
2. Coverage (%)	≥95
3. Tested for HIV	30,708
3.1 HIV sero-positive (%)	0.16
3.2. Linked to ART	43

G. Truckers

Indicator	2024-25
1. Estimated size	15,607
2. Coverage (%)	≥95
3. Tested for HIV	5,696
3.1. HIV sero-positive (%)	0.12
3.2. On ART	6

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	92
2. Prisons covered under programme	86
3. Total inmates admitted in prisons	97,911
4. Inmates Covered in prisons (%)	42.9
5. Tested for HIV in prisons	42,012
5.1. HIV sero-positive (%)	0.10
5.2. On ART (%)	90.5
6. Total OCS	90
7. OCS covered under programme	50
8. Total inmates admitted in OCS	1,500
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	1,458
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	7
2. Vulnerable population covered	1,72,969
3. Tested for HIV	90,795
3.1. HIV sero-positive (%)	0.15
3.2. Linked to ART (%)	94.16

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	5
1.1. OSTC in Public Health Settings	4
1.2. OSTC in NGO Settings	1
1.3 No. of Satellite OST Centres	1
2. IDU on OST	472

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	170
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	9,09,441	5,56,927	9,151	14,75,519
1.1 HIV Positives	2,572	897	87	3,556
1.2 HIV sero-positivity (%)	0.28	0.16	0.95	0.24
2. Contacts of HIV positive people tested#				941
2.1 HIV Positives*				141
2.2 HIV sero-positivity (%)				14.98
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				4,155

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	20
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	14
4. Care Support Centres	12

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	2,572	1,076	87	3,735
2. New PLHIV Registered at ART center	2,411	1,030	78	3,519
2.1 Initiated on ART	2,318	1,009	76	3,403
3. PLHIV alive and on ART#	15,888	11,903	512	28,302
4. 12 months retention on ART (%)				92.0
5. Lost to follow-up cases	2,777	1,353	138	4,268

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	19,853
2.1. Suppressed test result (%)	90.56
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	3
4.1 Accredited SRL	3
5. CD4 machines	19
5.1 CD4 tests conducted	8,623
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100.00
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	3

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	753,141
2. HIV testing coverage (%)	84.4
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	343
4.1 On life-long ART	329
5. Live births among HIV positive PW	262
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	196
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	93
7.2 Babies confirmed HIV positive at 18 months	13
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	23
9. HIV positive babies initiated on ART	20

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	91.7
2. Sero-positivity (%) among tested	0.07
3. Put on treatment	266

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	No
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	14,642	3,432	3,610	2,896	5,156	282	16,282	3,734	50,034
	Quarter 2	14,997	3,462	3,863	2,904	4,834	93	16,567	3,510	50,230
	Quarter 3	14,355	3,401	3,937	2,819	14,150	270	16,100	3,783	58,815
	Quarter 4	14,442	3,389	4,192	2,709	17,617	834	17,266	4,192	64,641
Tested for TB	Quarter 1	1,093	197	370	234	211	2	398	24	2,529
	Quarter 2	1,295	266	435	256	-	-	464	20	2,736
	Quarter 3	1,103	231	423	224	467	64	559	25	3,096
	Quarter 4	1,283	263	415	202	794	-	477	31	3,465
Diagnosed with TB	Quarter 1	2	3	-	3	-	-	4	-	12
	Quarter 2	-	2	-	-	-	-	6	-	8
	Quarter 3	3	-	-	-	4	-	16	1	24
	Quarter 4	6	2	1	1	3	-	12	1	26
Initiated on TB treatment	Quarter 1	2	3	-	3	-	-	4	-	12
	Quarter 2	-	2	-	-	-	-	6	-	8
	Quarter 3	3	-	-	-	4	-	16	1	24
	Quarter 4	6	2	1	1	3	-	12	1	26

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	16,762	14,826	511	510	38	98		
May - 24	16,152	15,629	425	420	15	136		
Jun - 24	16,152	15,629	425	420	15	136		
Jul - 24	15,939	15,155	513	510	30	308		
Aug - 24	14,922	13,931	527	526	38	124		
Sep - 24	15,246	14,431	442	442	23	237		
Oct - 24	14,514	13,790	456	448	16	230		
Nov - 24	15,049	12,699	485	485	27	254		
Dec - 24	15,152	12,938	564	563	42	162		
Jan - 25	15,240	14,446	696	695	31	135		
Feb - 25	14,374	13,614	658	658	31	143		
Mar - 25	15,488	14,490	605	605	27	195		
April 2024-March 2025							721	664

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

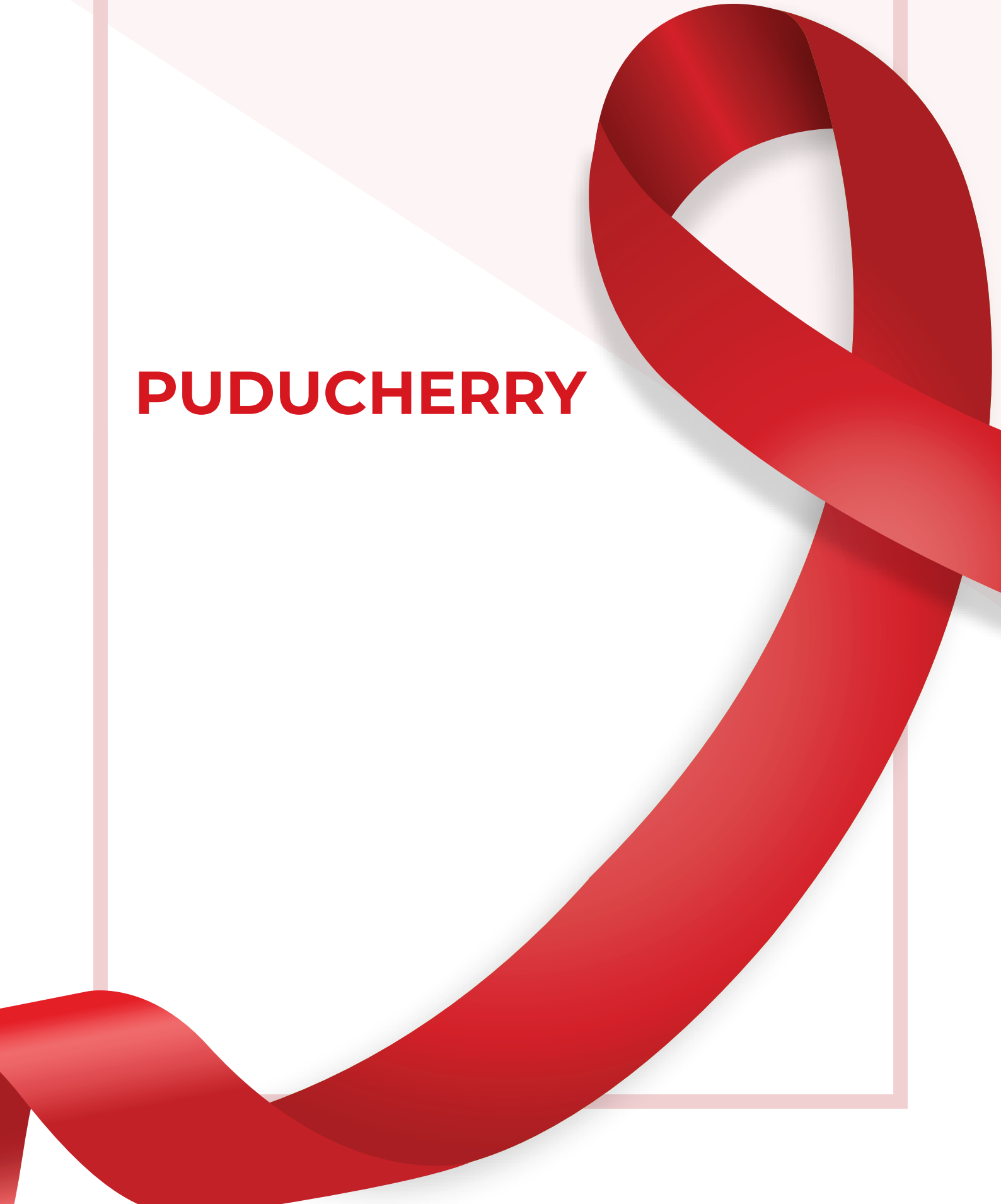
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4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	22
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Not Notified
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38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	10
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	20
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	0
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	71
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	08-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	28-10-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	01-05-2025
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	83
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	73

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

PUDUCHERRY



PUDUCHERRY

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.48
2. IMR	-	-	0.97
3. Adult (15-49 yrs) HIV Prevalence (%)	0.17	0.15	0.16
4. People living with HIV	1,348	1,277	2,625
5. ART coverage (%)	55.64	56.70	56.30
6. Children living with HIV	21	23	44
7. Annual new HIV infections	34	31	65
8. Annual AIDS-related deaths (ARD)	20	20	40
9. Change in annual new HIV infections since 2010 (%)	-20.93	-16.22	-18.75
10. Change in annual ARD since 2010 (%)	-86.39	-79.59	-83.67
11. EVTH need	-	13	13

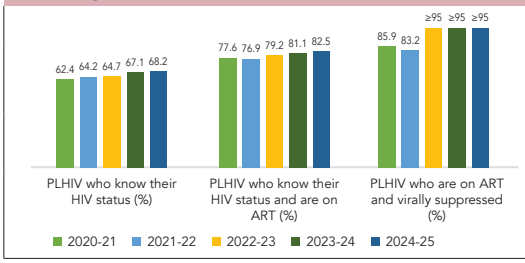
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	2,514	99.60	-	0.27
2. Men who have sex with men	2,489	97.80	-	0.40
3. Injecting Drug Users	21	-	-	-
4. Hijra/Transgender People	203	-	-	-
5. Migrants	15,000	-	-	-
6. Truckers	-	-	-	-
7. Prison inmates	2,304	-	-	-

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	32.50	30.20	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	32.30	25.40	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	76.40	67.40	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	63.40	54.20	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	2.40	0.10	-
5.1 Condom use during last higher-risk intercourse (%)	60.50	0.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	0.00	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	NA	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	1,348	1,277	2,625
2. PLHIV who know their HIV Status	939	845	1,791
3. PLHIV who know their HIV status and are on ART	750	724	1,478
4. PLHIV who are on ART and tested for their viral load	525	597	1,127
4.1 PLHIV who are virally suppressed	524	586	1,115

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	400
2. Colleges with operational Red Ribbon Clubs (RRC)	80
3. Persons trained under mainstreaming	535
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				5
	Male	Female	TG	Total
2. Clients managed				25,488
3. RPR Tests conducted at DSRC	4,375	7,546	32	11,953
4. Syphilis seropositivity (%) at DSRC	3.63	0.54	3.13	1.68

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	4
2. OST centres (Excluding Satellite OST centres)	0

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	2,514
2. Coverage (%)	≥95
3. Condoms distributed	9,18,748
4. Tested for HIV (April 2024-September 2024)	2,898
4.1. HIV sero-positive (%)	0.03
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	3,250
5.1. HIV sero-positive (%)	0.03
5.1.1. Linked to ART	1
6. Clinic Visits	10,971
7. STI/RTI treated	57
8. Presumptive treatment	431

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	2,489
2. Coverage (%)	78.67
3. Condoms distributed	4,49,782
4. Tested for HIV (April 2024-September 2024)	1,181
4.1. HIV sero-positive (%)	0.17
4.1.1. Linked to ART	2
5. Tested for HIV (October 2024 -March 2025)	1,335
5.1. HIV sero-positive (%)	0.07
5.1.1. Linked to ART	1
6. Clinic Visits	4,049
7. STI/RTI treated	37
8. Presumptive treatment	211

D. Injecting drug users

Indicator	2024-25
1. Estimated size	21
2. Coverage (%)	0
3. Needles distributed	0
4. Syringes distributed	0
5. On OST	0
6. Tested for HIV (April 2024-September 2024)	0
6.1. HIV sero-positive (%)	-
6.1.1 Linked to ART	0
7. Tested for HIV (October 2023 -March 2024)	0
7.1. HIV sero-positive (%)	-
7.1.1. Linked to ART	0

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	203
2. Coverage (%)	39.87
3. Condoms distributed	19,734
4. Tested for HIV (April 2024-September 2024)	45
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	39
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	175
7. STI/RTI treated	4
8. Presumptive treatment	1

F. Migrants

Indicator	2024-25
1. Estimated size	15,000
2. Coverage (%)	≥95
3. Tested for HIV	7,168
3.1 HIV sero-positive (%)	0.03
3.2. Linked to ART	2

G. Truckers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	0
3.1. HIV sero-positive (%)	-
3.2. On ART	0

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	4
2. Prisons covered under programme	4
3. Total inmates admitted in prisons	2,304
4. Inmates Covered in prisons (%)	63.3
5. Tested for HIV in prisons	1,458
5.1. HIV sero-positive (%)	0.21
5.2. On ART (%)	≥95
6. Total OCS	1
7. OCS covered under programme	1
8. Total inmates admitted in OCS	150
9. Inmates Covered in OCS (%)	16.0
10.Tested for HIV in OCS	24
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	-
1.1. OSTC in Public Health Settings	-
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	-

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	12
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	99,084	72,762	251	1,72,097
1.1 HIV Positives	109	56	-	165
1.2 HIV sero-positivity (%)	0.11	0.08	0.00	0.10
2. Contacts of HIV positive people tested#				451
2.1 HIV Positives*				17
2.2 HIV sero-positivity (%)				3.77
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	1
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	1
4. Care Support Centres	1

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	109	57	-	166
2. New PLHIV Registered at ART center	54	33	-	87
2.1 Initiated on ART	53	31	-	84
3. PLHIV alive and on ART#	750	724	4	1,478
4. 12 months retention on ART (%)				97.0
5. Lost to follow-up cases	17	11	-	28

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	1,278
2.1. Suppressed test result (%)	94.91
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	1
5.1 CD4 tests conducted	1,044
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100.0
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	10

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	13,870
2. HIV testing coverage (%)	>=95
3. HIV sero-positivity (%) among tested	0.00
4. HIV Positive PW (old + new detections)	8
4.1 On life-long ART	8
5. Live births among HIV positive PW	5
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	8
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	3
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.04
3. Put on treatment	13

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	3,150	1,441	-	66	317	11	2,121	-	7,106
	Quarter 2	3,273	1,322	-	56	392	4	4,534	-	9,581
	Quarter 3	3,274	1,426	-	62	347	7	4,017	-	9,133
	Quarter 4	3,269	1,483	-	49	402	2	4,475	-	9,680
Tested for TB	Quarter 1	21	11	-	-	-	-	-	-	32
	Quarter 2	18	22	-	-	1	-	-	-	41
	Quarter 3	33	30	-	-	-	-	-	-	63
	Quarter 4	25	4	-	2	1	-	-	-	32
Diagnosed with TB	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	1	-	-	-	1
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	-	-	-	-	-
Initiated on TB treatment	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	1	-	-	-	1
	Quarter 3	-	-	-	-	-	-	-	-	-
	Quarter 4	-	-	-	-	-	-	-	-	-

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	1,266	1,099	49	49	2	7		
May - 24	1,245	1,099	46	46	-	10		
Jun - 24	1,165	1,017	36	36	2	2		
Jul - 24	1,234	1,077	42	42	1	10		
Aug - 24	1,261	1,096	40	40	-	3		
Sep - 24	1,272	1,087	43	43	1	5		
Oct - 24	1,272	1,087	43	43	1	8		
Nov - 24	1,247	1,100	38	38	2	7		
Dec - 24	1,082	1,100	38	38	1	2		
Jan - 25	1,299	1,144	33	33	4	2		
Feb - 25	1,322	1,187	39	39	2	10		
Mar - 25	1,319	1,169	39	39	2	9		
April 2024-March 2025							19	19

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

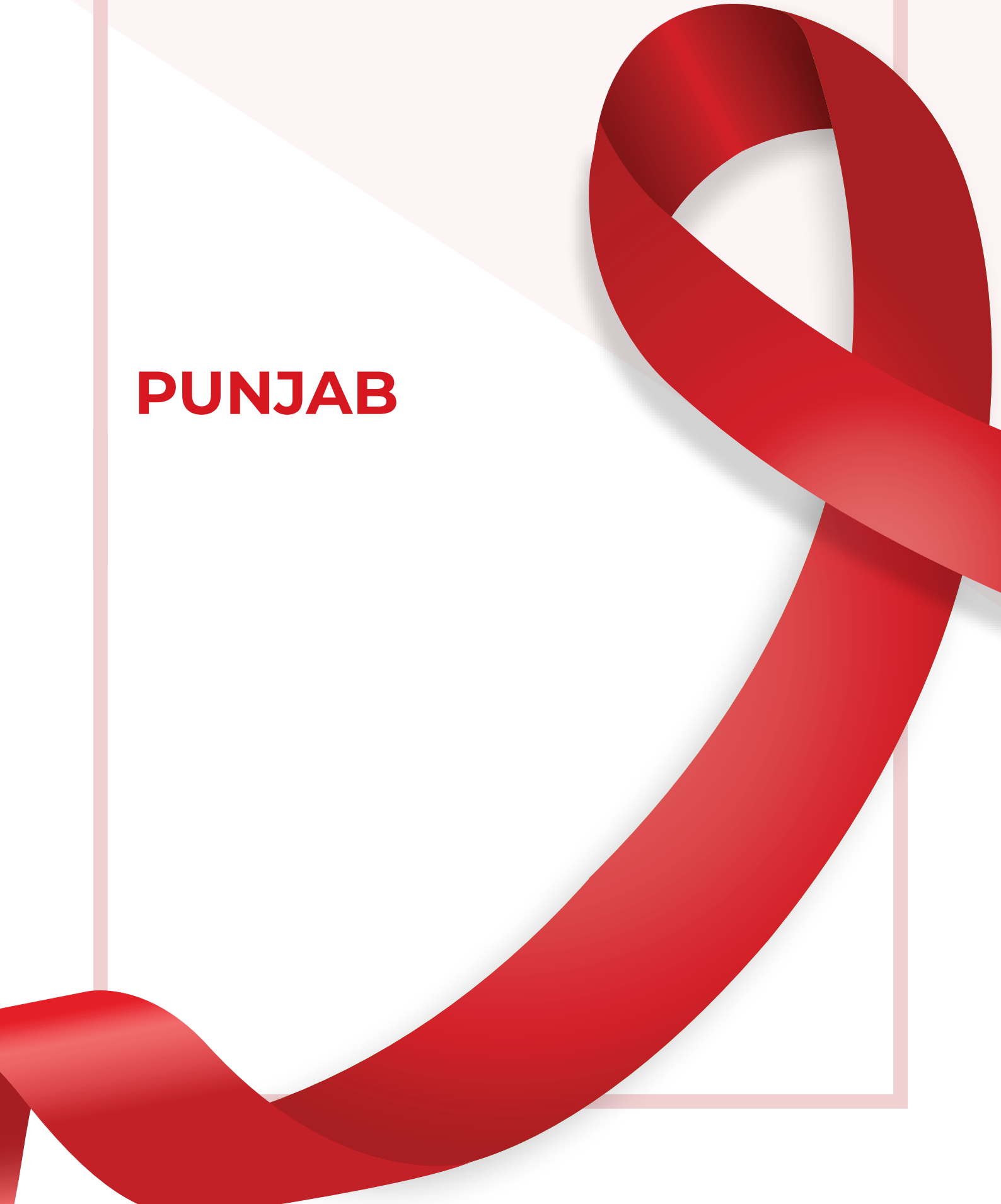
States/UTs		Puducherry
Rank		3
Sl. No.	Obtained Score [%]	75.8
	Obtained Score [N]	125
	Maximum Score [N]	165
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	68
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	83
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	52
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	80
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	NA
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	121
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	86
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	62
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	74
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	81
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	NA
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	128
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	103
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	130
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	93
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	86
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	160
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	81
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	59
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	80
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	83
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	0
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	4
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	100
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	NA
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	NA
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	NA
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	NA
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	87
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	26-04-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	30-06-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	19-03-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	93
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	NA
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	97

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
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1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

PUNJAB



PUNJAB

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	6.13
2. IMR	-	-	3.40
3. Adult (15-49 yrs) HIV Prevalence (%)	0.47	0.37	0.42
4. People living with HIV	65,114	45,601	1,10,715
5. ART coverage (%)	69.65	46.32	60.22
6. Children living with HIV	1,098	948	2,046
7. Annual new HIV infections	4,027	2,758	6,785
8. Annual AIDS-related deaths (ARD)	171	790	961
9. Change in annual new HIV infections since 2010 (%)	24.98	36.40	29.39
10. Change in annual ARD since 2010 (%)	-54.28	296.98	67.71
11. EVTH need	-	988	988

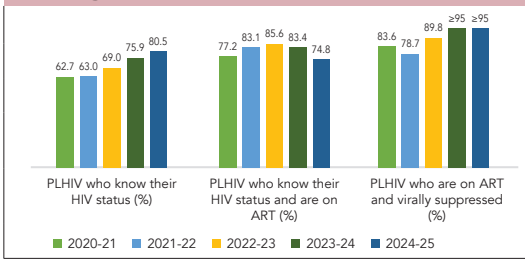
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	27,304	98.90	-	2.77
2. Men who have sex with men	8,045	99.30	-	10.80
3. Injecting Drug Users	45,098	-	94.80	13.08
4. Hijra/Transgender People	1,316	-	-	6.00
5. Migrants	1,31,850	80.70	88.20	2.20
6. Truckers	-	59.20	12.80	4.02
7. Prison inmates	92,934	35.70	59.50	9.25

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	37.50	20.60	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	33.30	17.50	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	79.80	77.20	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	67.50	66.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	5.90	0.30	-
5.1 Condom use during last higher-risk intercourse (%)	56.90	30.10	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	8.52	0.58	-
6.1 Condom use during last higher-risk intercourse (%)	61.36	33.33	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	65,114	45,601	1,10,715
2. PLHIV who know their HIV Status	64,485	24,398	89,159
3. PLHIV who know their HIV status and are on ART	45,351	21,124	66,671
4. PLHIV who are on ART and tested for their viral load	22,453	12,887	35,438
4.1 PLHIV who are virally suppressed	21,417	12,489	33,998

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	6,567
2. Colleges with operational Red Ribbon Clubs (RRC)	725
3. Persons trained under mainstreaming	230
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				31
	Male	Female	TG	Total
2. Clients managed				3,27,989
3. RPR Tests conducted at DSRC	69,948	58,679	240	1,28,867
4. Syphilis seropositivity (%) at DSRC	1.50	0.57	4.17	1.08

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	71
2. OST centres (Excluding Satellite OST centres)	35

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	27,304
2. Coverage (%)	≥95
3. Condoms distributed	52,30,732
4. Tested for HIV (April 2024-September 2024)	18,792
4.1. HIV sero-positive (%)	0.20
4.1.1. Linked to ART	41
5. Tested for HIV (October 2024 -March 2025)	18,247
5.1. HIV sero-positive (%)	0.14
5.1.1. Linked to ART	28
6. Clinic Visits	74,246
7. STI/RTI treated	986
8. Presumptive treatment	2,147

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	8,045
2. Coverage (%)	87.21
3. Condoms distributed	13,43,402
4. Tested for HIV (April 2024-September 2024)	5,590
4.1. HIV sero-positive (%)	1.57
4.1.1. Linked to ART	58
5. Tested for HIV (October 2024 -March 2025)	5,532
5.1. HIV sero-positive (%)	0.56
5.1.1. Linked to ART	26
6. Clinic Visits	23,534
7. STI/RTI treated	227
8. Presumptive treatment	838

D. Injecting drug users

Indicator	2024-25
1. Estimated size	45,098
2. Coverage (%)	73.77
3. Needles distributed	63,06,538
4. Syringes distributed	42,11,361
5. On OST	10,935
6. Tested for HIV (April 2024-September 2024)	24,689
6.1. HIV sero-positive (%)	1.65
6.1.1 Linked to ART	346
7. Tested for HIV (October 2023 -March 2024)	23,351
7.1. HIV sero-positive (%)	1.08
7.1.1. Linked to ART	238

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	1,316
2. Coverage (%)	≥95
3. Condoms distributed	3,30,343
4. Tested for HIV (April 2024-September 2024)	1,265
4.1. HIV sero-positive (%)	0.71
4.1.1. Linked to ART	8
5. Tested for HIV (October 2024 -March 2025)	1,195
5.1. HIV sero-positive (%)	0.84
5.1.1. Put on ART	10
6. Clinic Visits	5,437
7. STI/RTI treated	45
8. Presumptive treatment	235

F. Migrants

Indicator	2024-25
1. Estimated size	1,31,850
2. Coverage (%)	69.93
3. Tested for HIV	12,076
3.1 HIV sero-positive (%)	0.21
3.2. Linked to ART	24

G. Truckers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	4,266
3.1. HIV sero-positive (%)	0.30
3.2. On ART	10

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	26
2. Prisons covered under programme	25
3. Total inmates admitted in prisons	92,934
4. Inmates Covered in prisons (%)	83.2
5. Tested for HIV in prisons	77,366
5.1. HIV sero-positive (%)	1.25
5.2. On ART (%)	≥95
6. Total OCS	3
7. OCS covered under programme	2
8. Total inmates admitted in OCS	472
9. Inmates Covered in OCS (%)	10.6
10.Tested for HIV in OCS	50
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	7
2. Vulnerable population covered	22,610
3. Tested for HIV	14,227
3.1. HIV sero-positive (%)	2.84
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	35
1.1. OSTC in Public Health Settings	26
1.2. OSTC in NGO Settings	9
1.3 No. of Satellite OST Centres	8
2. IDU on OST	10,935

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	115
2. Sampoorna Suraksha Kendras	17

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	5,31,712	3,68,976	1,955	9,02,643
1.1 HIV Positives	9,471	2,021	59	11,551
1.2 HIV sero-positivity (%)	1.78	0.55	3.02	1.28
2. Contacts of HIV positive people tested#				13,226
2.1 HIV Positives*				673
2.2 HIV sero-positivity (%)				5.09
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				9,283

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	25
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	16
4. Care Support Centres	8

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	9,471	2,607	59	12,137
2. New PLHIV Registered at ART center	8,823	2,374	42	11,239
2.1 Initiated on ART	8,664	2,350	41	11,055
3. PLHIV alive and on ART#	45,351	21,124	196	66,671
4. 12 months retention on ART (%)				90.07
5. Lost to follow-up cases	16,014	2,622	40	18,676

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	1
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	43,962
2.1. Suppressed test result (%)	92.56
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	2
4.1 Accredited SRL	2
5. CD4 machines	10
5.1 CD4 tests conducted	37,256
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	88.2
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	5

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	4,33,515
2. HIV testing coverage (%)	76.5
3. HIV sero-positivity (%) among tested	0.18
4. HIV Positive PW (old + new detections)	1,024
4.1 On life-long ART	975
5. Live births among HIV positive PW	766
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	559
6.1 Babies confirmed HIV Positive (6 week- 6 month)	2
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	402
7.2 Babies confirmed HIV positive at 18 months	35
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	44
9. HIV positive babies initiated on ART	9

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	83.03
2. Sero-positivity (%) among tested	0.09
3. Put on treatment	307

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	17,993	5,655	27,584	1,271	14,037	4	7,481	5,541	79,566
	Quarter 2	19,465	5,963	29,296	1,349	19,140	2	7,298	5,370	87,883
	Quarter 3	19,401	6,155	29,162	1,353	17,401	-	7,675	5,179	86,326
	Quarter 4	20,616	6,551	30,146	1,467	27,299	44	7,676	4,715	98,514
Tested for TB	Quarter 1	29	29	86	9	206	-	8	1	368
	Quarter 2	43	45	116	13	322	-	11	9	559
	Quarter 3	110	69	214	33	310	-	6	6	748
	Quarter 4	90	55	172	21	424	-	33	21	816
Diagnosed with TB	Quarter 1	-	-	10	2	4	-	-	-	16
	Quarter 2	1	2	6	1	21	-	4	-	35
	Quarter 3	-	-	5	1	9	-	1	-	16
	Quarter 4	-	-	9	2	8	-	21	8	48
Initiated on TB treatment	Quarter 1	-	-	10	2	4	-	-	-	16
	Quarter 2	1	2	6	1	21	-	4	-	35
	Quarter 3	-	-	6	1	9	-	1	-	17
	Quarter 4	-	-	8	2	8	-	3	-	21

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	50,141	50,134	1,508	1,291	125	827		
May - 24	49,736	48,805	1,447	1,404	135	990		
Jun - 24	49,100	48,712	1,348	1,190	57	798		
Jul - 24	44,579	44,579	4,627	1,234	101	1,031		
Aug - 24	42,460	42,459	1,731	1,282	73	929		
Sep - 24	40,752	40,750	1,389	1,311	78	1,005		
Oct - 24	39,726	39,717	1,366	1,239	70	660		
Nov - 24	40,815	40,815	1,395	1,345	69	567		
Dec - 24	41,834	41,834	1,389	1,348	64	618		
Jan - 25	45,240	45,240	1,421	1,318	81	677		
Feb - 25	41,748	41,748	1,241	1,241	78	520		
Mar - 25	40,047	40,047	1,410	1,352	87	493		
April 2024-March 2025							1,418	1,373

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Punjab
Rank		18
Sl. No.	Obtained Score [%]	63.0
	Obtained Score [N]	119
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	81
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	75
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	87
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	99
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	88
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	85
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	84
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	86
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	85
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	59
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	66
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	101
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	67
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	73
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	95
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	25
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	73
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	88
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	51
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	63
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	94
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	62
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	12
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	4
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	88
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	100
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	3
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	27
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	79
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	74
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	16-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	29-08-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	07-06-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	86
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	71
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	75

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable
Weight points	Indicators Sl. No.		
3	1,22,29		
2	2,3,9,10,21,27,28,33,45,47		
1	4-8,11-20, 23-26,30-32, 34-44,46		

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

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1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.67
2. IMR	-	-	3.12
3. Adult (15-49 yrs) HIV Prevalence (%)	0.15	0.10	0.13
4. People living with HIV	51,463	34,680	86,143
5. ART coverage (%)	68.46	85.10	75.29
6. Children living with HIV	1,210	1,068	2,278
7. Annual new HIV infections	2,434	1,586	4,020
8. Annual AIDS-related deaths (ARD)	265	123	388
9. Change in annual new HIV infections since 2010 (%)	-6.96	3.73	-3.04
10. Change in annual ARD since 2010 (%)	-78.71	-76.35	-78.02
11. EVTH need	-	928	928

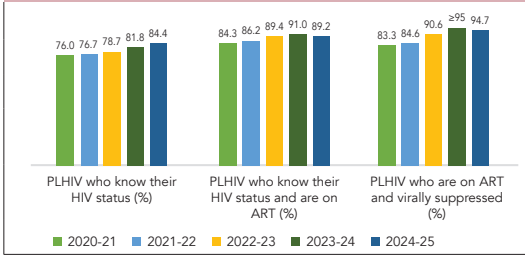
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	21,034	100.00	-	1.05
2. Men who have sex with men	7,351	-	-	4.80
3. Injecting Drug Users	3,024	-	97.60	8.40
4. Hijra/Transgender People	2,126	-	-	2.40
5. Migrants	1,10,000	72.20	-	0.20
6. Truckers	38,340	87.90	-	0.00
7. Prison inmates	1,40,429	59.50	67.30	1.58

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	36.00	26.80	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	34.30	27.60	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	76.00	76.00	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	78.20	72.40	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	6.40	0.90	-
5.1 Condom use during last higher-risk intercourse (%)	73.80	74.60	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	11.59	2.07	-
6.1 Condom use during last higher-risk intercourse (%)	74.23	76.47	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	51,463	34,680	86,143
2. PLHIV who know their HIV Status	39,827	32,738	72,697
3. PLHIV who know their HIV status and are on ART	35,232	29,513	64,853
4. PLHIV who are on ART and tested for their viral load	20,466	17,507	38,039
4.1 PLHIV who are virally suppressed	19,290	16,684	36,040

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	650
2. Colleges with operational Red Ribbon Clubs (RRC)	755
3. Persons trained under mainstreaming	834
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				53
	Male	Female	TG	Total
2. Clients managed				3,70,673
3. RPR Tests conducted at DSRC	54,144	1,52,595	100	2,06,839
4. Syphilis seropositivity (%) at DSRC	2.33	0.46	6.00	0.96

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	40
2. OST centres (Excluding Satellite OST centres)	3

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	21,034
2. Coverage (%)	≥95
3. Condoms distributed	41,57,903
4. Tested for HIV (April 2024-September 2024)	14,586
4.1. HIV sero-positive (%)	0.03
4.1.1. Linked to ART	4
5. Tested for HIV (October 2024 -March 2025)	14,111
5.1. HIV sero-positive (%)	0.08
5.1.1. Linked to ART	11
6. Clinic Visits	63,968
7. STI/RTI treated	1,429
8. Presumptive treatment	1,260

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	7,351
2. Coverage (%)	≥95
3. Condoms distributed	12,30,012
4. Tested for HIV (April 2024-September 2024)	6,053
4.1. HIV sero-positive (%)	0.41
4.1.1. Linked to ART	22
5. Tested for HIV (October 2024 -March 2025)	5,936
5.1. HIV sero-positive (%)	0.22
5.1.1. Linked to ART	12
6. Clinic Visits	25,283
7. STI/RTI treated	319
8. Presumptive treatment	492

D. Injecting drug users

Indicator	2024-25
1. Estimated size	3,024
2. Coverage (%)	≥95
3. Needles distributed	12,78,038
4. Syringes distributed	9,14,486
5. On OST	378
6. Tested for HIV (April 2024-September 2024)	2,104
6.1. HIV sero-positive (%)	0.43
6.1.1 Linked to ART	9
7. Tested for HIV (October 2023 -March 2024)	2,137
7.1. HIV sero-positive (%)	0.14
7.1.1. Linked to ART	2

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	2,126
2. Coverage (%)	≥95
3. Condoms distributed	3,78,591
4. Tested for HIV (April 2024-September 2024)	1,476
4.1. HIV sero-positive (%)	0.14
4.1.1. Linked to ART	2
5. Tested for HIV (October 2024 -March 2025)	1,619
5.1. HIV sero-positive (%)	0.19
5.1.1. Put on ART	3
6. Clinic Visits	6,233
7. STI/RTI treated	50
8. Presumptive treatment	73

F. Migrants

Indicator	2024-25
1. Estimated size	1,10,000
2. Coverage (%)	≥95
3. Tested for HIV	25,092
3.1 HIV sero-positive (%)	0.11
3.2. Linked to ART	25

G. Truckers

Indicator	2024-25
1. Estimated size	38,340
2. Coverage (%)	52.16
3. Tested for HIV	3,786
3.1. HIV sero-positive (%)	0.11
3.2. On ART	4

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	146
2. Prisons covered under programme	150
3. Total inmates admitted in prisons	1,40,429
4. Inmates Covered in prisons (%)	68.8
5. Tested for HIV in prisons	96,623
5.1. HIV sero-positive (%)	0.27
5.2. On ART (%)	80.1
6. Total OCS	20
7. OCS covered under programme	12
8. Total inmates admitted in OCS	555
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	1,249
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	1
2. Vulnerable population covered	8,028
3. Tested for HIV	3,875
3.1. HIV sero-positive (%)	0.26
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	3
1.1. OSTC in Public Health Settings	3
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	378

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	165
2. Sampoorna Suraksha Kendras	19

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	12,50,088	9,49,419	3,433	22,02,940
1.1 HIV Positives	4,556	2,101	34	6,691
1.2 HIV sero-positivity (%)	0.36	0.22	0.99	0.30
2. Contacts of HIV positive people tested#				30,257
2.1 HIV Positives*				1,819
2.2 HIV sero-positivity (%)				6.01
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				7,245

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	36
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	21
4. Care Support Centres	17

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	4,556	2,432	34	7,022
2. New PLHIV Registered at ART center	4,134	2,308	16	6,458
2.1 Initiated on ART	4,061	2,271	16	6,348
3. PLHIV alive and on ART#	35,232	29,513	108	64,853
4. 12 months retention on ART (%)				88.9
5. Lost to follow-up cases	3,392	2,137	19	5,548

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	3
1.1 Accredited Viral load laboratories (out of 64 VL labs)	1
2. Viral load tests conducted	46,890
2.1. Suppressed test result (%)	92.69
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	6
4.1 Accredited SRL	1
5. CD4 machines	22
5.1 CD4 tests conducted	34,756
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	92.00
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	-

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	19,79,619
2. HIV testing coverage (%)	66.1
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	770
4.1 On life-long ART	799
5. Live births among HIV positive PW	699
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	548
6.1 Babies confirmed HIV Positive (6 week- 6 month)	1
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	546
7.2 Babies confirmed HIV positive at 18 months	23
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	30
9. HIV positive babies initiated on ART	12

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	60.2
2. Sero-positivity (%) among tested	0.08
3. Put on treatment	812

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	20,491	8,754	3,937	2,478	21,311	357	28,930	8,998	95,256
	Quarter 2	22,201	9,042	4,426	2,519	24,719	383	30,593	8,692	1,02,575
	Quarter 3	20,796	8,386	3,946	2,594	19,546	134	30,955	8,672	95,029
	Quarter 4	22,265	9,166	4,193	2,881	32,880	380	30,449	8,680	1,10,894
Tested for TB	Quarter 1	190	98	1	3	125	6	23	3	449
	Quarter 2	189	116	-	5	118	-	20	-	448
	Quarter 3	178	91	1	1	208	-	12	1	492
	Quarter 4	108	45	-	2	343	-	62	-	560
Diagnosed with TB	Quarter 1	1	-	1	-	11	-	3	-	16
	Quarter 2	-	-	-	-	6	-	8	-	14
	Quarter 3	3	-	1	-	9	-	-	-	13
	Quarter 4	-	-	-	-	10	-	1	-	11
Initiated on TB treatment	Quarter 1	1	-	1	-	11	-	3	-	16
	Quarter 2	-	-	-	-	6	-	-	-	6
	Quarter 3	3	-	1	-	9	-	-	-	13
	Quarter 4	-	-	-	-	10	-	-	-	10

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	31,697	31,562	1,032	930	83	434		
May - 24	32,947	32,904	1,143	1,035	113	460		
Jun - 24	32,951	32,773	1,045	909	108	488		
Jul - 24	32,951	32,773	1,045	909	108	488		
Aug - 24	32,685	32,523	930	788	79	454		
Sep - 24	31,314	31,267	979	830	59	453		
Oct - 24	31,549	30,750	1,034	887	73	408		
Nov - 24	31,911	31,831	1,091	942	77	416		
Dec - 24	35,331	35,284	1,100	939	78	388		
Jan - 25	34,974	32,545	2,213	1,057	85	399		
Feb - 25	32,952	30,878	1,129	958	82	382		
Mar - 25	34,551	32,430	1,308	1,111	82	541		
April 2024- March 2025							1,085	1,023

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

States/UTs		Rajasthan
Rank		23
Sl. No.	Obtained Score [%]	57.1
	Obtained Score [N]	108
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	84
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	89
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	≥95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	5
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	87
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	60
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	99
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	85
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	68
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	90
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	77
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	27
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	140
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	62
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	56
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	86
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	107
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	78
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	66
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	53
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	78
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	92
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	72
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	6
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	5
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	33
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	92
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	25
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	100
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	9
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	25
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	92
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	52
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	24-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	30-01-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	09-01-2025
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	84
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	61

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

SIKKIM



SIKKIM

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.50
2. IMR	-	-	4.00
3. Adult (15-49 yrs) HIV Prevalence (%)	0.11	0.08	0.10
4. People living with HIV	324	209	533
5. ART coverage (%)	74.38	70.82	73.17
6. Children living with HIV	11	10	21
7. Annual new HIV infections	15	9	24
8. Annual AIDS-related deaths (ARD)	1	1	2
9. Change in annual new HIV infections since 2010 (%)	-16.67	-18.18	-17.24
10. Change in annual ARD since 2010 (%)	-50.00	3.11	-33.33
11. EVTH need	-	7	7

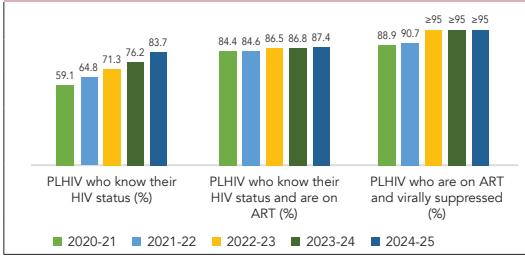
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	732	100.00	-	0.45
2. Men who have sex with men	-	-	-	-
3. Injecting Drug Users	821	-	97.40	0.20
4. Hijra/Transgender People	-	-	-	-
5. Migrants	-	-	-	-
6. Truckers	-	-	-	-
7. Prison inmates	785	-	-	-

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	18.50	23.90	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	15.10	29.30	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	64.10	74.40	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	67.40	73.10	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	12.80	3.60	-
5.1 Condom use during last higher-risk intercourse (%)	71.80	52.30	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	6.93	7.95	-
6.1 Condom use during last higher-risk intercourse (%)	42.86	58.33	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	324	209	533
2. PLHIV who know their HIV Status	273	172	446
3. PLHIV who know their HIV status and are on ART	241	148	390
4. PLHIV who are on ART and tested for their viral load	206	126	333
4.1 PLHIV who are virally suppressed	196	124	321

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	182
2. Colleges with operational Red Ribbon Clubs (RRC)	135
3. Persons trained under mainstreaming	68
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				6
	Male	Female	TG	Total
2. Clients managed				8,054
3. RPR Tests conducted at DSRC	718	1,349	-	2,067
4. Syphilis seropositivity (%) at DSRC	18.94	6.30	-	10.69

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	6
2. OST centres (Excluding Satellite OST centres)	4

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	732
2. Coverage (%)	≥95
3. Condoms distributed	2,82,850
4. Tested for HIV (April 2024-September 2024)	1,106
4.1. HIV sero-positive (%)	0.00
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	1,035
5.1. HIV sero-positive (%)	0.00
5.1.1. Linked to ART	0
6. Clinic Visits	3,263
7. STI/RTI treated	52
8. Presumptive treatment	66

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	0
2. Coverage (%)	0
3. Condoms distributed	0
4. Tested for HIV (April 2024-September 2024)	0
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	0
5.1. HIV sero-positive (%)	-
5.1.1. Linked to ART	0
6. Clinic Visits	0
7. STI/RTI treated	0
8. Presumptive treatment	0

D. Injecting drug users

Indicator	2024-25
1. Estimated size	821
2. Coverage (%)	≥95
3. Needles distributed	3,71,825
4. Syringes distributed	3,71,514
5. On OST	2,586
6. Tested for HIV (April 2024-September 2024)	1,247
6.1. HIV sero-positive (%)	0.00
6.1.1 Linked to ART	0
7. Tested for HIV (October 2023 -March 2024)	1,247
7.1. HIV sero-positive (%)	0.00
7.1.1. Linked to ART	0

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	0
2. Coverage (%)	0
3. Condoms distributed	0
4. Tested for HIV (April 2024-September 2024)	0
4.1. HIV sero-positive (%)	-
4.1.1. Linked to ART	0
5. Tested for HIV (October 2024 -March 2025)	0
5.1. HIV sero-positive (%)	-
5.1.1. Put on ART	0
6. Clinic Visits	0
7. STI/RTI treated	0
8. Presumptive treatment	0

F. Migrants

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	0
3.1 HIV sero-positive (%)	-
3.2. Linked to ART	0

G. Truckers

Indicator	2024-25
1. Estimated size	-
2. Coverage (%)	-
3. Tested for HIV	0
3.1. HIV sero-positive (%)	-
3.2. On ART	0

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	2
2. Prisons covered under programme	2
3. Total inmates admitted in prisons	785
4. Inmates Covered in prisons (%)	83.8
5. Tested for HIV in prisons	658
5.1. HIV sero-positive (%)	0.15
5.2. On ART (%)	≥95
6. Total OCS	1
7. OCS covered under programme	13
8. Total inmates admitted in OCS	25
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	914
10.1. HIV sero-positive (%)	0.22
10.2. On ART (%)	50.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	4
1.1. OSTC in Public Health Settings	4
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	3
2. IDU on OST	2,586

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	13
2. Sampoorna Suraksha Kendras	-

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	19,591	14,176	6	33,773
1.1 HIV Positives	44	10	-	54
1.2 HIV sero-positivity (%)	0.22	0.07	0.00	0.16
2. Contacts of HIV positive people tested#				41
2.1 HIV Positives*				4
2.2 HIV sero-positivity (%)				9.76
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				0

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	1
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	3
4. Care Support Centres	-

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	44	13	-	57
2. New PLHIV Registered at ART center	40	15	-	55
2.1 Initiated on ART	36	13	-	49
3. PLHIV alive and on ART#	241	148	1	390
4. 12 months retention on ART (%)				95.7
5. Lost to follow-up cases	7	6	-	13

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	372
2.1. Suppressed test result (%)	93.55
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	1
5.1 CD4 tests conducted	502
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	75.0
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	9

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	7,990
2. HIV testing coverage (%)	>=95
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	7
4.1 On life-long ART	6
5. Live births among HIV positive PW	2
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	0
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	-
7.2 Babies confirmed HIV positive at 18 months	-
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	-
9. HIV positive babies initiated on ART	-

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.66
3. Put on treatment	18

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	599	-	324	-	-	-	-	-	923
	Quarter 2	615	-	389	-	344	153	-	-	1,501
	Quarter 3	483	-	338	-	147	336	-	-	1,304
	Quarter 4	575	-	319	-	160	217	-	-	1,271
Tested for TB	Quarter 1	5	-	2	-	-	-	-	-	7
	Quarter 2	4	-	4	-	40	-	-	-	48
	Quarter 3	3	-	8	-	70	-	-	-	81
	Quarter 4	3	-	5	-	77	1	-	-	86
Diagnosed with TB	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	-	-	-	-	-
	Quarter 3	-	-	-	-	1	-	-	-	1
	Quarter 4	-	-	1	-	1	-	-	-	2
Initiated on TB treatment	Quarter 1	-	-	-	-	-	-	-	-	-
	Quarter 2	-	-	-	-	-	-	-	-	-
	Quarter 3	-	-	-	-	1	-	-	-	1
	Quarter 4	-	-	1	-	-	-	-	-	1

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	149	149	1	1	1	4		
May - 24	132	132	1	1	1	3		
Jun - 24	123	123	1	1	-	4		
Jul - 24	123	123	1	1	-	4		
Aug - 24	146	146	1	1	-	4		
Sep - 24	123	123	-	-	-	4		
Oct - 24	157	157	-	-	-	2		
Nov - 24	170	170	1	1	-	3		
Dec - 24	146	146	1	1	-	2		
Jan - 25	182	182	1	1	1	-		
Feb - 25	185	185	-	-	-	-		
Mar - 25	155	155	-	-	-	-		
April 2024- March 2025							12	11

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Sikkim
	Rank	**1**
Sl. No.	Obtained Score [%]	76.3
	Obtained Score [N]	135
	Maximum Score [N]	177
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	84
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	30
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	70
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	169
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	104
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	187
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	91
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	96
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	457
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	141
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	96
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	65
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	36
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	51
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	0
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	35
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	80
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	98
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	113
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	2
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	0
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	75
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	0
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	50
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	NA
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	NA
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	NA
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	NA
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	99
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	14-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	21-11-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	16-11-2023
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	91
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	93

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

TAMIL NADU



TAMIL NADU

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	0.90
2. IMR	-	-	0.44
3. Adult (15-49 yrs) HIV Prevalence (%)	0.19	0.19	0.19
4. People living with HIV	85,126	80,845	1,65,971
5. ART coverage (%)	78.35	88.00	83.36
6. Children living with HIV	1,398	1,294	2,691
7. Annual new HIV infections	812	675	1,487
8. Annual AIDS-related deaths (ARD)	822	474	1,296
9. Change in annual new HIV infections since 2010 (%)	-74.40	-74.59	-74.49
10. Change in annual ARD since 2010 (%)	-89.08	-90.21	-89.52
11. EVTH need	-	935	935

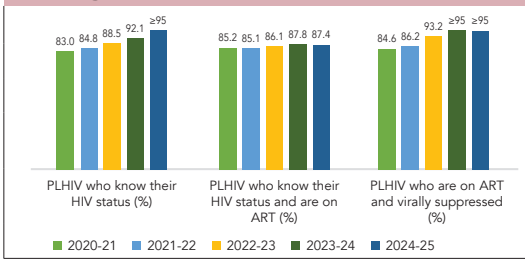
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	60,775	97.60	-	0.57
2. Men who have sex with men	38,284	94.60	-	0.45
3. Injecting Drug Users	115	-	89.90	0.00
4. Hijra/Transgender People	9,211	-	-	3.32
5. Migrants	1,95,127	99.20	100.00	0.00
6. Truckers	47,000	66.70	-	0.64
7. Prison inmates	1,11,826	58.00	86.60	0.81

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	26.60	23.60	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	23.20	23.90	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	65.70	56.40	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	52.20	41.50	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	0.80	0.00	-
5.1 Condom use during last higher-risk intercourse (%)	49.80	NA	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	0.74	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	16.67	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	85,126	80,845	1,65,971
2. PLHIV who know their HIV Status	78,753	78,888	1,58,324
3. PLHIV who know their HIV status and are on ART	66,697	71,144	1,38,357
4. PLHIV who are on ART and tested for their viral load	58,374	63,363	1,22,162
4.1 PLHIV who are virally suppressed	56,369	62,025	1,18,795

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	9,830
2. Colleges with operational Red Ribbon Clubs (RRC)	2,379
3. Persons trained under mainstreaming	948
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				106
	Male	Female	TG	Total
2. Clients managed				9,67,771
3. RPR Tests conducted at DSRC	3,64,267	3,39,161	1,498	7,04,926
4. Syphilis seropositivity (%) at DSRC	0.74	0.25	3.54	0.51

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	87
2. OST centres (Excluding Satellite OST centres)	1

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	60,775
2. Coverage (%)	≥95
3. Condoms distributed	79,78,866
4. Tested for HIV (April 2024-September 2024)	40,919
4.1. HIV sero-positive (%)	0.09
4.1.1. Linked to ART	41
5. Tested for HIV (October 2024 -March 2025)	43,288
5.1. HIV sero-positive (%)	0.11
5.1.1. Linked to ART	44
6. Clinic Visits	1,14,637
7. STI/RTI treated	1,547
8. Presumptive treatment	7,612

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	38,284
2. Coverage (%)	≥95
3. Condoms distributed	54,60,988
4. Tested for HIV (April 2024-September 2024)	29,316
4.1. HIV sero-positive (%)	0.30
4.1.1. Linked to ART	84
5. Tested for HIV (October 2024 -March 2025)	30,920
5.1. HIV sero-positive (%)	0.40
5.1.1. Linked to ART	114
6. Clinic Visits	90,238
7. STI/RTI treated	662
8. Presumptive treatment	6,779

D. Injecting drug users

Indicator	2024-25
1. Estimated size	115
2. Coverage (%)	≥95
3. Needles distributed	65,375
4. Syringes distributed	65,375
5. On OST	89
6. Tested for HIV (April 2024-September 2024)	532
6.1. HIV sero-positive (%)	0.75
6.1.1 Linked to ART	4
7. Tested for HIV (October 2023 -March 2024)	591
7.1. HIV sero-positive (%)	0.34
7.1.1. Linked to ART	1

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	9,211
2. Coverage (%)	≥95
3. Condoms distributed	15,37,544
4. Tested for HIV (April 2024-September 2024)	6,567
4.1. HIV sero-positive (%)	0.26
4.1.1. Linked to ART	16
5. Tested for HIV (October 2024 -March 2025)	7,052
5.1. HIV sero-positive (%)	0.11
5.1.1. Put on ART	5
6. Clinic Visits	19,250
7. STI/RTI treated	176
8. Presumptive treatment	1,451

F. Migrants

Indicator	2024-25
1. Estimated size	1,95,127
2. Coverage (%)	31.31
3. Tested for HIV	25,522
3.1 HIV sero-positive (%)	0.23
3.2. Linked to ART	47

G. Truckers

Indicator	2024-25
1. Estimated size	47,000
2. Coverage (%)	≥95
3. Tested for HIV	16,223
3.1. HIV sero-positive (%)	0.18
3.2. On ART	24

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	142
2. Prisons covered under programme	129
3. Total inmates admitted in prisons	1,11,826
4. Inmates Covered in prisons (%)	75.4
5. Tested for HIV in prisons	84,263
5.1. HIV sero-positive (%)	0.17
5.2. On ART (%)	90.1
6. Total OCS	44
7. OCS covered under programme	32
8. Total inmates admitted in OCS	1,500
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	1,496
10.1. HIV sero-positive (%)	0.53
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	17
2. Vulnerable population covered	5,43,443
3. Tested for HIV	1,39,173
3.1. HIV sero-positive (%)	0.13
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	1
1.1. OSTC in Public Health Settings	1
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	89

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	330
2. Sampoorna Suraksha Kendras	3

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	20,70,446	15,99,882	13,290	36,83,618
1.1 HIV Positives	4,406	2,634	39	7,079
1.2 HIV sero-positivity (%)	0.21	0.16	0.29	0.19
2. Contacts of HIV positive people tested#				77,473
2.1 HIV Positives*				1,708
2.2 HIV sero-positivity (%)				2.20
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				952

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	76
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	1
3. Link ART Centres	175
4. Care Support Centres	32

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	4,406	2,839	39	7,284
2. New PLHIV Registered at ART center	4,469	2,862	38	7,369
2.1 Initiated on ART	4,306	2,786	38	7,130
3. PLHIV alive and on ART#	66,697	71,144	516	1,38,357
4. 12 months retention on ART (%)				95.7
5. Lost to follow-up cases	3,320	1,702	65	5,087

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	7
1.1 Accredited Viral load laboratories (out of 64 VL labs)	6
2. Viral load tests conducted	1,40,075
2.1. Suppressed test result (%)	92.51
3. National reference laboratories (NRL)	3
3.1 Accredited NRL	3
4. State reference laboratories (SRL)	12
4.1 Accredited SRL	12
5. CD4 machines	45
5.1 CD4 tests conducted	97,261
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100.0
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	19

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	9,74,875
2. HIV testing coverage (%)	81.4
3. HIV sero-positivity (%) among tested	0.03
4. HIV Positive PW (old + new detections)	829
4.1 On life-long ART	845
5. Live births among HIV positive PW	530
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	528
6.1 Babies confirmed HIV Positive (6 week- 6 month)	3
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	502
7.2 Babies confirmed HIV positive at 18 months	7
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	13
9. HIV positive babies initiated on ART	10

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.03
3. Put on treatment	284

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	47,163	32,386	577	7,368	19,246	268	29,894	17,404	1,54,306
	Quarter 2	47,006	32,774	582	7,511	23,444	423	31,459	17,706	1,60,905
	Quarter 3	47,719	32,509	612	7,572	21,599	355	29,319	16,363	1,56,048
	Quarter 4	49,088	32,595	636	7,569	20,103	457	26,113	15,748	1,52,309
Tested for TB	Quarter 1	1,121	1,143	2	239	1,899	1	33	4	4,442
	Quarter 2	1,164	1,284	2	278	1,855	20	59	9	4,671
	Quarter 3	1,288	1,145	5	178	1,801	21	29	6	4,473
	Quarter 4	1,589	1,138	35	271	1,269	17	9	16	4,344
Diagnosed with TB	Quarter 1	3	11	-	1	4	-	-	4	23
	Quarter 2	6	3	-	1	5	-	-	2	17
	Quarter 3	1	3	-	-	5	-	-	1	10
	Quarter 4	2	10	-	-	13	-	-	1	26
Initiated on TB treatment	Quarter 1	3	11	-	1	4	-	-	1	20
	Quarter 2	4	2	-	1	5	-	-	1	13
	Quarter 3	1	4	-	-	5	-	-	-	10
	Quarter 4	2	10	-	-	13	-	-	1	26

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	96,855	89,848	4,792	4,789	171	521		
May - 24	95,749	91,592	5,980	5,183	191	736		
Jun - 24	92,329	87,348	4,907	4,841	154	688		
Jul - 24	92,329	87,348	4,907	4,841	154	688		
Aug - 24	93,194	89,043	5,106	5,101	168	671		
Sep - 24	89,687	85,769	5,071	5,065	139	664		
Oct - 24	90,257	86,250	5,255	5,252	167	644		
Nov - 24	90,100	85,843	5,351	5,347	174	654		
Dec - 24	87,536	84,596	6,772	6,767	151	601		
Jan - 25	85,528	82,458	9,668	8,134	150	560		
Feb - 25	83,066	79,455	8,651	7,145	157	546		
Mar - 25	88,229	83,988	5,838	5,834	176	693		
April 2024-March 2025							2,270	2,200

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Tamil Nadu
	Rank	**10**
Sl. No.	Obtained Score [%]	71.4
	Obtained Score [N]	135
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	47
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	109
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	83
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	69
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	58
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	79
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	23
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	176
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	67
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	81
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	99
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23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	100
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	141
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	84
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	95
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	100
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	97
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	4
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	6
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	50
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	0
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
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38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	35
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	38
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	67
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	85
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	29-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	10-12-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	04-06-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	89
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	57
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	87

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

TELANGANA



TELANGANA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	1.93
2. IMR	-	-	0.62
3. Adult (15-49 yrs) HIV Prevalence (%)	0.43	0.40	0.41
4. People living with HIV	81,546	75,415	1,56,961
5. ART coverage (%)	78.20	>95	87.52
6. Children living with HIV	1,564	1,430	2,994
7. Annual new HIV infections	1,717	1,305	3,022
8. Annual AIDS-related deaths (ARD)	2,343	691	3,035
9. Change in annual new HIV infections since 2010 (%)	-58.32	-59.09	-58.65
10. Change in annual ARD since 2010 (%)	-75.18	-87.70	-79.84
11. EVTH need	-	1,018	1,018

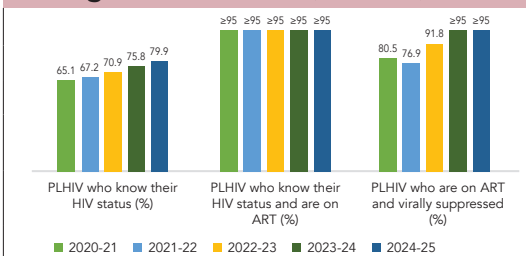
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	75,381	98.10	-	0.39
2. Men who have sex with men	16,427	92.90	-	2.34
3. Injecting Drug Users	816	-	99.20	0.00
4. Hijra/Transgender People	995	-	-	0.00
5. Migrants	75,601	70.00	-	1.60
6. Truckers	47,000	53.10	-	0.00
7. Prison inmates	52,685	-	66.70	2.75

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	30.50	30.70	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	30.30	32.90	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	65.40	61.90	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	70.40	58.90	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	4.40	0.40	-
5.1 Condom use during last higher-risk intercourse (%)	47.60	36.80	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	5.96	0.18	-
6.1 Condom use during last higher-risk intercourse (%)	32.26	50.00	-

2. Progress on 95-95-95 (2024-25)#



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	81,546	75,415	1,56,961
2. PLHIV who know their HIV Status	59,289	65,317	1,25,383
3. PLHIV who know their HIV status and are on ART	-	-	-
4. PLHIV who are on ART and tested for their viral load	43,157	49,906	93,448
4.1 PLHIV who are virally suppressed	41,952	48,973	91,301

* Including of H/TG PLHIV # Interim (including pvt sec.) worked out to 95% of first 95

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	2,000
2. Colleges with operational Red Ribbon Clubs (RRC)	770
3. Persons trained under mainstreaming	-
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				50
	Male	Female	TG	Total
2. Clients managed				6,26,026
3. RPR Tests conducted at DSRC	54,497	1,09,428	726	1,64,651
4. Syphilis seropositivity (%) at DSRC	1.07	0.28	3.17	0.55

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	53
2. OST centres (Excluding Satellite OST centres)	1

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	75,381
2. Coverage (%)	≥95
3. Condoms distributed	3,22,46,734
4. Tested for HIV (April 2024-September 2024)	1,26,994
4.1. HIV sero-positive (%)	0.14
4.1.1. Linked to ART	180
5. Tested for HIV (October 2024 -March 2025)	1,50,926
5.1. HIV sero-positive (%)	0.18
5.1.1. Linked to ART	273
6. Clinic Visits	5,17,417
7. STI/RTI treated	3,801
8. Presumptive treatment	22,444

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	16,427
2. Coverage (%)	≥95
3. Condoms distributed	76,87,271
4. Tested for HIV (April 2024-September 2024)	25,602
4.1. HIV sero-positive (%)	0.37
4.1.1. Linked to ART	96
5. Tested for HIV (October 2024 -March 2025)	29,546
5.1. HIV sero-positive (%)	0.49
5.1.1. Linked to ART	144
6. Clinic Visits	1,00,901
7. STI/RTI treated	300
8. Presumptive treatment	4,054

D. Injecting drug users

Indicator	2024-25
1. Estimated size	816
2. Coverage (%)	≥95
3. Needles distributed	6,83,803
4. Syringes distributed	6,83,803
5. On OST	130
6. Tested for HIV (April 2024-September 2024)	1,426
6.1. HIV sero-positive (%)	0.14
6.1.1 Linked to ART	2
7. Tested for HIV (October 2023 -March 2024)	1,532
7.1. HIV sero-positive (%)	0.07
7.1.1. Linked to ART	1

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	995
2. Coverage (%)	≥95
3. Condoms distributed	20,97,753
4. Tested for HIV (April 2024-September 2024)	3,693
4.1. HIV sero-positive (%)	0.16
4.1.1. Linked to ART	6
5. Tested for HIV (October 2024 -March 2025)	4,591
5.1. HIV sero-positive (%)	0.41
5.1.1. Put on ART	19
6. Clinic Visits	15,593
7. STI/RTI treated	49
8. Presumptive treatment	711

F. Migrants

Indicator	2024-25
1. Estimated size	75,601
2. Coverage (%)	≥95
3. Tested for HIV	73,662
3.1 HIV sero-positive (%)	0.13
3.2. Linked to ART	98

G. Truckers

Indicator	2024-25
1. Estimated size	47,000
2. Coverage (%)	≥95
3. Tested for HIV	24,461
3.1. HIV sero-positive (%)	0.07
3.2. On ART	16

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	37
2. Prisons covered under programme	35
3. Total inmates admitted in prisons	52,685
4. Inmates Covered in prisons (%)	88.8
5. Tested for HIV in prisons	46,758
5.1. HIV sero-positive (%)	0.21
5.2. On ART (%)	≥95
6. Total OCS	29
7. OCS covered under programme	39
8. Total inmates admitted in OCS	1,834
9. Inmates Covered in OCS (%)	89.9
10.Tested for HIV in OCS	1,649
10.1. HIV sero-positive (%)	0.12
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	9
2. Vulnerable population covered	86,932
3. Tested for HIV	72,122
3.1. HIV sero-positive (%)	0.48
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	1
1.1. OSTC in Public Health Settings	1
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	-
2. IDU on OST	130

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	138
2. Sampoorna Suraksha Kendras	16

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	6,44,299	6,47,628	3,249	12,95,176
1.1 HIV Positives	5,107	3,749	78	8,934
1.2 HIV sero-positivity (%)	0.79	0.58	2.40	0.69
2. Contacts of HIV positive people tested#				45,112
2.1 HIV Positives*				2,043
2.2 HIV sero-positivity (%)				4.53
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				13,425

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	30
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	0
2.2 Centre of Excellent (Paediatric)	1
3. Link ART Centres	74
4. Care Support Centres	13

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	5,107	4,158	78	9,343
2. New PLHIV Registered at ART center	5,133	4,087	70	9,290
2.1 Initiated on ART	5,052	4,047	70	9,169
3. PLHIV alive and on ART#				1,19,114#
4. 12 months retention on ART (%)				94.2
5. Lost to follow-up cases	7,144	6,005	117	13,266

Including private sector # Interim (including pvt sec.) worked out to 95% of first 95

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	4
1.1 Accredited Viral load laboratories (out of 64 VL labs)	3
2. Viral load tests conducted	1,12,616
2.1. Suppressed test result (%)	92.60
3. National reference laboratories (NRL)	1
3.1 Accredited NRL	1
4. State reference laboratories (SRL)	3
4.1 Accredited SRL	3
5. CD4 machines	21
5.1 CD4 tests conducted	43,401
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	81.9
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	80

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	6,60,184
2. HIV testing coverage (%)	83.0
3. HIV sero-positivity (%) among tested	0.07
4. HIV Positive PW (old + new detections)	1,043
4.1 On life-long ART	1,010
5. Live births among HIV positive PW	539
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	477
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	432
7.2 Babies confirmed HIV positive at 18 months	14
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	16
9. HIV positive babies initiated on ART	3

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	74.7
2. Sero-positivity (%) among tested	0.02
3. Put on treatment	70

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	No
2. State designated/appointed ombudsman	No

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	1,95,352	37,428	1,216	4,594	9,886	165	84,809	47,458	3,80,908
	Quarter 2	2,07,458	37,784	1,434	4,579	10,366	276	96,006	32,540	3,90,443
	Quarter 3	2,26,241	40,014	1,441	4,878	11,006	352	91,300	37,343	4,12,575
	Quarter 4	2,46,071	43,099	1,558	6,223	16,050	826	99,853	41,635	4,55,315
Tested for TB	Quarter 1	1,500	303	-	15	29	-	38	1	1,886
	Quarter 2	2,238	468	-	24	119	-	48	-	2,897
	Quarter 3	2,142	423	-	8	57	-	50	1	2,681
	Quarter 4	2,106	348	-	60	187	1	86	3	2,791
Diagnosed with TB	Quarter 1	15	5	-	-	1	-	4	-	25
	Quarter 2	19	9	-	-	3	-	1	-	32
	Quarter 3	14	10	-	-	-	-	-	-	24
	Quarter 4	25	27	-	2	2	-	5	-	61
Initiated on TB treatment	Quarter 1	15	5	-	-	1	-	4	-	25
	Quarter 2	19	9	-	-	3	-	1	-	32
	Quarter 3	14	10	-	-	-	-	-	-	24
	Quarter 4	25	27	-	2	2	-	5	-	61

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	79,856	72,185	1,857	1,833	105	593		
May - 24	81,413	74,439	2,107	2,029	136	482		
Jun - 24	74,237	69,169	2,147	2,066	136	821		
Jul - 24	74,237	69,169	2,147	2,066	136	821		
Aug - 24	79,655	72,939	2,537	2,486	123	1,151		
Sep - 24	80,588	74,213	2,491	2,431	95	1,430		
Oct - 24	81,221	73,839	2,246	2,171	94	1,229		
Nov - 24	81,824	74,954	2,340	2,325	72	2,367		
Dec - 24	82,081	76,066	2,404	2,353	110	2,780		
Jan - 25	73,847	67,791	3,196	2,936	132	1,672		
Feb - 25	72,265	61,221	2,600	2,514	112	1,020		
Mar - 25	73,066	63,964	2,705	2,554	113	1,296		
April 2024- March 2025							1,704	1,335

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Telangana
	Rank	**14**
Sl. No.	Obtained Score [%]	68.8
	Obtained Score [N]	130
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	80
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	123
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Not Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Not Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	246
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	93
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	95
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	85
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	84
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	52
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	103
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85-94%, R:<85%]	79
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	71
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	92
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	69
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	88
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	87
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	55
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	65
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	95
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	96
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	6
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	6
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	82
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	50
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
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45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	90
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	82

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1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

TRIPURA



TRIPURA

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	10.87
2. IMR	-	-	13.01
3. Adult (15-49 yrs) HIV Prevalence (%)	0.54	0.24	0.39
4. People living with HIV	7,531	3,237	10,768
5. ART coverage (%)	59.58	35.16	52.25
6. Children living with HIV	85	82	167
7. Annual new HIV infections	827	344	1,171
8. Annual AIDS-related deaths (ARD)	19	32	51
9. Change in annual new HIV infections since 2010 (%)	447.68	446.03	447.20
10. Change in annual ARD since 2010 (%)	216.67	540.00	354.55
11. EVTH need	-	73	73

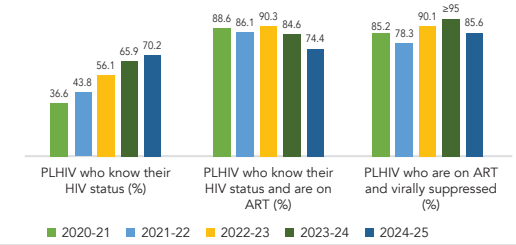
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	6,242	99.30	-	0.70
2. Men who have sex with men	876	-	-	-
3. Injecting Drug Users	6,500	-	91.10	30.72
4. Hijra/Transgender People	159	-	-	-
5. Migrants	35,800	-	-	-
6. Truckers	1,000	-	-	-
7. Prison inmates	6,580	-	88.20	6.00

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	29.90	15.40	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	31.90	11.60	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	49.70	47.80	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	59.40	53.10	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	0.40	0.10	-
5.1 Condom use during last higher-risk intercourse (%)	7.60	0.00	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	0.48	0.32	-
6.1 Condom use during last higher-risk intercourse (%)	0.00	0.00	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	7,531	3,237	10,768
2. PLHIV who know their HIV Status	6,242	1,315	7,560
3. PLHIV who know their HIV status and are on ART	4,487	1,138	5,627
4. PLHIV who are on ART and tested for their viral load	1,973	617	2,591
4.1 PLHIV who are virally suppressed	1,679	539	2,219

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	400
2. Colleges with operational Red Ribbon Clubs (RRC)	36
3. Persons trained under mainstreaming	186
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				18
	Male	Female	TG	Total
2. Clients managed				63,804
3. RPR Tests conducted at DSRC	17,908	29,255	58	47,221
4. Syphilis seropositivity (%) at DSRC	0.37	0.08	0.00	0.19

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	13
2. OST centres (Excluding Satellite OST centres)	6

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	6,242
2. Coverage (%)	≥95
3. Condoms distributed	553,605
4. Tested for HIV (April 2024-September 2024)	3,099
4.1. HIV sero-positive (%)	0.16
4.1.1. Linked to ART	4
5. Tested for HIV (October 2024 -March 2025)	3,958
5.1. HIV sero-positive (%)	0.20
5.1.1. Linked to ART	6
6. Clinic Visits	14,529
7. STI/RTI treated	108
8. Presumptive treatment	714

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	876
2. Coverage (%)	≥95
3. Condoms distributed	71,015
4. Tested for HIV (April 2024-September 2024)	652
4.1. HIV sero-positive (%)	2.61
4.1.1. Linked to ART	18
5. Tested for HIV (October 2024 -March 2025)	797
5.1. HIV sero-positive (%)	2.51
5.1.1. Linked to ART	17
6. Clinic Visits	2,896
7. STI/RTI treated	22
8. Presumptive treatment	247

D. Injecting drug users

Indicator	2024-25
1. Estimated size	6,500
2. Coverage (%)	≥95
3. Needles distributed	13,68,903
4. Syringes distributed	13,79,923
5. On OST	2,837
6. Tested for HIV (April 2024-September 2024)	4,015
6.1. HIV sero-positive (%)	5.01
6.1.1 Linked to ART	149
7. Tested for HIV (October 2023 -March 2024)	5,425
7.1. HIV sero-positive (%)	2.82
7.1.1. Linked to ART	101

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	159
2. Coverage (%)	≥95
3. Condoms distributed	12,711
4. Tested for HIV (April 2024-September 2024)	51
4.1. HIV sero-positive (%)	1.96
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	88
5.1. HIV sero-positive (%)	0.00
5.1.1. Put on ART	0
6. Clinic Visits	290
7. STI/RTI treated	1
8. Presumptive treatment	58

F. Migrants

Indicator	2024-25
1. Estimated size	35,800
2. Coverage (%)	84.67
3. Tested for HIV	5,039
3.1 HIV sero-positive (%)	0.08
3.2. Linked to ART	3

G. Truckers

Indicator	2024-25
1. Estimated size	1,000
2. Coverage (%)	≥95
3. Tested for HIV	2,020
3.1. HIV sero-positive (%)	0.20
3.2. On ART	4

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	14
2. Prisons covered under programme	12
3. Total inmates admitted in prisons	6,580
4. Inmates Covered in prisons (%)	76.5
5. Tested for HIV in prisons	5,031
5.1. HIV sero-positive (%)	1.51
5.2. On ART (%)	93.4
6. Total OCS	4
7. OCS covered under programme	3
8. Total inmates admitted in OCS	600
9. Inmates Covered in OCS (%)	23.8
10.Tested for HIV in OCS	143
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	2
2. Vulnerable population covered	19,389
3. Tested for HIV	16,850
3.1. HIV sero-positive (%)	0.26
3.2. Linked to ART (%)	88.64

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	6
1.1. OSTC in Public Health Settings	6
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	11
2. IDU on OST	2,837

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	24
2. Sampoorna Suraksha Kendras	2

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	93,985	52,270	284	1,46,539
1.1 HIV Positives	1,220	128	3	1,351
1.2 HIV sero-positivity (%)	1.30	0.24	1.06	0.92
2. Contacts of HIV positive people tested#				746
2.1 HIV Positives*				260
2.2 HIV sero-positivity (%)				34.85
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				366

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	3
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	5
4. Care Support Centres	1

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	1,220	184	3	1,407
2. New PLHIV Registered at ART center	1,111	166	2	1,279
2.1 Initiated on ART	1,102	165	2	1,269
3. PLHIV alive and on ART#	4,487	1,138	2	5,627
4. 12 months retention on ART (%)				83.4
5. Lost to follow-up cases	1,683	184	1	1,868

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	2,704
2.1. Suppressed test result (%)	84.02
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	3
5.1 CD4 tests conducted	2,441
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	100.0
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	2

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	56,828
2. HIV testing coverage (%)	72.1
3. HIV sero-positivity (%) among tested	0.14
4. HIV Positive PW (old + new detections)	106
4.1 On life-long ART	69
5. Live births among HIV positive PW	33
5.1 Babies given ARV Prophylaxis (%)	93.9
6. Babies tested HIV (6 week- 6 month)	25
6.1 Babies confirmed HIV Positive (6 week- 2 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	8
7.2 Babies confirmed HIV positive at 18 months	2
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	3
9. HIV positive babies initiated on ART	3

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	76.6
2. Sero-positivity (%) among tested	0.15
3. Put on treatment	45

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	4,447	453	6,982	47	618	12	1,158	843	14,560
	Quarter 2	4,509	511	7,061	74	1,563	49	1,397	1,145	16,309
	Quarter 3	4,950	571	7,774	93	1,382	36	1,780	1,290	17,876
	Quarter 4	5,099	704	8,969	111	1,536	52	1,537	711	18,719
Tested for TB	Quarter 1	12	3	69	-	-	-	1	-	85
	Quarter 2	25	18	82	-	24	-	3	-	152
	Quarter 3	69	8	77	1	7	-	-	2	164
	Quarter 4	41	30	98	-	2	-	-	-	171
Diagnosed with TB	Quarter 1	-	1	1	-	-	-	-	-	2
	Quarter 2	2	-	1	-	-	-	-	-	3
	Quarter 3	1	2	1	-	2	-	-	-	6
	Quarter 4	-	1	2	-	-	-	-	-	3
Initiated on TB treatment	Quarter 1	-	1	-	-	-	-	-	-	1
	Quarter 2	2	-	-	-	-	-	-	-	2
	Quarter 3	1	2	-	-	2	-	-	-	5
	Quarter 4	-	1	1	-	-	-	-	-	2

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	2,439	2,226	29	23	2	23		
May - 24	2,404	2,404	15	13	-	132		
Jun - 24	2,157	2,152	20	19	3	173		
Jul - 24	2,157	2,152	20	19	3	173		
Aug - 24	1,927	1,925	21	19	-	71		
Sep - 24	2,448	2,444	15	15	1	103		
Oct - 24	1,549	1,548	14	14	-	112		
Nov - 24	1,798	1,796	19	19	1	91		
Dec - 24	1,730	1,729	17	16	2	117		
Jan - 25	1,745	1,743	19	18	-	83		
Feb - 25	1,680	1,677	22	22	-	88		
Mar - 25	1,798	1,798	26	21	-	110		
April 2024- March 2025							55	55

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Tripura
	Rank	**28**
Sl. No.	Obtained Score [%]	54.0
	Obtained Score [N]	102
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	70
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	74
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	86
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	7
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	88
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	85
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	116
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	79
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	85
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	79
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	72
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	65
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	126
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	69
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	73
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	68
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	49
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	76
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	102
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	46
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	98
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	85
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	52
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	22
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	1
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	100
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	25
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	17
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	50
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	67
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	79
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	09-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	28-06-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	06-06-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	80
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	33

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

UTTAR PRADESH



UTTAR PRADESH

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	3.26
2. IMR	-	-	1.68
3. Adult (15-49 yrs) HIV Prevalence (%)	0.12	0.08	0.10
4. People living with HIV	121,174	74,253	195,427
5. ART coverage (%)	57.35	75.90	64.62
6. Children living with HIV	3,119	2,767	5,886
7. Annual new HIV infections	4,232	2,142	6,373
8. Annual AIDS-related deaths (ARD)	1,232	317	1,549
9. Change in annual new HIV infections since 2010 (%)	-46.54	-48.00	-47.05
10. Change in annual ARD since 2010 (%)	-76.75	-86.08	-79.55
11. EVTH need	-	2,101	2,101

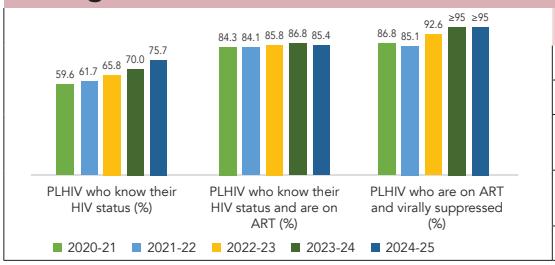
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	40,480	99.80	-	0.95
2. Men who have sex with men	19,668	85.20	-	2.97
3. Injecting Drug Users	35,412	-	96.10	5.36
4. Hijra/Transgender People	9,846	-	-	5.60
5. Migrants	327,000	4.50	43.75	0.13
6. Truckers	72,000	99.00	100.00	0.00
7. Prison inmates	223,809	76.90	43.20	2.50

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	22.10	13.10	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	19.80	11.60	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	70.00	64.10	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	67.40	57.60	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	5.30	0.70	-
5.1 Condom use during last higher-risk intercourse (%)	58.50	70.50	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	8.67	1.32	-
6.1 Condom use during last higher-risk intercourse (%)	60.43	79.17	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	1,21,174	74,253	1,95,427
2. PLHIV who know their HIV Status	83,457	63,859	1,47,856
3. PLHIV who know their HIV status and are on ART	69,495	56,361	1,26,294
4. PLHIV who are on ART and tested for their viral load	50,534	42,692	93,545
4.1 PLHIV who are virally suppressed	48,979	41,687	90,977

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	-
2. Colleges with operational Red Ribbon Clubs (RRC)	392
3. Persons trained under mainstreaming	106
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				115
	Male	Female	TG	Total
2. Clients managed				17,09,315
3. RPR Tests conducted at DSRC	2,03,114	3,49,523	3,474	5,56,111
4. Syphilis seropositivity (%) at DSRC	0.90	0.16	1.81	0.44

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	92
2. OST centres (Excluding Satellite OST centres)	21

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	40,480
2. Coverage (%)	≥95
3. Condoms distributed	89,64,579
4. Tested for HIV (April 2024-September 2024)	27,912
4.1. HIV sero-positive (%)	0.15
4.1.1. Linked to ART	41
5. Tested for HIV (October 2024 -March 2025)	34,871
5.1. HIV sero-positive (%)	0.15
5.1.1. Linked to ART	40
6. Clinic Visits	1,15,940
7. STI/RTI treated	4,001
8. Presumptive treatment	10,221

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	19,668
2. Coverage (%)	≥95
3. Condoms distributed	39,49,989
4. Tested for HIV (April 2024-September 2024)	14,257
4.1. HIV sero-positive (%)	0.76
4.1.1. Linked to ART	105
5. Tested for HIV (October 2024 -March 2025)	16,952
5.1. HIV sero-positive (%)	0.61
5.1.1. Linked to ART	96
6. Clinic Visits	60,405
7. STI/RTI treated	1,350
8. Presumptive treatment	5,643

D. Injecting drug users

Indicator	2024-25
1. Estimated size	35,412
2. Coverage (%)	93.64
3. Needles distributed	1,45,92,260
4. Syringes distributed	74,09,196
5. On OST	2,726
6. Tested for HIV (April 2024-September 2024)	22,483
6.1. HIV sero-positive (%)	0.93
6.1.1 Linked to ART	186
7. Tested for HIV (October 2023 -March 2024)	26,173
7.1. HIV sero-positive (%)	0.55
7.1.1. Linked to ART	146

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	9,846
2. Coverage (%)	83.02
3. Condoms distributed	16,42,950
4. Tested for HIV (April 2024-September 2024)	5,852
4.1. HIV sero-positive (%)	0.44
4.1.1. Linked to ART	25
5. Tested for HIV (October 2024 -March 2025)	6,605
5.1. HIV sero-positive (%)	0.32
5.1.1. Put on ART	21
6. Clinic Visits	25,042
7. STI/RTI treated	482
8. Presumptive treatment	1,835

F. Migrants

Indicator	2024-25
1. Estimated size	3,27,000
2. Coverage (%)	52.50
3. Tested for HIV	24,933
3.1 HIV sero-positive (%)	0.22
3.2. Linked to ART	47

G. Truckers

Indicator	2024-25
1. Estimated size	72,000
2. Coverage (%)	76.39
3. Tested for HIV	22,218
3.1. HIV sero-positive (%)	0.17
3.2. On ART	38

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	77
2. Prisons covered under programme	73
3. Total inmates admitted in prisons	2,23,809
4. Inmates Covered in prisons (%)	≥95
5. Tested for HIV in prisons	2,22,888
5.1. HIV sero-positive (%)	0.27
5.2. On ART (%)	89.9
6. Total OCS	80
7. OCS covered under programme	83
8. Total inmates admitted in OCS	2,000
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	4,973
10.1. HIV sero-positive (%)	0.06
10.2. On ART (%)	≥95

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	9
2. Vulnerable population covered	1,68,098
3. Tested for HIV	1,09,013
3.1. HIV sero-positive (%)	0.16
3.2. Linked to ART (%)	83.53

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	21
1.1. OSTC in Public Health Settings	21
1.2. OSTC in NGO Settings	-
1.3 No. of Satellite OST Centres	4
2. IDU on OST	2,726

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	399
2. Sampoorna Suraksha Kendras	35

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	23,02,326	20,39,657	54,392	43,96,375
1.1 HIV Positives	12,125	5,091	125	17,341
1.2 HIV sero-positivity (%)	0.53	0.25	0.23	0.39
2. Contacts of HIV positive people tested#				55,236
2.1 HIV Positives*				2,037
2.2 HIV sero-positivity (%)				3.69
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				40,838

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	59
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	34
4. Care Support Centres	27

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	12,125	5,922	125	18,172
2. New PLHIV Registered at ART center	11,408	5,890	103	17,401
2.1 Initiated on ART	11,058	5,799	99	16,956
3. PLHIV alive and on ART#	69,495	56,361	438	1,26,294
4. 12 months retention on ART (%)				94.0
5. Lost to follow-up cases	6,842	2,594	60	9,496

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	4
1.1 Accredited Viral load laboratories (out of 64 VL labs)	2
2. Viral load tests conducted	1,01,528
2.1. Suppressed test result (%)	94.71
3. National reference laboratories (NRL)	1
3.1 Accredited NRL	1
4. State reference laboratories (SRL)	9
4.1 Accredited SRL	9
5. CD4 machines	34
5.1 CD4 tests conducted	56,767
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	97.4
6.2. Average Discordance (%)	0.00
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	76

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	7288,843
2. HIV testing coverage (%)	>=95
3. HIV sero-positivity (%) among tested	0.01
4. HIV Positive PW (old + new detections)	1,944
4.1 On life-long ART	2,096
5. Live births among HIV positive PW	1,233
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	1,275
6.1 Babies confirmed HIV Positive (6 week- 6 month)	6
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	882
7.2 Babies confirmed HIV positive at 18 months	43
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	65
9. HIV positive babies initiated on ART	58

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	60.6
2. Sero-positivity (%) among tested	0.02
3. Put on treatment	852

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	26,128	13,485	22,861	5,365	29,130	-	9,199	9,001	1,15,169
	Quarter 2	28,286	15,283	24,500	5,758	48,624	3,569	9,553	9,167	1,44,740
	Quarter 3	31,049	16,279	25,663	6,121	48,500	359	9,295	8,870	1,46,136
	Quarter 4	34,586	18,107	28,607	7,385	109,684	509	10,371	9,515	2,18,764
Tested for TB	Quarter 1	590	439	725	144	761	-	48	26	2,733
	Quarter 2	612	420	620	104	3,427	35	65	65	5,348
	Quarter 3	721	466	591	137	4,747	6	70	50	6,788
	Quarter 4	742	408	609	88	7,694	1	83	28	9,653
Diagnosed with TB	Quarter 1	13	6	22	-	26	-	4	1	72
	Quarter 2	7	12	19	3	65	-	7	1	114
	Quarter 3	9	7	8	4	86	-	18	1	133
	Quarter 4	5	4	9	1	149	-	6	1	175
Initiated on TB treatment	Quarter 1	13	6	20	-	26	-	4	1	70
	Quarter 2	5	12	20	3	65	-	7	-	112
	Quarter 3	7	7	7	4	78	-	18	1	122
	Quarter 4	5	3	9	1	151	-	6	1	176

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	95,591	95,585	2,361	2,333	168	1,293		
May - 24	95,301	95,269	2,575	2,555	180	1,405		
Jun - 24	93,192	93,131	2,389	2,359	149	1,674		
Jul - 24	93,192	93,131	2,389	2,359	149	1,674		
Aug - 24	96,391	96,391	2,652	2,599	150	1,444		
Sep - 24	95,532	95,057	2,757	2,706	155	1,469		
Oct - 24	97,533	97,501	2,661	2,609	141	1,168		
Nov - 24	97,109	97,109	2,703	2,661	131	1,078		
Dec - 24	96,399	96,393	2,858	2,855	138	1,144		
Jan - 25	97,526	94,015	3,096	3,088	172	1,112		
Feb - 25	93,924	93,917	2,741	2,737	151	987		
Mar - 25	1,01,037	1,00,478	2,793	2,765	159	1,168		
April 2024- March 2025							3,161	3,010

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Uttar Pradesh
	Rank	**17**
Sl. No.	Obtained Score [%]	64.6
	Obtained Score [N]	122
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	76
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	85
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	21
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	100
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	54
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	100
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	81
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	98
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	75
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	79
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	17
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	162
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	107
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	66
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	84
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	86
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	103
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	111
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	46
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	38
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	96
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	87
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	5
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	6
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	97
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	0
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	2
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	14
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	30
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	100
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	67
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	81
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	09-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	04-10-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	04-10-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	89
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	86
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	90

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

UTTARAKHAND



UTTARAKHAND

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	4.12
2. IMR	-	-	2.22
3. Adult (15-49 yrs) HIV Prevalence (%)	0.15	0.11	0.13
4. People living with HIV	7,626	5,276	12,902
5. ART coverage (%)	61.16	56.42	59.43
6. Children living with HIV	178	152	330
7. Annual new HIV infections	321	211	532
8. Annual AIDS-related deaths (ARD)	62	56	119
9. Change in annual new HIV infections since 2010 (%)	-50.77	-47.12	-49.38
10. Change in annual ARD since 2010 (%)	-65.56	-27.27	-53.70
11. EVTH need	-	84	84

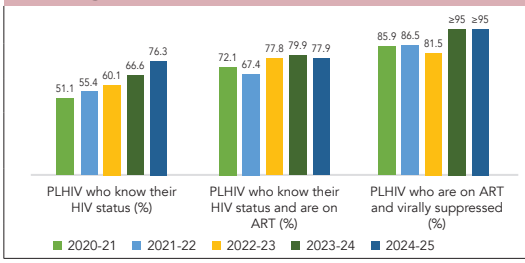
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	7,213	99.80	-	0.80
2. Men who have sex with men	2,883	97.60	-	1.40
3. Injecting Drug Users	3,835	-	88.50	9.20
4. Hijra/Transgender People	321	-	-	-
5. Migrants	90,000	-	-	-
6. Truckers	40,000	-	-	0.00
7. Prison inmates	23,580	66.70	-	1.38

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	35.90	24.50	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	27.10	21.50	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	80.70	70.30	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	72.40	65.80	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	6.30	0.00	-
5.1 Condom use during last higher-risk intercourse (%)	61.00	NA	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	13.17	0.00	-
6.1 Condom use during last higher-risk intercourse (%)	59.72	NA	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	7,626	5,276	12,902
2. PLHIV who know their HIV Status	6,271	3,535	9,842
3. PLHIV who know their HIV status and are on ART	4,664	2,977	7,668
4. PLHIV who are on ART and tested for their viral load	2,876	1,927	4,819
4.1 PLHIV who are virally suppressed	2,745	1,880	4,641

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	2,349
2. Colleges with operational Red Ribbon Clubs (RRC)	100
3. Persons trained under mainstreaming	40
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				27
	Male	Female	TG	Total
2. Clients managed				84,563
3. RPR Tests conducted at DSRC	6,462	18,810	17	25,289
4. Syphilis seropositivity (%) at DSRC	2.69	0.32	0.00	0.93

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	37
2. OST centres (Excluding Satellite OST centres)	8

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	7,213
2. Coverage (%)	≥95
3. Condoms distributed	18,94,192
4. Tested for HIV (April 2024-September 2024)	6,108
4.1. HIV sero-positive (%)	0.15
4.1.1. Linked to ART	9
5. Tested for HIV (October 2024 -March 2025)	7,024
5.1. HIV sero-positive (%)	0.09
5.1.1. Linked to ART	5
6. Clinic Visits	25,901
7. STI/RTI treated	955
8. Presumptive treatment	908

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	2,883
2. Coverage (%)	≥95
3. Condoms distributed	7,44,183
4. Tested for HIV (April 2024-September 2024)	2,524
4.1. HIV sero-positive (%)	0.91
4.1.1. Linked to ART	22
5. Tested for HIV (October 2024 -March 2025)	2,814
5.1. HIV sero-positive (%)	0.39
5.1.1. Linked to ART	10
6. Clinic Visits	11,450
7. STI/RTI treated	281
8. Presumptive treatment	314

D. Injecting drug users

Indicator	2024-25
1. Estimated size	3,835
2. Coverage (%)	≥95
3. Needles distributed	20,58,118
4. Syringes distributed	10,29,073
5. On OST	727
6. Tested for HIV (April 2024-September 2024)	2,513
6.1. HIV sero-positive (%)	2.23
6.1.1 Linked to ART	50
7. Tested for HIV (October 2023 -March 2024)	2,782
7.1. HIV sero-positive (%)	1.26
7.1.1. Linked to ART	27

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	321
2. Coverage (%)	≥95
3. Condoms distributed	78,263
4. Tested for HIV (April 2024-September 2024)	267
4.1. HIV sero-positive (%)	0.75
4.1.1. Linked to ART	1
5. Tested for HIV (October 2024 -March 2025)	257
5.1. HIV sero-positive (%)	0.78
5.1.1. Put on ART	2
6. Clinic Visits	1,166
7. STI/RTI treated	39
8. Presumptive treatment	30

F. Migrants

Indicator	2024-25
1. Estimated size	90,000
2. Coverage (%)	≥95
3. Tested for HIV	30,207
3.1 HIV sero-positive (%)	0.14
3.2. Linked to ART	30

G. Truckers

Indicator	2024-25
1. Estimated size	40,000
2. Coverage (%)	≥95
3. Tested for HIV	8,359
3.1. HIV sero-positive (%)	0.12
3.2. On ART	2

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	11
2. Prisons covered under programme	10
3. Total inmates admitted in prisons	23,580
4. Inmates Covered in prisons (%)	54.8
5. Tested for HIV in prisons	12,924
5.1. HIV sero-positive (%)	1.14
5.2. On ART (%)	93.9
6. Total OCS	13
7. OCS covered under programme	19
8. Total inmates admitted in OCS	150
9. Inmates Covered in OCS (%)	≥95
10.Tested for HIV in OCS	403
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	-
2. Vulnerable population covered	-
3. Tested for HIV	-
3.1. HIV sero-positive (%)	-
3.2. Linked to ART (%)	-

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	8
1.1. OSTC in Public Health Settings	7
1.2. OSTC in NGO Settings	1
1.3 No. of Satellite OST Centres	-
2. IDU on OST	727

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	45
2. Sampoorna Suraksha Kendras	6

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	2,01,999	1,45,419	602	3,48,020
1.1 HIV Positives	1,126	293	2	1,421
1.2 HIV sero-positivity (%)	0.56	0.20	0.33	0.41
2. Contacts of HIV positive people tested#				2,815
2.1 HIV Positives*				166
2.2 HIV sero-positivity (%)				5.90
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				1,455

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	13
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	-
2.2 Centre of Excellent (Paediatric)	-
3. Link ART Centres	16
4. Care Support Centres	2

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	1,126	349	2	1,477
2. New PLHIV Registered at ART center	1,178	420	2	1,600
2.1 Initiated on ART	1,131	377	2	1,510
3. PLHIV alive and on ART#	4,664	2,977	27	7,668
4. 12 months retention on ART (%)				92.3
5. Lost to follow-up cases	1,276	386	8	1,670

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	0
1.1 Accredited Viral load laboratories (out of 64 VL labs)	0
2. Viral load tests conducted	5,268
2.1. Suppressed test result (%)	93.38
3. National reference laboratories (NRL)	0
3.1 Accredited NRL	0
4. State reference laboratories (SRL)	1
4.1 Accredited SRL	1
5. CD4 machines	4
5.1 CD4 tests conducted	4,664
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	82.6
6.2. Average Discordance (%)	1.27
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	5

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	2,12,399
2. HIV testing coverage (%)	71.5
3. HIV sero-positivity (%) among tested	0.04
4. HIV Positive PW (old + new detections)	120
4.1 On life-long ART	99
5. Live births among HIV positive PW	41
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	52
6.1 Babies confirmed HIV Positive (6 week- 6 month)	0
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	14
7.2 Babies confirmed HIV positive at 18 months	1
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	2
9. HIV positive babies initiated on ART	1

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	84.3
2. Sero-positivity (%) among tested	0.04
3. Put on treatment	60

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	No
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	5,967	2,594	2,225	271	2,192	145	25,310	11,121	49,825
	Quarter 2	6,408	2,687	2,520	250	2,913	14	21,492	10,971	47,255
	Quarter 3	6,362	2,777	2,485	274	2,897	27	21,287	11,262	47,371
	Quarter 4	6,693	2,848	2,816	290	6,162	38	21,386	10,692	50,925
Tested for TB	Quarter 1	132	62	59	21	40	98	162	3	577
	Quarter 2	141	82	68	20	64	7	158	4	544
	Quarter 3	192	111	106	22	327	6	348	10	1,122
	Quarter 4	327	105	115	17	73	-	346	13	996
Diagnosed with TB	Quarter 1	1	1	1	-	4	1	20	2	30
	Quarter 2	-	1	3	-	4	2	14	-	24
	Quarter 3	4	1	3	-	8	-	15	-	31
	Quarter 4	4	-	2	-	4	-	18	-	28
Initiated on TB treatment	Quarter 1	1	1	1	-	4	1	13	2	23
	Quarter 2	-	1	3	-	4	2	12	-	22
	Quarter 3	3	1	3	-	8	-	15	-	30
	Quarter 4	5	-	2	-	4	-	11	-	22

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	4,186	3,782	111	34	16	21		
May - 24	3,562	3,223	67	41	21	17		
Jun - 24	3,345	2,863	90	42	21	12		
Jul - 24	3,345	2,863	90	42	21	12		
Aug - 24	3,467	3,049	85	27	16	22		
Sep - 24	3,755	3,395	111	49	13	99		
Oct - 24	3,632	3,272	103	34	13	27		
Nov - 24	3,544	3,115	154	41	20	6		
Dec - 24	3,880	3,519	130	42	14	25		
Jan - 25	3,851	3,451	135	63	23	23		
Feb - 25	3,513	3,107	174	25	20	36		
Mar - 25	3,436	2,963	128	18	19	38		
April 2024- March 2025							189	156

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	Uttarakhand
	Rank	**24**
Sl. No.	Obtained Score [%]	57.1
	Obtained Score [N]	108
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	76
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	78
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	25
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Not Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	97
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	89
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	110
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	82
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	54
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	83
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	80
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	34
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	95
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	69
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	82
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	82
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	43
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	127
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	70
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	47
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	51
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	90
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	74
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	13
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	4
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	83
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	100
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	54
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	42
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	100
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	33
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	92
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	05-07-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	06-02-2025
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	08-02-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	90
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	100
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	146

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

WEST BENGAL



WEST BENGAL

1. Status of HIV/AIDS Epidemic

A. Epidemic Estimates (2024)

Indicator	Male	Female	Total
1. IPR	-	-	2.42
2. IMR	-	-	1.37
3. Adult (15-49 yrs) HIV Prevalence (%)	0.09	0.08	0.08
4. People living with HIV	43,475	34,924	78,399
5. ART coverage (%)	85.52	72.07	80.05
6. Children living with HIV	1,009	958	1,967
7. Annual new HIV infections	1,001	898	1,899
8. Annual AIDS-related deaths (ARD)	212	373	585
9. Change in annual new HIV infections since 2010 (%)	-56.21	-55.50	-55.89
10. Change in annual ARD since 2010 (%)	-92.79	-82.98	-88.60
11. EVTH need	-	509	509

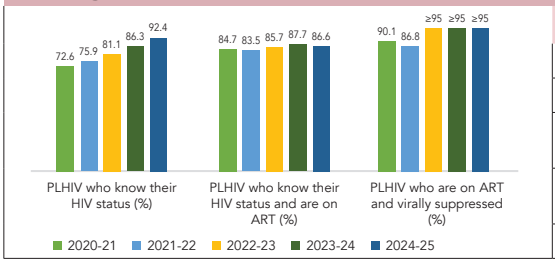
B. High risk population size (2020-23), safe practices (2023/2024) and Sero - prevalence (2023/2024)

Population Group	Estimates Size	Condom Use (%)	New Needle/Syringe use (%)	HIV Sero - Prevalence (%)
1. Female Sex Workers	20,452	98.80	-	1.22
2. Men who have sex with men	3,532	100.00	-	5.00
3. Injecting Drug Users	2,334	-	97.20	4.86
4. Hijra/Transgender People	5,134	-	-	8.27
5. Migrants	30,000	85.40	20.00	1.60
6. Truckers	60,000	88.90	71.60	1.73
7. Prison inmates	1,44,282	44.70	65.60	0.42

C. HIV/AIDS related knowledge, stigma and high-risk behaviour in general population (2019-21)

Indicator	Male	Female	Total
1. Adults (15-49 yrs) with comprehensive knowledge about HIV/AIDS (%)	15.50	18.50	-
2. Youth (15-24 yrs) with comprehensive knowledge about HIV/AIDS (%)	14.30	17.40	-
3. Adults willing to care for a relative with HIV/AIDS in own home (%)	59.30	66.50	-
4. Adults willing to buy fresh vegetables from a shopkeeper or vendor who has HIV/AIDS (%)	56.70	64.20	-
5. Sexually active adults (15-49 yrs) having higher-risk sexual behaviour (%)	1.70	1.00	-
5.1 Condom use during last higher-risk intercourse (%)	63.60	52.40	-
6. Sexually active youth (15-24 yrs) having higher-risk sexual behaviour (%)	3.55	1.52	-
6.1 Condom use during last higher-risk intercourse (%)	67.86	62.50	-

2. Progress on 95-95-95 (2024-25)



Indicators	Male	Female	Total*
1. Estimated PLHIV size (2024)	43,475	34,924	78,399
2. PLHIV who know their HIV Status	43,485	28,448	72,456
3. PLHIV who know their HIV status and are on ART	37,181	25,168	62,759
4. PLHIV who are on ART and tested for their viral load	27,755	19,533	47,589
4.1 PLHIV who are virally suppressed	27,576	19,354	47,228

* Including of H/TG PLHIV

3. Prevention of new HIV infections among general population

A. Information, Education, Communication, Youth and Mainstreaming

Indicator	2024-25
1. Schools with operational Adolescent Education Program (AEP)	2,950
2. Colleges with operational Red Ribbon Clubs (RRC)	746
3. Persons trained under mainstreaming	617
4. No. of calls received at helpline	

B. Sexually Transmitted Infections (STI)/Reproductive Tract Infections (RTI) Management under NACP

Indicator				2024-25
1. NACO Supported Designated STI/RTI Clinics (DSRC)				48
	Male	Female	TG	Total
2. Clients managed				3,96,214
3. RPR Tests conducted at DSRC	77,257	1,15,622	715	1,93,594
4. Syphilis seropositivity (%) at DSRC	3.19	0.68	13.43	1.73

4. Prevention of new HIV infections among high-risk group and bridge population

A. Targeted Interventions (TI) and Opioid Substitution Therapy (OST)

Indicator	2024-25
1. Targeted Interventions	44
2. OST centres (Excluding Satellite OST centres)	8

B. Female Sex Workers

Indicator	2024-25
1. Estimated size	20,452
2. Coverage (%)	≥95
3. Condoms distributed	63,62,000
4. Tested for HIV (April 2024-September 2024)	15,081
4.1. HIV sero-positive (%)	0.14
4.1.1. Linked to ART	21
5. Tested for HIV (October 2024 -March 2025)	17,278
5.1. HIV sero-positive (%)	0.13
5.1.1. Linked to ART	21
6. Clinic Visits	65,340
7. STI/RTI treated	720
8. Presumptive treatment	2,889

C. Men who have sex with men

Indicator	2024-25
1. Estimated size	3,532
2. Coverage (%)	81.82
3. Condoms distributed	4,09,530
4. Tested for HIV (April 2024-September 2024)	2,124
4.1. HIV sero-positive (%)	1.41
4.1.1. Linked to ART	29
5. Tested for HIV (October 2024 -March 2025)	2,464
5.1. HIV sero-positive (%)	1.30
5.1.1. Linked to ART	30
6. Clinic Visits	9,026
7. STI/RTI treated	61
8. Presumptive treatment	657

D. Injecting drug users

Indicator	2024-25
1. Estimated size	2,334
2. Coverage (%)	83.16
3. Needles distributed	12,37,001
4. Syringes distributed	6,19,511
5. On OST	1,098
6. Tested for HIV (April 2024-September 2024)	1,723
6.1. HIV sero-positive (%)	1.63
6.1.1 Linked to ART	24
7. Tested for HIV (October 2023 -March 2024)	1,757
7.1. HIV sero-positive (%)	0.97
7.1.1. Linked to ART	20

E. Hijra/Transgender people

Indicator	2024-25
1. Estimated size	5,134
2. Coverage (%)	59.46
3. Condoms distributed	3,34,524
4. Tested for HIV (April 2024-September 2024)	2,369
4.1. HIV sero-positive (%)	0.59
4.1.1. Linked to ART	11
5. Tested for HIV (October 2024 -March 2025)	2,430
5.1. HIV sero-positive (%)	0.37
5.1.1. Put on ART	9
6. Clinic Visits	9,910
7. STI/RTI treated	192
8. Presumptive treatment	493

F. Migrants

Indicator	2024-25
1. Estimated size	30,000
2. Coverage (%)	≥95
3. Tested for HIV	11,246
3.1 HIV sero-positive (%)	0.12
3.2. Linked to ART	14

G. Truckers

Indicator	2024-25
1. Estimated size	60,000
2. Coverage (%)	83.33
3. Tested for HIV	18,175
3.1. HIV sero-positive (%)	0.12
3.2. On ART	17

H. Inmates in prisons and other closed settings (OCS)

Indicator	2024-25
1. Total prisons	60
2. Prisons covered under programme	60
3. Total inmates admitted in prisons	1,44,282
4. Inmates Covered in prisons (%)	52.4
5. Tested for HIV in prisons	75,575
5.1. HIV sero-positive (%)	0.23
5.2. On ART (%)	85.5
6. Total OCS	50
7. OCS covered under programme	37
8. Total inmates admitted in OCS	500
9. Inmates Covered in OCS (%)	>95
10.Tested for HIV in OCS	1,075
10.1. HIV sero-positive (%)	0.00
10.2. On ART (%)	0.0

I. Link Worker Scheme

Indicator	2024-25
1. Districts covered under scheme	11
2. Vulnerable population covered	1,34,078
3. Tested for HIV	1,01,001
3.1. HIV sero-positive (%)	0.37
3.2. Linked to ART (%)	>=95

J. Opioid Substitution Therapy

Indicator	2024-25
1. OST Centres	8
1.1. OSTC in Public Health Settings	7
1.2. OSTC in NGO Settings	1
1.3 No. of Satellite OST Centres	3
2. IDU on OST	1,098

5. Early detection of HIV infected people

A. HIV counselling and testing services (HCTS)

Indicator	2024-25
1. HCTC confirmatory facilities	314
2. Sampoorna Suraksha Kendras	13

B. HIV testing among vulnerable population (excluding pregnant women)

Indicator	2024-25			
	Male	Female	TG	Total
1. Tested for HIV	14,43,170	11,18,866	10,157	25,72,193
1.1 HIV Positives	5,041	1,694	273	7,008
1.2 HIV sero-positivity (%)	0.35	0.15	2.69	0.27
2. Contacts of HIV positive people tested#				22,396
2.1 HIV Positives*				1,369
2.2 HIV sero-positivity (%)				6.11
3. No. of contacts with 'at-risk' population through 'Sampoorna Suraksha'**				15,167

Subset of total HIV Testing (S.No.1)
* HIV - Positives under indicator '2.1' is a subset of indicator '1.1'
** Subset of total HIV Testing (S.No.1)

6. Initiation and retention on ART of HIV infected people

A. Treatment facilities

Indicator	2024-25
1. ART Centres	26
2. Centre of Excellence	
2.1. Centre of Excellence (Adult)	1
2.2 Centre of Excellent (Paediatric)	1
3. Link ART Centres	52
4. Care Support Centres	13

B. Treatment uptake

Indicator	2024-25			
	Male	Female	TG	Total
1. HIV positive cases diagnosed (At ICTC)	5,041	1,934	273	7,248
2. New PLHIV Registered at ART center	4,986	1,881	62	6,929
2.1 Initiated on ART	4,777	1,798	62	6,637
3. PLHIV alive and on ART#	37,181	25,168	410	62,759
4. 12 months retention on ART (%)				96.0
5. Lost to follow-up cases	6,884	3,673	98	10,655

Including private sector

7. Viral Suppression and laboratories

A. Laboratory facilities and service uptake

Indicator	2024-25
1. Viral load laboratories (programme and non-programme labs)	3
1.1 Accredited Viral load laboratories (out of 64 VL labs)	2
2. Viral load tests conducted	55,883
2.1. Suppressed test result (%)	96.75
3. National reference laboratories (NRL)	2
3.1 Accredited NRL	2
4. State reference laboratories (SRL)	5
4.1 Accredited SRL	5
5. CD4 machines	19
5.1 CD4 tests conducted	30,596
6. External Quality Assurance of ICTC	
6.1 Average Participation (%)	97.8
6.2. Average Discordance (%)	0.17
7. "Certificate of Excellence" by NACO	
7.1 No. of ICTCs received "Certificate of Excellence"	48

8. Elimination of mother to child transmission of HIV & Syphilis

A. HIV

Indicator	2024-25
1. Estimated pregnant women (PW)	15,55,425
2. HIV testing coverage (%)	79.6
3. HIV sero-positivity (%) among tested	0.02
4. HIV Positive PW (old + new detections)	511
4.1 On life-long ART	518
5. Live births among HIV positive PW	429
5.1 Babies given ARV Prophylaxis (%)	>=95
6. Babies tested HIV (6 week- 6 month)	370
6.1 Babies confirmed HIV Positive (6 week- 6 month)	1
7. HIV testing among exposed babies at 18 months	
7.1 HIV exposed babies tested at 18 months	283
7.2 Babies confirmed HIV positive at 18 months	14
8. Total Babies Identified HIV Positive (6 weeks to upto 18 Months)	25
9. HIV positive babies initiated on ART	23

B. Syphilis

Indicator	2024-25
1. Syphilis testing coverage (%)	>=95
2. Sero-positivity (%) among tested	0.05
3. Put on treatment	803

9. Elimination of HIV/AIDS related Stigma and Discrimination

Indicator	2024-25
1. State rules notified for HIV/AIDS Prevention and Control Act (2017)	Yes
2. State designated/appointed ombudsman	Yes

10. HIV-TB Co-morbidities

A. HRG and Bridge Population

Indicator 2024-25

	Quarter	FSW	MSM	IDU	TG	Prison	OCS	Migrants	Truckers	Total
Screened for TB	Quarter 1	14,337	1,849	1,337	2,263	4,366	58	2,798	9,887	36,895
	Quarter 2	14,728	2,308	1,437	2,793	17,025	428	1,726	9,920	50,365
	Quarter 3	14,653	2,002	1,454	2,498	18,046	208	2,973	8,510	50,344
	Quarter 4	16,695	2,375	1,641	2,742	32,734	363	3,840	7,002	67,392
Tested for TB	Quarter 1	27	16	6	2	77	-	234	2	364
	Quarter 2	112	3	3	6	1,080	-	503	-	1,707
	Quarter 3	148	20	3	1	535	-	207	4	918
	Quarter 4	354	23	37	7	1,249	-	733	1	2,404
Diagnosed with TB	Quarter 1	-	1	1	1	5	-	-	-	8
	Quarter 2	-	-	-	2	10	-	-	-	12
	Quarter 3	1	-	1	-	10	-	-	1	13
	Quarter 4	1	-	-	-	24	-	-	-	25
Initiated on TB treatment	Quarter 1	-	1	1	-	5	-	-	-	7
	Quarter 2	-	-	-	1	10	-	-	-	11
	Quarter 3	1	-	-	-	10	-	-	-	11
	Quarter 4	1	-	-	-	24	-	-	-	25

B. HIV-TB Coinfected at ART Centre

Indicator 2024-25

Moths	PLHIV attending ART Centre	PLHIV underwent 4S screening	PLHIV with presumptive TB	PLHIV tested for TB	PLHIV diagnosed with TB	PLHIV initiated on IPT	Co-Infected enrolled at ARTc	Co-infected initiated on ART
Apr - 24	31,130	30,473	466	455	46	438		
May - 24	29,960	28,993	386	376	36	416		
Jun - 24	30,706	29,804	306	298	41	361		
Jul - 24	30,706	29,804	306	298	41	361		
Aug - 24	34,965	34,263	374	369	42	563		
Sep - 24	35,823	34,932	384	376	49	788		
Oct - 24	23,637	22,941	351	340	42	263		
Nov - 24	34,340	33,514	369	365	49	357		
Dec - 24	36,463	35,437	433	428	55	460		
Jan - 25	35,145	34,396	379	377	51	277		
Feb - 25	30,488	29,730	386	382	28	285		
Mar - 25	33,633	32,911	399	394	38	503		
April 2024- March 2025							1,056	978

NATIONAL AIDS & STD CONTROL PROGRAMME
STATE/UT SCORECARD, FY 2024-25

	States/UTs	West Bengal
	Rank	**15**
Sl. No.	Obtained Score [%]	66.7
	Obtained Score [N]	126
	Maximum Score [N]	189
	Key Indicators	**Percentage**
1	First 95 [G: ≥95%, Y: 80-94%, R:<80%]	92
2	Second 95 [G: ≥95%, Y: 80-94%, R:<80%]	87
3	Third 95 [G: ≥95%, Y: 80-94%, R:<80%]	>=95
4	Average Frequency of Social Media updates [G: ≥ 45, Y:40- 44, R<40 indigenous posts] in a quarter	87
5	Status of AEP integration in state school curriculum [G:Yes, R:No]	Yes
6	Status of SCA [G: At least one meeting held since 2020, R: No meeting held]	No Meeting held
7	Status of state rules [G: Notified, R: Not notified]	Notified
8	Status of ombudsman [G: Appointed, R:Not Appointed]	Appointed
9	TI/LWS onboarding [G:≥95%, Y: 90-<95%, R:<90%]	95
10	OST onboarding [G:≥95%, Y:90-<95%, R:<90%]	100
11	Coverage of HRG against estimates [G:≥90%, Y:90-80%, R:<80%]	88
12	HIV testing among HRG [G:≥95%, Y:90-<95%, R:<90%]	84
13	HIV testing among Prisoners [G:≥95%, Y:≥90% to <95%, R:<90%]	49
14	Clinic visit of HRGs at TI-Clinics [G:≥90%, Y:75-89%, R:<75%]	81
15	HRGs screened for Syphilis [G:≥90%, Y:75-89%, R:<75%]	84
16	IDU on OST [G: ≥50%, Y: 30% to <50%, R:<30%]	113
17	Status of Fund released to TI (G=Yes, R=No)	Yes
18	HIV testing against Target for clients other than pregnant women [G: ≥95%, Y: 80-94%, R:<80% or >150%]	172
19	HIV testing against Target amongst Pregnant Women [G: ≥95%, Y: 85- 94%, R:<85%]	76
20	Pregnant women screened for Syphilis [G: ≥95%, Y: 85-94%, R:<85%]	94
21	Treatment provided to Syphilis reactive Pregnant Women [G: ≥95%, Y: 80-94%, R:<80%]	97
22	Index testing among eligible contacts [G:≥95%, Y: 80-94%, R:<80%]*	59
23	6 weeks - <2 months EID testing against live birth in the reporting period [G: ≥95%, Y: 80-94%, R:<80% & >120]	86
24	Client managed at DSRC against target [G: ≥90%, Y: 75-89%, R:<75%]	56
25	STI attendees screened for HIV [G: >75%, Y: 50-75%, R:<50%]	49
26	STI attendees screened for Syphilis [G: >75%, Y: 50-75%, R:<50%]	68
27	Positive Pregnant Women(PPW) tested for Viral Load out of those eligible for Viral Load test in FY 2024-25 [G≥94%, Y is >90 to <94%, R≤90%]	91
28	Viral Load test conducted in FY 2024-25 [G≥94%, Y is >80 to <94%, R≤80%]	89
29	LFU rate among new ART initiation FY 2024-25 [G≤2%, Y is >2 to <5%, R ≥5%]	6
30	PLHIV who died out of those initiated on ART in FY 2024-25 [G≤1%, Y is >1 to <3 %, R≥3%]	4
31	Accreditation- HIV Reference lab- [G:100%, Y: 80-99%, R:<80%]	100
32	Average participation and performance of ICTCs [G: ≥95%, Y: 85-94, R:<85%]	98
33	Abstracts submitted/selected from studies conducted in FY22-23 [G:100%, Y: >25 to <100%, R: ≤25%]	100
34	Ongoing studies from FY23-24 [G:100%, Y: >25 to <100%, R: ≤25%]	0
35	Submission of research proposal from FY24-25 to NACO [G:100%, Y: >25 to <100%, R: ≤25%]	100
36	Number of secondary data analysis topics/reports submitted by SACS in FY2024-25 [G:2, Y: 1 , R: Not submitted]	0
37	Districts conducted DAPCC meetings under the Chairpersonship of DM/DC every quarter and reported [G:>90%, Y: 50 to 90%, R: <50%]	21
38	Districts conducted monthly program review meeting with NACP facilities under the Chairmanship of DACO on every month and shared MoM to SACS [G:>95%, Y: 85 to 95%, R: <85%]	36
39	Districts reports received by NACO from SACS [G: ≥75%, Y: 50 to 75%, R: <50%]	91
40	Quarterly review meetings conducted by the SACS with DISHA Officials in the FY [G:>95%, Y: 75 to 95%, R: <75%]	100
41	Expenditure with respect to funds available during FY 2023-24 [G:>75%, Y-70-75%, R-<70%]	75
42	Date of Submission of Provisional Utilization Certificate (UC) in GFR 12A for the FY 2023-24 [G- by 30 April, Y-31 May, R- after 31 May]	06-05-2024
43	Date of Submission of audited UC in GFR 12A for the FY 2023-24 [G- by 30 June, Y-30 September, R- After 30 September]	29-08-2024
44	Date of Submission of EC/GB ratification for approval of Expenditure incurred during FY 2022-23 [G- by 30 September, Y-31 December, R- After 31 December]	04-09-2024
45	Timely submission of ARV, BSD and STI reports [G:>95%, Y:90% - 95%, R: <90%]	89
46	Timely submission of TI reports (OST Drugs) [G:90% or more, Y:≥75% to <90%, R:<75%]	71
47	Compatibility between SOCH entry & Excel reports [G: 90% or more, Y:≥75% to <90%, R: <75%]	89

Weightage Details			
Green=3 Marks	Yellow=2 Marks	Red=1 Mark	No Colour=Not Applicable

Weight points	Indicators Sl. No.
3	1,22,29
2	2,3,9,10,21,27,28,33,45,47
1	4-8,11-20, 23-26,30-32, 34-44,46

HIV testing against target-at risk (Sl. No. 19): over-achievements above 120% are marked in red

"Sankalak - Status of National AIDS & STD Response" is the evidence-based flagship report of the National AIDS & STD Control Programme (NACP), outlining the efforts toward achieving the 2030 goal of ending AIDS as a public health threat. It provides comprehensive programmatic and epidemiological data at both the national and state/union territory levels under NACP. This sixth edition of 'Sankalak' presents the progress made across the prevention-detection-treatment spectrum for the financial year 2024-25.

Electronic Version II for Sankalak 7th edition

NACO
National AIDS Control Organisation
India's response to HIV & Sexually Transmitted Infections
Ministry of Health & Family Welfare, Government of India
www.naco.gov.in