

TARGETTED INTERVENTION PROGRAM(TIP) AMONG MIGRANTS

Haryana is a low prevalence but vulnerable state for HIV infection and the epidemic continues to be concentrated in the state. The geographic distribution of the HIV epidemic in the state is varied and is based on the prevalence of HIV in low and high-risk groups. While total estimated HIV positive cases in Haryana is 42000. On the other hand, total AIDS cases up to Feb., 2013 are 2658. In Rohtak district it is 590. In the process, Haryana State AIDS Control Society Panchkula has continued supporting for implementing Targetted Intervention Project (TIP) among Migrants at Rohtak.

For the purpose of HIV and Migration, people who seek better livelihood and



move from their place of origin in rural areas (source) to a town or city (destination), with the intention of setting temporarily or semi-permanently and return back to their origin for up to 3-6 months. TIP is being implemented having goal to prevent the new infection amongst identified Migrants of Rohtak

through targeted intervention and provide necessary linkages with care & support services to those who are found HIV positive. Main objectives were to provide information on HIV/AIDS, STIs, safe sexual practices to the Migrants and their partners through Inter personal communication; To promote usage of condoms to ensure safe sexual practices among Migrants; To provide quality STI treatment to identified Migrants with one of the STI symptoms; To create enabling environment in order to facilitate sustained behavior change. Main strategies adopted were Behavior Change Communication; STI Control; Condom Promotion; Linkage with the HIV services; Enabling Environment. Main activities thus performed were Out Reach, STI management through health camps; Referral & Linkages to ICTC, DOTS, ART, CSC; Condom promotion through social marketing, Community mobilization through nukkar natak and enabling environment through advocacy.

Outreach activities by Volunteer Peer leaders under guidance & supervision of ORWs are being practiced. Registration of the target population is being done.



Meeting at Congregation points & DIC level are regularly held. Behavior Change Communication provides communication aimed at achieving the objectives of the project. Information that is putting influence on behaviour change has been made available through standard activities such as one to one, one to groups, peer education,



mid media, DIC etc. Drop-in-centre has been made functional on strategic locations in project area to provide them a place to take rest, recreation through indoor games like Ludo, Caram etc., counseling and information on HIV/AIDS, services and facility points from where they can have access of testing, counseling, condoms etc. IEC material has been displayed and made available in leaflet form. IEC material as printed and developed by NACO/HSACS has been procured and being distributed in the events wherever required In context of service delivery, service of health camp at their doorstep, STI treatment, DIC, Counselling and Condom through social marketing and education on correct and consistent use of condom. Under Referral & linkages head, TI is providing referral to ICTC, DOTS, ART, Surksha Clinic for counseling & testing with linkage of found positive people. Advocacy with key stakeholders is regularly done as per need.