

HIV AIDS Act 2017

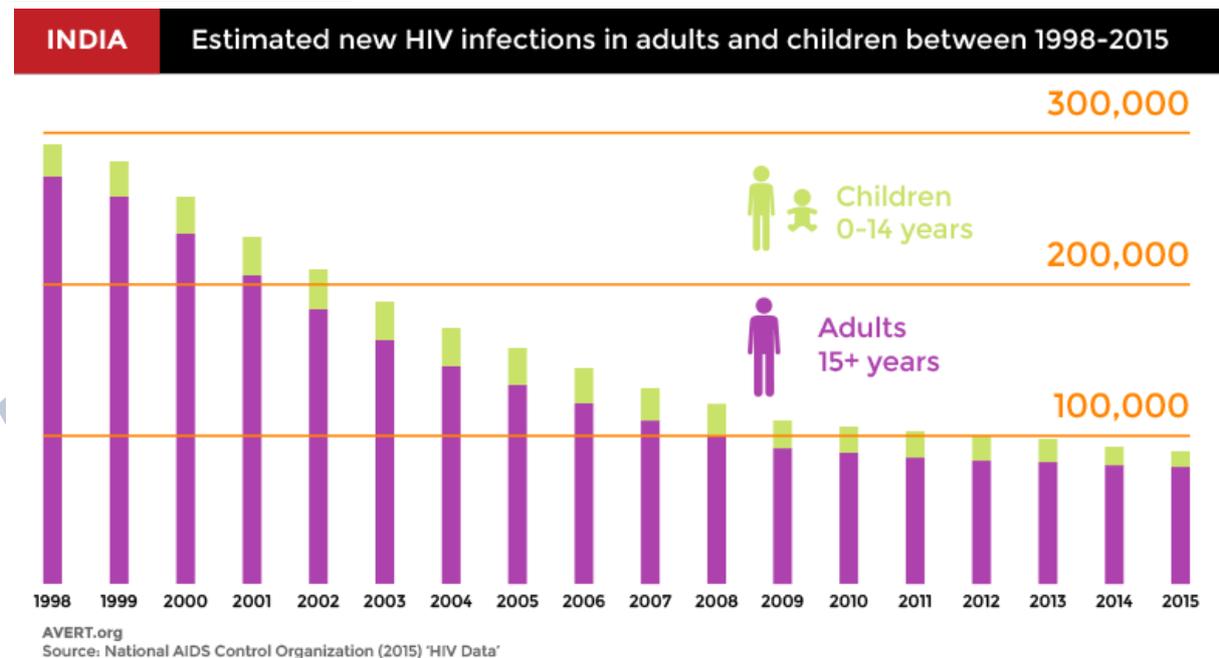
GS 2, Mains: Government policies and interventions for development in various sectors and issues arising out of their design and implementation, Issues relating to development and management of Social Sector/Services relating to Health.

In News: The Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (Prevention and Control) Act, 2017, came into force on September 10, 2018. It aims to prevent and control the

spread of HIV and AIDS in the country and provides for penalties for discrimination against those affected by the virus. Introduced by senior Congress leader Ghulam Nabi Azad in 2014, the Bill was passed by the Rajya Sabha on March 22, 2017, and a month later by the Lok Sabha on April 12. It received the assent of the President on April 20, 2017.



HIV and AIDS in India:



- Due to its large population size, India has the third largest HIV epidemic in the world.
- The HIV epidemic in India is driven by heterosexual sex, which accounted for 87% of new infections in 2015.
- Overall, India's HIV epidemic is slowing down, with a 32% decline in new HIV infections (80,000 in 2016), and a 54% decline in AIDS-related deaths between 2007 and 2015.
- NACO is the body responsible for formulating policy and implementing programmes for the prevention and control of the HIV epidemic in India.

Features of the Act:

- The Act prohibits discrimination or unfair treatment of HIV-infected people on any grounds. It prohibits denial or discontinuation of healthcare services, right of movement, right to reside, purchase, rent or occupy property and hold public or private office etc.
- It prohibits isolation or segregation of an HIV-positive person. Every HIV-positive person has the right to reside in a shared household and use facilities in a non-discriminatory manner.
- Under the law, no HIV-affected person can be subject to medical treatment, medical interventions or research without informed consent. Further, no HIV positive woman, who is pregnant, can be subjected to sterilisation or abortion without her consent.
- No person is compelled to disclose his HIV status except by an order of the court. A breach of violation attracts a jail sentence of up to two years or a fine of up to Rs 1 lakh, or both.
- The law makes it mandatory for state governments to appoint an Ombudsman to inquire into complaints related to the violation of the Act and the provision of health care services.

Targeted interventions in India for key affected groups:

- **Sustaining the HIV Prevention Impact among Key Populations** in the State of Andhra Pradesh, Telangana, Karnataka, Maharashtra and Tamil Nadu: This five-year project began in 2014 and targets female sex workers through 87 community based organisations across five southern states.
- **Project Sunrise:** Responsible for the expansion of HIV interventions in north eastern states with a focus on key affected populations, particularly people who inject drugs. The project began in 2016 with the central goal of getting 90% of people who use drugs who are living with HIV from this area on treatment by 2020.
- **Project NIRANTAR:** This three-year project began in 2014 and focuses on building the capacity of civil society organisations working with key affected populations in the states of Chhattisgarh, Madhya Pradesh and Odisha. Its main aim is to improve access to HIV prevention, care and treatment services, including social protection schemes, in an enabling environment.

- **Migrant Interventions at Source and Transit:** This project targets both working migrants and domestic migrants who have returned home. Returnee migrants and their spouses are reached in villages and at places of transit such as bus or train stations.
- **Link Worker Scheme:** The Link Worker Scheme works in 163 districts across 18 states to address the complex needs of rural HIV prevention, care and support. It involves highly motivated and trained community members, responsible for establishing links between the community on one hand and information, commodities and services on the other.
- **The Condom Social Marketing Programme (CSMP):** The Condom Social Marketing Programme (CSMP) aims to promote safer sex. A key focus of the programme is making condoms readily available in rural and remote areas and in high-risk places such as truck stops.

(Q) Critically analyze the features of HIV AIDS Act, 2017. How far have the governmental interventions been successful in controlling the disease in India?

Previous years UPSC mains questions:

- Does the rights of persons with Disabilities Act, 2016 ensure effective mechanism for the empowerment and inclusion of the intended beneficiaries in the society? (2017)
- Public health system has limitation in providing universal health coverage. Do you think that private sector can help in bridging the gap? What other viable alternatives do you suggest? (2015)
- Identify the Millennium Development Goals (MDGs) that are related to health. Discuss the success of the actions taken by the Government for achieving the same. (2013)