# MEMORANDUM OF UNDERSTANDING

This Memorandum Of Understanding (MOU) signed on 27<sup>th</sup> day of January, 2015

# Between

Department of Empowerment of Persons with Disabilities

Ministry of Social Justice & Empowerment

and

National AIDS Control Organization

Ministry of Health & Family Welfare

Government of India

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## Introduction

India has one of the largest numbers of people living with HIV/AIDS in the world. Given the prevalence rate of 0.27 percent, 21 lakh people are estimated to be living with HIV/AIDS in the country1. HIV is driven by a number of socio-economic factors; therefore, health interventions alone are not sufficient to address causes and consequences of the epidemic. It requires a multi-sectoral response. Mainstreaming approaches to HIV have increasingly gained ground with the realization that the non-health sector can play an important and meaningful role in reducing vulnerability to HIV and mitigating its impact on those infected and affected.

National AIDS Control Organization (NACO) under the aegis of Department of Health & Family Welfare and Department of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment are hereinafter referred to together as "the parties"

## Article 1

#### National AIDS Control Organization (NACO) 1.

- National AIDS Control Organization (NACO) is the nodal agency for coordinating response 1.1 with respect to Human Immuno Deficiency Virus (HIV) and Acquired Immuno Deficiency Syndrome (AIDS) in India. The National AIDS Control Programme (NACP) is implemented through 38 State AIDS Control Societies (SACS)/Municipal AIDS Control Societies (MACS).
- National AIDS Control Organization (NACO) has initiated several measures towards 1.2 mainstreaming and partnership. NACP places importance on mainstreaming HIV/AIDS for a) enhancing coverage and reach of information on HIV prevention and services b) reducing risk of HIV among high risk groups, vulnerable and bridge population like migrants and c) Facilitating schemes for Social protection of people infected and affected with HIV/AIDS/ widows and children infected & affected with HIV.
- District AIDS Prevention and Control Unit (DAPCU) are established in 189 A and B Category 1.3 districts across the country. DAPCUs are expected to play a pivotal role in monitoring and coordination of service delivery from the different facilities in the district. Their consistent efforts under the leadership of District Collectors is expected to result in effective HIV awareness campaigns, strengthening of referral linkages, and provision of care and treatment to the entire HIV positive in the district. DAPCUs are also expected to play a key role in integration of NACP with NHM and work closely with other line departments in the government setup to mainstream the HIV/AIDS Programs.

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<sup>1</sup> HSS NACO, 2012

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#### Article 2

## 2 DEPARTMENT OF EMPOWERMENT OF PERSONS WITH DISABILITIES

Department of Empowerment of Persons with Disabilities under Ministry of Social Justice & Empowerment facilitates empowerment of the persons with disabilities. The Persons with Disabilities (Equal opportunities, Protection of Rights and Full participation) Act, 1995 covers disabilities such as blindness, low vision, leprosy cured, hearing impairment, locomotor disability, mental retardation and mental illness. In pursuance of provisions of Persons with Disabilities (Equal opportunities, Protection of Rights and Full participation) Act, 1995, the Department has various schemes and programmes for the welfare and empowerment of persons with disabilities. Further, the National Trust for the welfare of persons with Autism, Mental Retardation, Cerebral Palsy and Multiple Disabilities Act, 1999 provides for various welfare measures for empowerment of these persons with disabilities.

## Article 3

## 3 Rationale for mainstreaming HIV

- 3.1 The total number of people living with HIV/AIDS (PLHA) in India is estimated at 21 lakh (17.2 lakh 25.3 Lakh) in 2011. National AIDS Control Organization recognizes that larger contextual factors such as poverty, urbanization, migration and social marginalization have a significant relationship with vulnerability to HIV/AIDS. The prevalence of HIV infection is primarily concentrated in high risk group like Female Sex Workers, Injecting Drug Users Men who have sex with men, and bridge population like Truckers & Migrants.
- 3.2 According to census 2011, there are 2.68 crores persons with disabilities in India who constituted 2.21 percent of total population. Out of the total population of person with disabilities, 1.50 crores are male and 1.18 crores are female. Within every social groups, class, caste, ethnicity, gender, religion, and sexual orientation people with disabilities are represented. In the context of HIV, they are also found within every high risk group such as sex workers and their clients, injecting drug users, men having sex with men, orphans etc. Persons with disabilities are therefore exposed to the same risk factors for HIV as every non-disabled person.
- 3.3 Persons with disabilities are often marginalized and have a vulnerable position in the community due to lack of access to information, low literacy rate and stigma. This enhances the vulnerability of Persons with disabilities, especially women. They are at higher risk of contracting HIV as they may be sexually exploited in home settings, as well as in institutional care.

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3.4 The Department of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment deals with person with disabilities and has initiated a number of rehabilitation schemes. The Department of Empowerment of Persons with Disabilities can play a crucial role in prevention of new infection, and in mitigation of its impact.

## Article 4

## 4 Scope of Mainstreaming HIV

The Department of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment (MSJE) can support the national goals and objectives of HIV prevention and impact mitigation by a) Enhancing coverage and reach by providing information on HIV/STI b) Referring to the Persons with Disabilities to access available services on STI, HIV/AIDS though linkages c) Help to reduce social stigma and discrimination against persons with disabilities living with HIV/AIDS and affected family and d) Propagate the message of voluntary blood donation.

Now, therefore, in consideration of the foregoing rationale and scope, the parties Department of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment and National AIDS Control Organization, Ministry of Health & Family Welfare have mutually agreed to cooperate and collaborate for the achievement of the overall goal of halting and reversing of the epidemic in the following areas

## Article 5

## 5. Objective of MOU

- 5.1 Reaching large number of persons with disabilities with information on STI/HIV/AIDS and related services.
- 5.2 Strengthen HIV and AIDS prevention initiatives for persons with disabilities.
- 5.3 Reduce social stigma and discrimination to persons with disabilities living with HIV/AIDS and their family or other affected groups.
- 5.4 Reaching out to large number of persons with disabilities with the messages on safe blood transfusion and voluntary blood donation.

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#### Article 6

## 6. KEY DELIVERABLES

- 6.1 Request States and UTs to have component of HIV/AIDS programme in various activities and scheme of their Department.
- 6.2 HIV/AIDS awareness session integrated in various institutions including Non Governmental Organizations supported by the Department of Empowerment of Persons with Disabilities.
- 6.3 Reduction of social stigma and discrimination against persons with disabilities living with HIV/AIDS and their families in collaboration with National AIDS Control Organisation.
- 6.4 Awareness sessions conducted on safe blood transfusion and 'voluntary blood donation' in all institutions supported by the Department of Empowerment of Persons with Disabilities.

## Article 7

## 7. Role of Department of Empowerment of Persons with Disabilities

#### Directive

- 7.1 Issuance of instructions to depute a nodal officer by the States/ UTs (Department dealing with disability matters) for taking initiative on HIV/AIDS prevention activity with the support of State AIDS Control Society in States and UTs.
- 7.2 Issuance of instructions for integration of HIV programme in major institutions and rehabilitation programmes of the Department of Empowerment of Persons with Disabilities.

## Trainings

7.3 Integration of HIV/AIDS as a component in ongoing training programmes under rehabilitation schemes supported by the Department of Empowerment of Persons with Disabilities.

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#### Information Education and Communication

- 7.4 Promote HIV/AIDS awareness programme for Persons with Disabilities
- 7.5 Encourage institutions including Non Governmental Organizations working for persons with disabilities or those running rehabilitation programmes to initiate HIV/AIDS awareness session.
- 7.6 Observation of World AIDS Day, Voluntary Blood Donation Day, Voluntary Blood Donor Day to strengthen national response against HIV/AIDS.

## Stigma and Discrimination Reduction

7.7 Promote enabling environment based on no stigma and discrimination against People Living with HIV (PLHA), their family, and the affected community in all rehabilitation programmes and residential facilities.

#### Documentation

- 7.8 Sharing of information on HIV/AIDS activities with National AIDS Control Organization or State AIDS Control Societies.
- 7.9 Reflection of activities on HIV/AIDS carried out by MSJE in annual report and Ministry's website.
- 7.10 Provision of sharing of web links of the Department of Empowerment of Persons with Disabilities and National AIDS Control Organization.

#### Article 8

## 8. Role of National AIDS Control Organization

- 8.1 Provide technical support and assistance to the Department of Empowerment of Persons with Disabilities, and Rehabilitation Institutions through State AIDS Control Societies for developing action plan for HIV/AIDS intervention.
- 8.2 Providing technical support for implementation of awareness programme for persons with disabilities.
- 8.3 Provide technical support for implementation of IEC activities for awareness generation and sharing prototype of IEC materials which can be replicated by the Department of Empowerment of Persons with Disabilities.

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8.4 Provide technical support and assistance in capacity building on HIV/AIDS for staff and representative of institutions affiliated with Department of Empowerment of Persons with Disabilities.

#### Article 9

## 9 EXECUTION OF MOU

- 9.1 Parties will set up a joint working group for drawing up an action plan.
- 9.2 Parties would decide the modalities for execution of the proposal contained in the MOU based on the recommendations of the Joint Working Group.
- 9.3 Parties agree to collaborate and work closely for fulfillment of objectives set in the MOU.
- 9.4 Both the parties would consult each other and review the progress for implementing objectives of this MOU on a biannual basis.
- 9.5 This MOU will be operative with effect from the 27<sup>th</sup> Day of January, 2015 and any alteration /modifications can be carried out with the consent of both parties.

The parties herein have appended their respective signatures the day and the year above stated.

SIGNED FOR AND ON BEHALF OF NATIONAL AIDS CONTROL ORGANISATION,

SHRI LOV VERMA SECRETARY, DEPARTMENT OF HEALTH & FAMILY WELFARE, MINISTRY OF HEALTH & FAMILY WELFARE,

GOVERNMENT OF INDIA

SIGNED FOR AND ON BEHALF OF DEPARTMENT OF EMPOWERMENT OF PERSONS WITH DISABILITIES,

SHRI SUDHIR BHARGAVA
SECRETARY,
DEPARTMENT OF EMPOWERMENT OF
PERSONS WITH DISABILITIES,
MINISTRY OF SOCIAL JUSTICE &
EMPOWERMENT,
GOVERNMENT OF INDIA

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# **List of Acronyms**

AIDS Acquired Immunodeficiency Syndrome

ART Antiretroviral Therapy

DALYs Disability Adjusted Life Years

DAPCU District AIDS Prevention and Control Unit

DOHFW Department of Health &Family Welfare

HIV Human Immunodeficiency Virus

HSS HIV Sentinel Surveillance

ICTCs Integrated Counselling and Testing Centres

IDUs Injecting Drug Users

IEC Information Education & Communication

IRCAs Integrated Rehabilitation Centre

MARPs Most at-Risk Populations

MoHFW Ministry of Health & Family Welfare

MoSJE Ministry of Social Justice & Empowerment

MACS Municipal AIDS Control Society

NACO National AIDS Control Organisation

NACP National AIDS Control Programme

PLHIV People Living with HIV

RCH Reproductive and Child Health

SACS State AIDS Control Societies

STI Sexually Transmitted Infection

TI Targeted Intervention

ToT Training of Trainers

WLHIV Women Living with HIV

UT Union Territory

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