

AIDS BUZZ

New Delhi January 2005



Photo: Indiapicture

Look Ma, Be Sexplicit!

Why can't the Indian parent talk about sex?

By SADHNA MOHAN in New Delhi

“What’s that?” a nine-year-old asks as the TV shows up a couple in the throes of passion. Papa is embarrassed. Another time, another question, and the egg-sperm story is told, but little Radhika wants to know more. “What is the ‘technology’ used to create a baby. How does the sperm go to the egg?”

Kingshuk Mukherji, Editor, The Times of India, Hyderabad — the father — is “stumped”. “Will somebody tell me how to talk to her? I feel the need for guidance myself,” he rues.

The girl is old enough to know about sex and AIDS, he thinks, and is upset that neither the school nor he and his wife have told her about these things.

South Delhi’s upwardly mobile Anuja Dhar (name

changed), senior manager in a public sector undertaking and an MBA in finance, cannot muster the courage and words to talk about sex to her 14-year-old son studying in Mother’s International School. She prods her husband to do so, but he is equally at a loss.

The school syllabus talks about diseases, including sexually transmitted diseases (STDs); this window of opportunity helps her tell her son not to have multiple partners because “we (the parents) can’t take it.” Clinically correct information, yes. But a sensitive sharing of thoughts on sexual acts and relationships, no. “I haven’t talked about pregnancy, sleeping with a woman, his responsibilities... maybe I will in a couple of years without actually discussing sex. I tell him that if he makes a mistake, he can come and tell us,” she says.

An increasing number of parents in metropolises and

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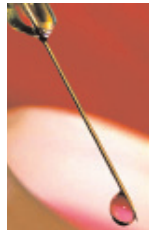
World Bytes

Candidate Vaccine at AIIMS

All India Institute of Medical Sciences (AIIMS), New Delhi, has developed a candidate vaccine for HIV that awaits government clearance for human trials. The HIV-1 DNA vaccine, made from two genes of the virus cloned in separate vectors, had induced the development of antibodies to HIV in animals, said Dr Pradeep Seth, head of microbiology at AIIMS. Dr. Seth went a step further and injected the virus into his own body to find six months later that he’d suffered no side effects.

In addition to this vaccine, India has two vaccines approved for Phase I human trials: the Adeno-Associated Virus vaccine and the Modified Vaccinia Ankara (MVA) vaccine.

Hindustan Times, New Delhi



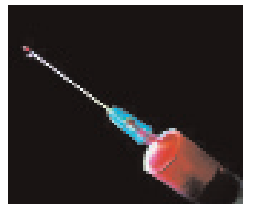
CD 4 Count at Low Cost

A low-cost technique of measuring CD4 cells may soon be developed.

A recent study (‘Cassens U et al. Antiviral Therapy 9:395-405 (2004) (ISI Impact Factor 6.57), International Medical Press 1359-6535/02’) compared a simplified volumetric flow cytometry (SVC) technique for CD4 counting, where no pre-analysis washing or lysing of blood cells is carried out, with traditional in-house flow cytometric methods. Blood samples from 434 healthy donors and immunodeficient patients were tested in eight hospital laboratories in Europe, Africa, and Asia.

The SVC technique was shown to be 95.2% accurate when compared with the traditional methods and could, therefore, be an alternative for CD4 testing in resource-poor settings.

International Medical Press



What turns on the land of Kama Sutra

LONDON: The world’s biggest sex survey went between the sheets in the land of Kama Sutra this year to give the world its first close-up of how India sings the body electric.

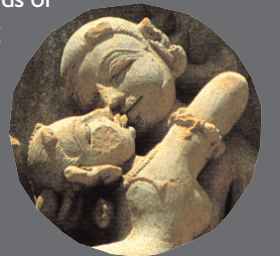
It found Indians ‘top of the league’ in sexual health, with only one in five admitting to unprotected sex without knowing a partner’s history. This compares to two-thirds of Danes and Swedes playing Russian Roulette in regard to sexual health.

The online 2004 Durex Global Sex Survey questioned more than 3.5 lakh people in 41 nations and found Indians reporting an average of 3.7 sexual partners as compared with the global average of 10.5. Chinese led the way with an average of 19.3 partners.

It also revealed that Indians had 82 sessions a year, compared with the global average of 103, but were still far more sexually active than those in Singapore and Hong Kong (both at 79) and Japanese (46). French topped this list with 137 sessions a year.

Indians lost virginity later than most, at an average age of 19, and received sex education later in life than those in other countries, the survey said.

The Times of India



Look Ma Be Sexplicit!

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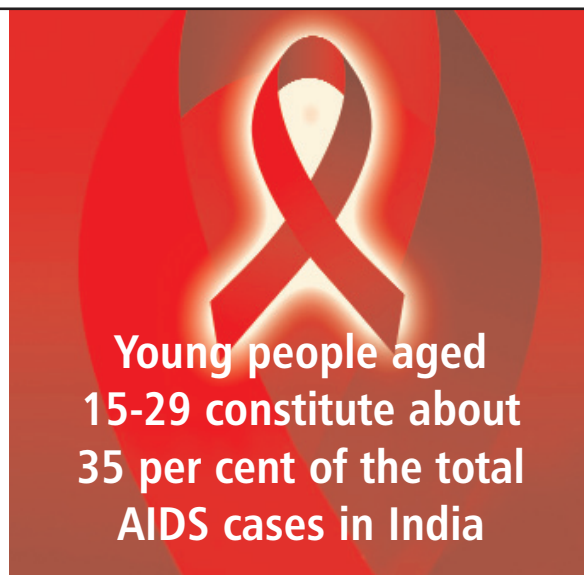
towns want to talk to their children about sexual responsibility and sexual matters per se but are unable to utter the three-letter word. Erotic imagery on television, films, and newspapers and children maturing at a quickened pace are pushing the trend. And the new-age parent, primed to meet the child's needs, wants to "inform" about sexual matters so that ignorance and misinformation do not harm him. The AIDS epidemic too is forcing the parents' hand. Do children need to know about sex and STDs, including AIDS? "Yes, there is a very strong need," affirms Dr. Aruna Broota, Professor of Clinical Psychology, Department of Psychology, Delhi University and a television and radio personality whose voice works magic with the audience. The Global Indian 2003 award presented to her by the Global Indian Trust in San Francisco recognizes her work with adolescents and the fact that she is the first in the world to run an "immunization" (read prevention) programme against depression for students of classes 8-10 at the Kolachi Hansraj School, Ashok Vihar, Delhi.

The media is so provocative, and when there is hormonal arousal between 12-15 years of age, you can commit blunders, she explains. For example, incest is on the rise. "If I was seeing one 'incest case' in six months about four years ago, I see one case a week nowadays," she reveals. This is not a Delhi-specific occurrence. Clients come to her from Moradabad, Muzaffarnagar, Saharanpur, Jaipur, Aligarh and Agra – and the incidence of incest cuts across geographical and class barriers.

"A brother and sister watching a music channel began exploring one another and got into a relationship," she elaborates. Father-daughter relationships are commonly reported. An "informed" child can ward off incest.

Misinformation too plays havoc with the young. A final-year college student came to her, reporting sexual dysfunction. His yardstick for performance was a friend who boasted that he could have intercourse with a sex worker 10 times in 2 hours. "I could do it only twice," cried the boy. He could've developed psychological impotence, says the clinician. She has many cases of psychological impotence referred to her by urologists, where "myths" are the cause of the problem.

Another young man, who had incorrect information that oral sex did not transmit HIV, became HIV-positive



Look Ma, Be Sexplicit!

after he began practicing oral sex with his male partner. He has another wrong notion – that his parents will be shattered if they get to know he is a homosexual and they'll be O.K. knowing that he is positive. The only child of his parents, he has attempted suicide twice. His parents are pressurizing him for marriage, and he doesn't know what to tell them. He has an impulse control disorder, is hyperactive sexually, and tends to put off using condoms to another day, says his psychoanalyst.

Young people aged 15-29 constitute about 35 per cent of the total AIDS cases in India. And misconceptions on how they can become HIV positive are rife. The recently published National Behavioural Surveillance Survey of 26,716 Indians aged 15-24, organized by National AIDS Control Organization (NACO), tells us that 67.7 per cent of those surveyed in urban areas and 72.2 per cent of those questioned in rural areas have misconceptions about the routes of HIV infection. About similar numbers have not heard of sexually transmitted diseases. Rural young report more casual sex in a year's recall as compared with urban young (7.2% as against 6.6%). Obviously then, the rural young need more attention than their urban counterparts. Talking about AIDS

involves, to a large extent, talking about sex.

Why should parents do the talking? Because they are the closest, sincerest friends of their children. They'll give correct information without sensationalizing it, and the platform they provide for talking will help the child clear doubts and discuss encounters with ease.

This information and ease of talking will be carried forward to the next generation, so, in a sense, parents who pave the way in this direction will be setting the foundation of a new culture where sex can be talked about.

"Guilt" is the reason why parents cannot talk about sex, explain psychologists. "Guilt was the traditional condom" – a way of controlling sex. Women, more than men, are made to feel guilty about pleasure in our culture, they hazard.

"It is common for a middle-class woman to beat up a son experiencing a nightfall, accusing him of having 'impure' thoughts," says Vandana Datt Anand, a Delhi psychologist. Fathers join in too. The woman has never discussed growing up with her husband and is unaware of basic physiological facts, she explains. "A boy made to feel guilty can develop psychological impotence and take to wife beating. A girl feeling guilty for some sexual explorations may not achieve a peak during intercourse," she adds.

It's time to kick the silence. But how? You can't suddenly start off talking to your kid about body changes and HIV. The child will not be able to take it and perceive it as another "no-no". You need to share a relationship with your child, and the process of building it starts the day the baby is born.

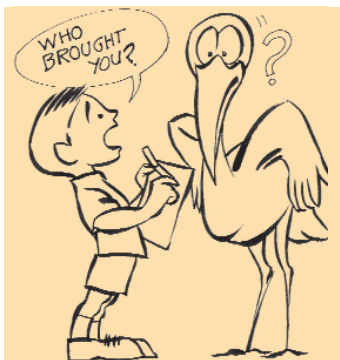
You need to come down to the child's level – maybe bathe with him, play with him, dress him, talk about your stupidities, attitudes towards the opposite sex, etc. Hormonal changes begin from age 10, some girls begin to menstruate at 9. You could begin by talking about togetherness and attraction. Later, body changes, the onset of arousals, nightfall, and stroking can be talked about.

Apparently, parents need help to embark on uncharted territory. NGOs and experienced psychologists dealing with effective parenting and sex education need to reach out to them to harness their invaluable resource. It's time the AIDS programme too focused on this soft target. ●



Illustration: Suresh Kumar

Jokes Jokes Jokes Jokes Jokes



A child has to complete a project on childbirth. He asks his grandma how she was born. "A stork brought me," she replies.

He then asks his mother how she was born. "A stork brought me," comes the answer.

How was I born? he asks next. "A stork brought you," his mom says.

"There has been no natural childbirth in my home for the past three generations" – the boy wrote in his project report.



"Son, please tell junior about the birds and bees," the parents requested their older son.

"Heck! I know they do it like the humans!" piped up junior.

School for brides teaches servitude but no sex

BHOPAL (AFP) - A school for brides in the central Indian state of Madhya Pradesh teaches women how to be ideal wives by serving their husband and his family -- but keeps sex off the curriculum.

The 18-year-old Manju Sanskar Kendra (Manju Traditional School) funded by businessmen in the state capital, Bhopal, aims to smooth a bride's path with a special three-month training course, which includes cooking, sewing and daily prayers. The school charges no fees and boasts of having trained over 4,000 girls between the ages of 18 to 21.

"Most of our students are young women who are engaged. Very often their future in-laws ask them to enroll," said 52-year-old Bhau Ayildas Hemani, director of the centre.

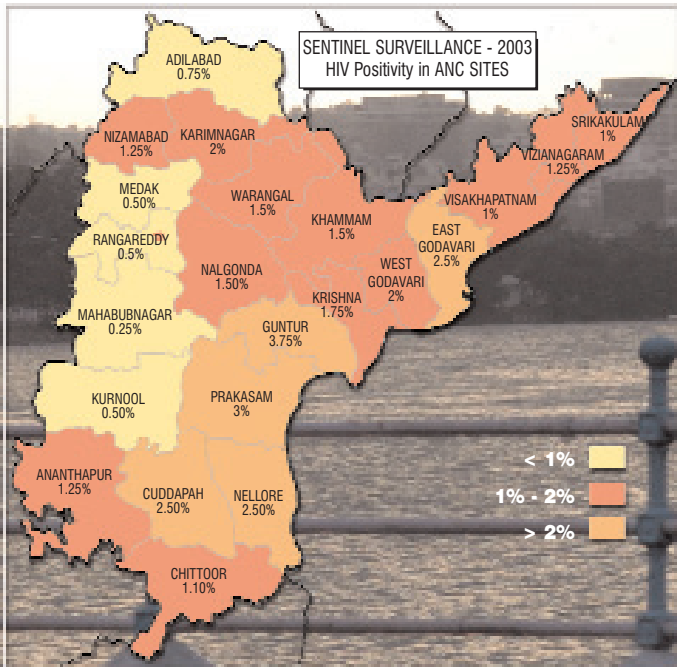
"We teach the women to serve their husbands with body and soul and win laurels from God. We tell them to be polite to their in-laws at all times and endure little things while adjusting to their new home," he added.

Hemani's students start their classes at seven every morning. After lectures imbued with religious and marital wisdom, they sing devotional songs and prepare food in the school kitchen. However, the bridal finishing school manages to avoid one of the key issues in any marriage and does not give any sex education or talk about safe sex.

"At the school we've been told to please our husbands at all times and have children, which I suppose means sex," said 22-year-old Bharti Devlani. "Bhau has never spoken about HIV/AIDS," she added.

Ritu Tuli, senior counselor at the All India Women's Conference, criticized the school for failing to educate the young women about safe sex and putting such stress on "patience and obedience."

"It's an opportunity missed. The school could have really helped the girls by educating them about safe sex. Why treat it like something that is only between the bees and the birds?" said Tuli.



Sex Drive Beats Tech Drive

Andhra's high on the HIV epidemic chart – Reddy to stem the tide?

By SADHNA MOHAN in Hyderabad

Cosy twosomes dot the face of Hussainsagar Lake, raking in the freshness of its blue waters, unmindful of the traffic plying behind them on the main road connecting the twin cities of Hyderabad and Secunderabad.

Inhibition is passe, as it might well be in other Indian towns. But Andhra Pradesh hits a new high with the dubious distinction of being the 'permissive hub' of the country. More than a third of its young men questioned as part of the National Behavioural Surveillance Survey - 2001 (BSS) reveal they had casual sex in a year's recall period. Rural women outstrip their urban counterparts in

reporting a higher rate of casual sex. The age group of the respondents (1,169 in total) is 15-24.

"I'm not surprised," is how Mrs. K. Damayanthi, Project Director, Andhra Pradesh State AIDS Control Society (APSACS), reacts to this data. Films, television, pub culture, and consumerism are powerful propellers of the young, she says, and beating these influences is an issue the government is still grappling with.

The common man laps up cinema hungrily. Telugu film productions outnumber Bollywood's, the number of people viewing films on a weekly basis is very high, and the number of film theatres, especially in coastal Andhra, is extremely high, ventures Mrs. Damayanthi. "Premin shukundam Raa" (Let us Love) and "Nuwunaenu" (You and Me) invite the titles; about 15 teenage romance films

were made last year alone.

Add to this the traditional mores of sex work in certain districts, such as Guntur, Prakasam, and East Godavari, and you have a potent mix! Thus, 40% of the men and 10% of the women surveyed in Guntur by the UN's CHARCA programme last year admitted to sex with a partner other than the spouse. The study was a district situation assessment.

These three districts top sentinel surveillance data for the year 2003, recording infection rates of 3.75%, 3%, and 2.50%, respectively, in the general population.

The broad picture of HIV prevalence has not changed dramatically over the past year with 18 out of 23 districts being in the 'red' (over 1% prevalence) as against 17 the previous year. However, seven districts, as against six in 2002, now have more than 2% prevalence.

The overall prevalence rate for the state's general population is estimated at 1.53% as against 1.62% last year. Tirupati reports the highest prevalence (38%) among people with sexually transmitted diseases (STDs).

Non-migrants in rural areas report slightly more HIV prevalence than migrants among ANC attendees and STD patients (1.5% as against 1.4%), and HIV infection has been observed among people of various occupations. HIV prevalence in sex workers' and men who have sex with men (MSM) sites is 16.86%, a little less than the prevalence at STD sites (19.6%).

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Lord of the Fields

Spearheading down-to-earth communication

By ANASUYA DAS in Kakinada

It is mid-afternoon at a coconut grove amidst a patchwork of brown and green fields in Sankhavaram mandal, 70 kms from Kakinada in East Godavari district. A group of nine farmers has finished its first shift in the nearby fields and retired to the shade of the coconut trees for lunch and rest.

Some of the farmers have freshly plowed mud on their legs and the headgear is on. They are listening rapt to a short but plump man attired in a striped shirt and blue trousers.

The man is not on a "lift kara de" mis-



sion. He is merely trying to acquaint the illiterate and semi-literate rural folk with the virus gaining ground in the district-HIV.

Meet I. Sesha Rao (37), a dalit of Navakandravada village in Pithapuram mandal and a former trade union activist. Popular among the locals, he is affection-



ately called 'mutha mestry' (group leader).

The twin districts of East Godavari and West Godavari, with the river Godavari forming the boundary, are considered the rice bowl of Andhra Pradesh, and the state's food security depends on the well being of its farmers.

The East Godavari district accounts for 8,000 HIV/AIDS cases, the third highest among the districts in Andhra Pradesh, and a red alert has been sounded. Most of those affected are poor.

continued on page 4

AIDS Buzz brings you a flavor of what's new and happening in the AIDS field. Trends in the making, practices to be watched and learned from, and strategies that merit a second look – all the 'vitals' an AIDS programme should reckon with will be presented in this newsletter that hopes to provide a space linking key stakeholders fighting the AIDS epidemic in India.

It will be our endeavor to bring you news from the field that you can use. The key stakeholders we are reaching out to initially are state AIDS control societies (SACS) and their NGO partners, government institutions, academic institutions, and individuals active in the AIDS arena.

AIDS Buzz hopes to provoke you to think anew and take stock of relevant information. It exposes you to interesting on-the-ground initiatives all over the country and the world. At present, Indian states, as large as entire European countries, aren't really in the know of what works or does not work in their adjacent states. Unique approaches or processes that have yielded good results in a state are not known about in another.

We will focus on documenting state-level work, as well as initiatives at NACO. In a sense, the newsletter will be the interface between NACO, SACS, NGOs, and various stakeholders so that all are better informed about one another. It will be the channel that links information to key players, bringing stories of action from one place to another.

We will begin by focusing on DFID-supported states. The first issue takes you to Andhra Pradesh, a hot spot on the country's AIDS map. Prevalence in the general population here has ranged from 1.5 through 2 per cent since 1998.

We explore what's going on in Andhra – the good and the bad. If a problem exists, as we found it does in Bhimakrosupalem village, we can begin to solve it only by acknowledging its existence.

And it's with this spirit of uncovering the AIDS epidemic that we invite you to write in about developments you'd like us to take notice of.

Feel free to contribute to AIDS Buzz, a melting pot of thought aiming to stimulate an informed response to AIDS.

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Lord of the Fields

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Sex is not taboo in this district, where several towns such as Peddapuram have been synonymous with commercial sex for over a century. Extra-marital affairs and discussions about sex are common. So Rao has little problem freely discussing sex-related issues.

Down-to-earth language, bordering on vulgarity, and a highly effective conversational style make him an instant hit.

He starts by talking about the human body, sex organs, and 'natural' sex. Having generated interest, he shows pictures of male and female organs and discusses various myths, moving on to talk about safe sex and the usefulness of sticking to one partner.

"If after knowing all this, you are still interested in extra-marital sex, then use a condom. That is the only safety net between life and death," he says.

He goes on to show how to tear the packaged condom so that it is not damaged, then punches the air out of the expanded condom, and pulls it on a wooden penis. The crowd roars in laughter as pretends to push back pubic hair.

Adopting a conspiratorial tone, he whispers not to throw the condom in the open after use. "A bird may carry it and drop it in your neighbor's house, and the neighbor will suspect his wife of having an affair. It may fall into the hands of your child, who may swallow it, getting infected."

"Suppose you throw the condom on the road, and someone with a cut in the foot walks over it, he or she will get AIDS. So always dig a pit, and throw condoms into it after tying the open end," he suggests, showing how to tie a condom.

At another village, his audience comprises youth. "I know all you buggers see blue films. When you get excited after seeing a blue film, do not go to a prostitute. Do masturbate. If you are still interested in scr***** a woman, take a condom," he says and enacts masturbation.

"In your anxiety to feed a motherless child, please do not breastfeed the baby-you may infect him," he cautions.

People belonging to upper classes do not attend his discourses. The caste system is so rigid that any upper class person attending his meet would be socially ostracized.

Ample commonsense and innovation characterize Rao's messages. No wonder, APSACS has inducted him as a resource person, at a monthly remuneration of Rs 4,000, to address the unorganized sector. ●

Sex Drive Beats Tech Drive

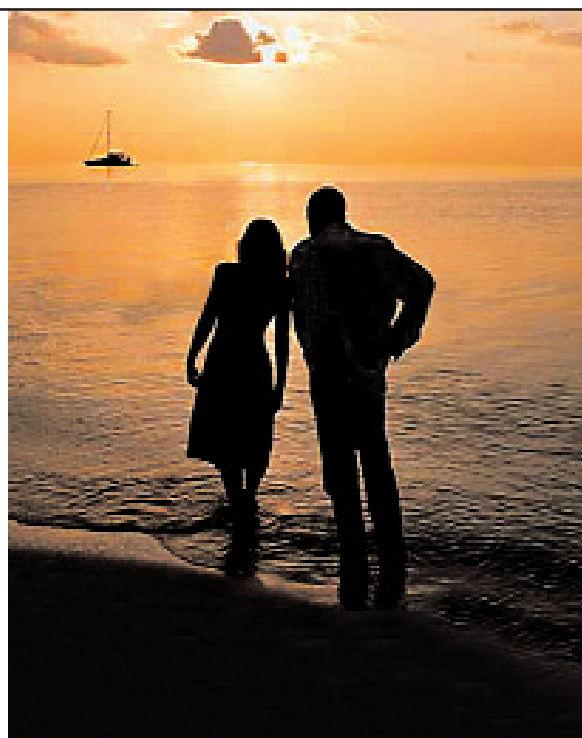
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The situational analysis report-2003 underscores the point that HIV is no longer confined to core transmitters, their clients, and the mobile population. It has touched all parts of the state and all sections of society. The strategy of reaching all, with a focus on the young and the non-migrant rural lot, is advocated.

"Every person must be contacted," affirms Mrs. Damayanthi. "We need to plan for this, it may be possible," she responds, when asked if this was achievable.

Touch each network to create awareness -- is the approach to be followed. That's what's been done to an extent with former chief minister Chandrababu Naidu's active support. Thus, the government's poverty reduction programme took up HIV as its first training programme on health for its workers, who fanned out with awareness messages to women's self-help groups (SHGs) in the state. Simultaneously, 17,000 anganwadi workers of the Department of Women and Child Welfare were also roped in to reach out to self-help groups and adolescent women in villages on HIV/AIDS issues. This force covers a third of the mandals (a block's sub-unit) in each district. The work is being scaled up.

Naidu led the state education department to train 18,000 school teachers of 11,400 schools (two teachers are to



be trained for each school) in life skills education. Over 2,000 college lecturers and 2,000 paramedics of the leprosy department were similarly attuned to the AIDS cause. The new YSR Reddy government has also pledged to work for AIDS awareness.

ROAD AHEAD

A lot remains to be done. Workplace interventions for all factories, all quarries, and fishermen are needed.

Out-of-hospital Voluntary Counseling and Testing Centres (VCTCs) run by the government should be set up; also government VCTCs should penetrate to 30-bed hospitals at the block level -- as of now only 100-bed hospitals at the division level have them.

STD treatment in rural areas is a critical area requiring attention, not to mention effective condom promotion and blood safety. In addition to what the SACS chief outlines, one detects a need for a visible and articulate mass media campaign and NGO care and support initiatives. Hardly any billboards addressing HIV are seen in the heart of Hyderabad, and as compared with 117 NGOs working on prevention under the aegis of ADSACS, only 14 work in the area of care and support. The day this reporter was in Hyderabad, newspapers published the picture of a four-year-old girl, taken into 'police care' when her mother, an AIDS patient, died on the streets. Such children are going to need long-term care, and this needs to be planned for.

APSACS chief is right when she says, "massive urgent action on all fronts is needed to have a decisive victory over the virus." The political umbrella that Naidu held over the HIV issue was welcome. Meeting with children at Hussainsagar Lake once a year, placing a giant condom outside the state assembly, and talking about AIDS at every government meeting were some 'visible' proactive measures that he took, backed by serious inter-sectoral collaborations.

To Naidu and APSACS' credit, AIDS is known about in the state. People need to know and tackle it better. Hopefully, YSR Reddy will provide the much-needed momentum for this. ●



Illustration: Suresh Kumar

Asia & Africa

On Different Trajectories?

Asia soon could have more HIV-infected people than sub-Saharan Africa. But that doesn't mean it will have African-scale epidemics.

Some AIDS experts predict that Asia will have more HIV-infected people in 2010 than the 30-million or so in sub-Saharan Africa today. This could have more to do with the size of the Asian continent than the explosive spread of the virus in the general population. In the past few years, it has become clear that the epidemics in Asia and Africa are surprisingly different. HIV has not spread rapidly by heterosexual sex to cause an African-style "generalized" epidemic anywhere in Asia, and many epidemiologists now believe it is unlikely to do so in most parts of the continent.

Yes, HIV has spread quickly in high-risk groups and made inroads into the population at large, infecting an estimated 7 million Asians in all. But no Asian country has reported a prevalence rate in adults higher than 4% (Cambodia, 1999), and relatively few prenatal clinics have found prevalence rates above 1% — the standard measure for a generalized epidemic. In contrast, 12 African countries now have prevalence rates in adults of 10% or more; South Africa reported that 26.5% of pregnant women in 2002 were infected with HIV.

Could that happen in Asia? "Much of Asia has the potential for an epidemic where 2% to 3% of adults become infected, and by my standards, that's an extremely serious epidemic," says Tim Brown, a physicist by training who lives in Bangkok and does HIV modeling for the East-West Center. "But will we see 10% to 15% prevalence in Asia outside of a few isolated areas? Absolutely not."

"We've been looking, waiting for evidence of that

NO ASIAN COUNTRY HAS REPORTED A PREVALENCE RATE IN ADULTS HIGHER THAN 4%, AND RELATIVELY FEW PRENATAL CLINICS HAVE FOUND PREVALENCE RATES ABOVE 1%

— COHEN

BY 2010, INDIA COULD HAVE 4% OF ITS POPULATION INFECTED — A STAGGERING 25 MILLION PEOPLE

—US NATIONAL INTELLIGENCE COUNCIL

(Asia going the sub-Saharan way) for a number of years, but—happily—it's not panning out," says Christopher Beyrer, an epidemiologist at the Johns Hopkins Bloomberg School of Public Health in Baltimore, Maryland, who's closely studied HIV's spread in Thailand, Myanmar, China, and Malaysia.

To many who combat epidemics, this means there is a tremendous opportunity to derail the virus by aggressively targeting high-risk groups—IDUs, sex workers, and gay men, who often are ostracized by societies for legal and moral reasons. "If we focus our attention there, we can really do a lot of good work," says Elizabeth Pisani, an epidemiologist with Family Health International (FHI) based in Jakarta, Indonesia.

Pisani decries the hype that has surrounded projections of rampant viral spread through general populations in Asia. And she says that the "obsession with generalized epidemics" has clouded attempts to discern the actual epidemio-

logical patterns.

James Chin, an epidemiologist at the University of California, Berkeley has since long questioned the potential of HIV to spread by heterosexual sex everywhere outside Africa. "I don't think most of the world's heterosexual population has sufficient sexual risk behaviors in terms of networks to drive any type of epidemic of sexual transmission," says Chin, now a consultant to the World Health Organization and other groups. "You get pockets here and there in the sex workers, and that obviously has to be looked at. And you get epidemics in injecting drug users

who share blood where HIV has penetrated into IDU networks. That will continue. But generalized transmission of HIV is a very inappropriate epidemiologic term."

In 1998, Chin, who started the global HIV/AIDS surveillance program at what's now UNAIDS, co-authored a paper that said, "HIV prevalence rates in the total sexually active population of most Asian-Pacific countries will not, in our opinion, ever reach 0.5%."

Many epidemiologists now say that marked distinctions characterize sexual behavior patterns in Asia and Africa. "From all behavioral studies, there's a big difference in the number of partners that men and women in Asia report having, and that's not true in Africa," says Peter Piot, head of the Joint United Nations Programme on HIV/AIDS (UNAIDS). In other words, relatively few women in Asia, other than sex workers, have multiple partners. As Beyrer puts it, "For the great majority of women in Asia, it's still virginity until marriage and monogamy afterward."

In contrast to Chin's analyses, the US National Intelligence Council published a report in September 2002 that roiled health officials in India. The report predicted that by 2010, India could have 4% of its population infected—a staggering 25 million people. "Those numbers were plucked out of the air," charges Chin.

Piot, who played a pioneering role in characterizing the African epidemic, cautions people not to jump to conclusions about the potential spread in Asia. "The major difference when you compare the African and Asian epidemic is the speed," says Piot. "It still can go to double-digit prevalence in some countries, and certainly some of the Indian states," he warns.

Swarup Sarkar, a UNAIDS epidemiologist based in Bangkok, worries, too, about what he calls "subnational" epidemics. "There are subnational epidemics at 5% prevalence or more going on, and we're ignoring this because of low national prevalence overall," says Sarkar, who has worked extensively in India and several other Asian countries. (Please see Andhra story on Page 2- Guntur has 3.75% prevalence among ANC attendees).

Epidemic Stabilizes — Former NACO Chief

There are signs that the HIV epidemic is stabilizing among the general population in the six high-prevalence states, former NACO Project Director Meenakshi Datta Ghosh told The Indian Express on July 11. Sentinel surveillance estimates of HIV prevalence for 2003 show an increase of 5.2 lakh over the previous year as against an increase of 6.1 lakh in 2002—a downward trend, she said. Per this data, India now has 5.1 million HIV-infected people. ●

MIND TICKLER

We reproduce here a mind tickler written by Jon Cohen in Science on June 25, 2004. Write in your response. Clear, cogent letters will be printed in next issue's Dialogue. The best letter will carry a prize of Rs 1,000. In addition, we invite you to start a dialogue on a topic of your choice through a write-up of less than 200 words. The most original issue/problem raised will be featured, and the writer will receive a prize of Rs 1,000. Letters marked Response/New Dialogue, as the case may be, should be addressed to Editor-in-Chief, AIDS Buzz, W-113 Greater Kailash-1, New Delhi-110048, e-mail: abuzz@sbrindia.org

Global Fund Signs Major New AIDS and TB Grants for India

New Delhi - India signed two new grant agreements with the Global Fund to Fight AIDS, Tuberculosis and Malaria, paving the way for the disbursal of US\$ 33 million over the next two years, and totaling US\$ 129 million over five years. These vital new grants will help scale up the national HIV/AIDS prevention and control program and expand the national TB control program.

Total commitment from the Global Fund to India now amounts to US\$153 million over five years.

The first phase of the new US\$ 100 million component for building capacity for HIV/AIDS prevention and treatment - worth US\$ 26.1 million - will support prevention of parent to child transmission of HIV/AIDS in the six high prevalence states and also provide antiretroviral treatment for 4,120 pregnant women. A further 12,000 additional AIDS patients will receive antiretroviral treatments over the first two-year phase through a partnership between NACO, four pharmaceutical companies and NGOs.

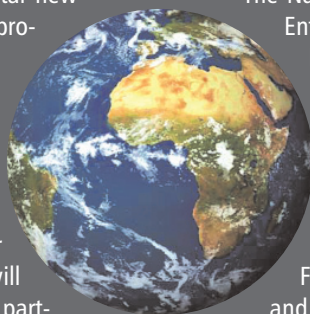
Freedom Foundation (Bangalore), ARCON (Mumbai) and YRG Care (Chennai) are the

lead non-governmental partners in the antiretroviral treatment and HIV prevention program, which is expected to include participation from 1,000 community-based NGOs.

The National AIDS Research Institute of Pune, National Institute of Cholera and Enteric Diseases of Kolkata, MGM Medical College of Mumbai, and MGR Medical University of Chennai will be responsible for monitoring viral resistance in the project areas.

Mr. JVR Prasad Rao, Health Secretary of the Government of India and the Chairman of the Country Coordinating Mechanism for the Global Fund process said: "The Government of India has finalized the agreements for this grant."

Commenting on the grant, Ashok Rau, Executive Trustee & CEO of Freedom Foundation said: "For people who are already part of the care and support program at the Freedom Foundation, this grant comes as a ray of hope to sustain them, and will enable us to include more people living with HIV in the program." ●



Together in Lust

Father-son-sex worker... three is company!

By Anasuya Das in Kakinada

In "Ramu", one of the famous movies of late NTR, there is a hilarious scene showing the predicament of three generations of men of a family who happen to visit a sex worker on the same night, one after the other.

What makes the film memorable is the desperate attempts by the son-father-grandfather trio to find some hiding place in the room to avoid being detected by one another.

Reality is catching up with the celluloid world. Officials in East Godavari district recently conducting an HIV/AIDS screening study as part of the Smarakshana programme were shocked to find a village where father-son duos were visiting the same sex worker. And that too together!

The village, Bhimakrosupalem in Ramachandrapuram mandal, is said to be an AIDS volcano waiting to explode. In a village of about 2,000 people, 25 people have so far tested HIV-positive. Andhra Pradesh State AIDS Control Society (APSACS) officials fear there could be many more HIV-positive cases because only few villagers have been screened so far.

Officials came to know of this peculiar high-risk behavior on further investigation. "Both father and son take drinks sitting together and go to a single sex worker. Fathers often taunt their sons about their manhood and force them to join in sexual orgies," said an APSACS official.

Soon after coming to know about it, the district administration deputed Ms Padma, a local secondary school teacher then on deputation to APSACS (she worked as a state resource person for a year), on a fact-finding mission to the village. The lady spent about a week in the village, befriending the wives of rich farmers as well as sex workers, to ascertain the truth. In her report submitted to the district administration, she confirmed the earlier finding about father-son jointly sharing sex workers.

She pointed out that the villagers, mostly landowning rich farmers, seemed to live in their cocooned world. They had not heard of AIDS or how to prevent it. Efforts to educate them about the disease were summarily dismissed with the cliché "I will never get any (sexually transmitted) disease."

The villagers have not allowed entry to APSACS resource persons who tried several times to reach out to



Illustration: Suresh Kumar

REALITY IS CATCHING UP WITH THE CELLULOID WORLD IN A SMALL ANDHRA VILLAGE

them with the Smarakshana programme (which informs about AIDS and how to prevent it). They have also refused to attend any AIDS awareness camp, terming it a "sheer waste of time".

The officials, as well as NGOs working in the neighboring villages, are really baffled as to why this kind of thing is happening in the village. "The rich farmers have plenty of money and discourage their children from studying because then they will leave home and never return to farming. The idea is to get them involved from day one. And getting the young men to taste the pleasures of life

early could be one way of keeping them rooted to the soil," pointed out a volunteer working for a reputed NGO.

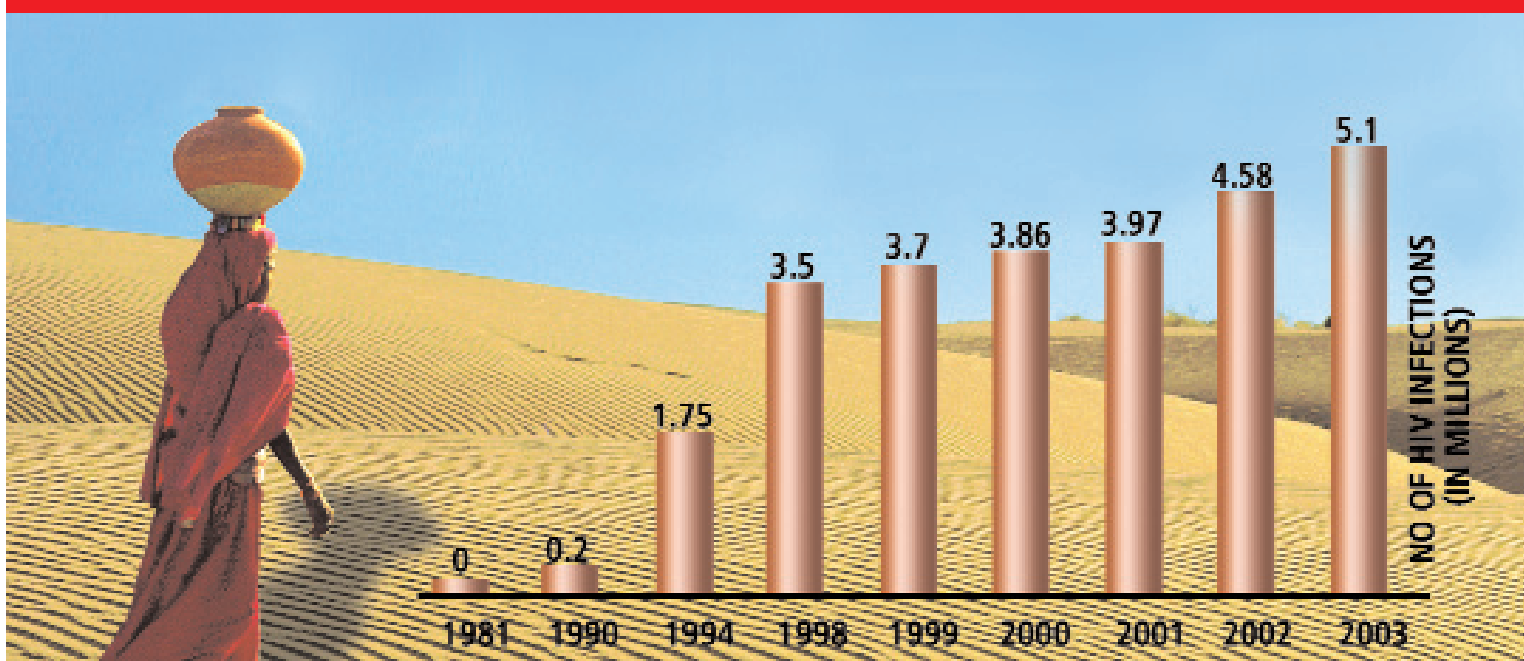
"Pre-marital, extra-marital and commercial sex is very common in these parts. But father and son doing it together is a new development. Maybe, the alcohol taken before visiting sex workers helps drown the moral dilemma of the young men," surmised another local worker.

The women are deeply worried about their teenaged sons. A couple of women told Ms Padma that the government should do something to save their children as they have no control over their husbands.

"What is needed is a change of mindset among the older generation that is ruining the life of the young. A specially focused programme to educate the elderly about the dangers inherent in the current practice is the urgent need of the hour," said K.Subramanyam, APSACS' field coordinator at Kakinada.

The district administration has alerted APSACS to the gravity of the crisis and has sought help in the form of a specialized and intensive campaign in the area. "We should do something before it is too late," a district official said. ●

HIV ESTIMATES: INDIA (1981-2003)



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