

## Shakti to the girl child

Vihaan Partners's in Chhattisgarh, Hindustan Latex Family Planning Promotion Trust (HLFPPT), Chhattisgarh Network of Positive People (CGNP+) and Chhattisgarh AIDS Control Society (CGSACS), conducted advocacy for the welfare of the girl child living with or affected by HIV. As a result, the Department of Women & Child Development, Chhattisgarh, issued a directive for inclusion of girl child from HIV infected families under the scheme, "Noni Shuraksha Yojana". Under this scheme, the government will deposit Rs. 5000/- each year, for five years (or a total of Rs. 25,000/-) in a bank account for the girl; this amount will collect interest and when the girl turns 18 years, they can withdraw a substantial amount of Rs. 1 Lakh. The scheme is aimed at encouraging positive attitudes towards the girl child and ensure a better future for them. This achievement commemorates the international girl child day celebrated on 11<sup>th</sup> of October every year, and marks Vihaan's commitment towards the welfare of infected and affected girl children in India.



## When passion meets technology!

Pinky, is an Out-Reach Worker (ORW) in Ahmedabad Care and Support Center since its inception in 2013. She is living with HIV and she also had TB earlier.



Pinky using the eMpower enabled tablet for her outreach work

Recently she was trained on using the tablet-based outreach software, eMpower. The software enables her to plan her daily outreach work much better; she can plan follow-up visits even if she is not in office or traveling, as it is accessible from anywhere. Pinky says that features, such as, 'my clients', provides access to the client list, their treatment details (whether they are regular with ART and other appointments, etc.) and the 'Lost to Follow-up' (LFU) clients, indicating, which of her clients are at a higher-risk and should be prioritized for immediate outreach services. The clients at higher risk are marked with a colour-coded *bindi* and the more the number of *bindis*, the greater needs the client has. She feels happy with the application because it has reduced the burden of carrying too many documents to the field visits and she can now document and report through the tablet. Other additional features that she finds useful, is the map which helps finding addresses of clients, otherwise difficult to locate.

Pinky hopes that the application will help her reach the ultimate goal of reducing the *bindis* for her clients, indicating improvement in their health! Through, Vihaan over 2000 ORWs and Peer Educators will use the eMpower enabled tablets.

## Ensuring safe motherhood for PLHIV mothers

Rita, 28 years old, was pregnant and went to her village community health centre (CHC) in Barahi for delivery. Due to complications in an earlier pregnancy, the Barahi CHC referred her to Katni district hospital where she tested positive for HIV. However, neither she nor her husband was informed of her status, and she was referred to the Jabalpur Medical College and Hospital on the premise that her delivery may lead to complications.

The Jabalpur Medical College admitted her and found out about her HIV positive status from the patient information card filled at Katni and informed the Prevention of Parent to Child Transmission (PPTCT) ORW. The PPTCT team informed Vihaan CSC team, accordingly the project coordinator and counsellor of the CSC visited her in the hospital. She was in a serious condition and required blood transfusion for which she was charged by the blood bank, violating the rule for providing free of cost blood to people living with HIV. The CSC team raised this issue with the management and got the amount refunded. Rita delivered a child and was discharged in five days.

However in a few days, her health deteriorated and she started bleeding. Rita was admitted in district hospital in Katni, but knowing her HIV status, the hospital staff refused to provide her care, clean or change the blood soaked bed-sheets and discharged her two days later even though her bleeding had not stopped. When her bleeding increased, her husband called the ORW and informed them about the situation. The CSC team realised the importance of situation and sought support from the SR team. MPNP+ coordinated with MPSACS and National Rural Health Mission (NRHM) and raised the issue with authorities in the state, demanding proper care for Rita. At present, she is undergoing treatment from Jabalpur Medical College and Vihaan and PPTCT outreach workers are visiting her regularly.

*(Names have been changed to maintain confidentiality.)*

## Vihaan Updates

- 10,70, 952** PLHIV registered and linked with care & support services
- 4, 08, 079** PLHIV and family members linked with social protection schemes
- 2, 21, 192** Lost-to-Follow-Up PLHIV tracked and returned to ART services
- 6, 17, 831** PLHIV screened for TB

*(Through September 2016)*

