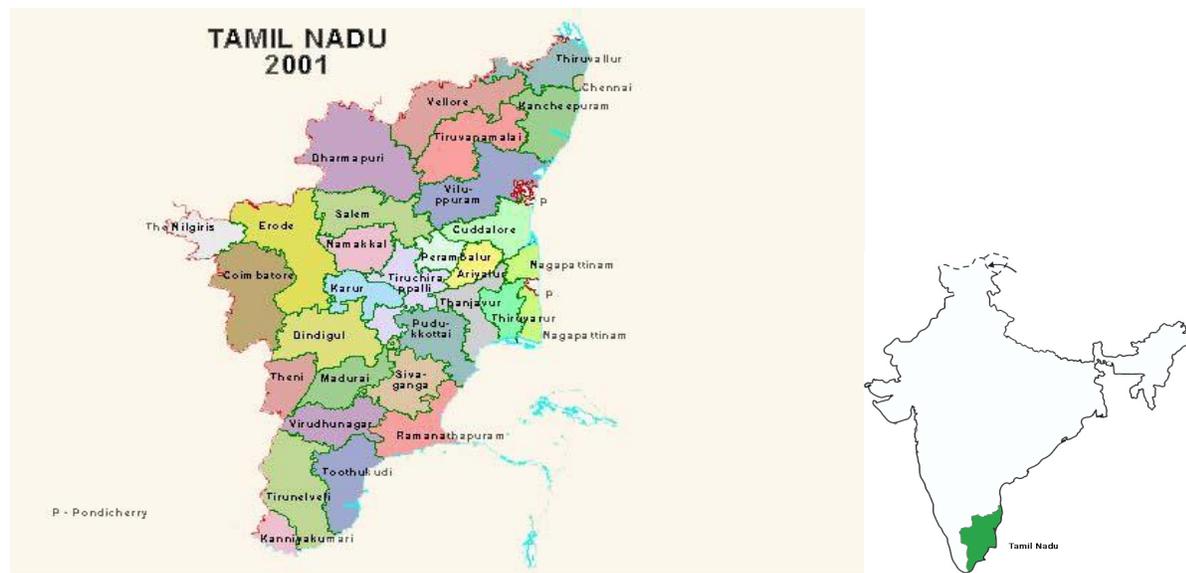


## Tamil Nadu State Profile



Tamil Nadu state in South India is the sixth most populous state in the country, with a population of over 62 million (2001 census). It is one of the developed states having good health and industrial infrastructure and is the most urbanized state in India. It is one of the foremost states in the country in terms of overall development.

Population (2001 Census)	62.11 Million
Rural	34.9 Million
Urban	27.2 Million
Sex ratio (2005)	987 (F):1000 (M)
Literates	45.65 Million (73.5%)
Health budget for 2007 (state budget - \$11,850 million)	6% of state budget

## HIV/AIDS Scenario and USG Activities in Tamil Nadu

The first HIV case in India was reported in 1986 from Chennai, the capital city of Tamil Nadu, and prevalence peaked at 1.13 percent in 2001. The Tamil Nadu State AIDS Control Society (TANSACS) is the government body responsible for prevention, care, treatment and support programs for the entire state. The recent mapping and size estimates indicate that Tamil Nadu has nearly 100,000 -120,000 Most-At-Risk-Populations (MARPs which include female sex workers, men having sex with men and injecting drug users) and about 130,000 – 150,000 People Living with HIV/AIDS (PLHAs).

Strong efforts taken by the state over the years have helped control the epidemic, and there has been a steady decline in the antenatal prevalence of HIV since 2001. The latest antenatal prevalence is 0.25 percent (2007 Tamil Nadu Sentinel Surveillance Report). HIV prevalence among MARPs continues to be high.

Number of sites in 2007 (95 sites)	HIV Prev. 2001 (%)	HIV Prev. 2002 (%)	HIV Prev. 2003 (%)	HIV Prev. 2004 (%)	HIV Prev. 2005 (%)	HIV Prev. 2006 (%)	HIV Prev. 2007 (%)
ANC (69 sites)	1.13	0.88	0.75	0.50	0.50	0.38	0.25
IDU (2 sites)	24.56	33.80	63.8	39.90	18.0	24.2	16.8
MSM (2 sites)	2.40	2.40	4.40	6.8	6.2	5.6	6.6
FSW(11 sites)				4.0	4.80	3.6	3.6

USG programs in Tamil Nadu continue to work in close coordination with TANSACS and other agencies to address critical needs of the state. USG programs currently support: a) efforts to saturate coverage of MARPs; b) provision of quality care, support and treatment services to PLHAs; c).development of models for mainstreaming general population-based interventions among youth and women d) engaging private medical sector; e) shaping local policies and guidelines; f) promotion and training on positive prevention counseling; g) technical assistance in establishing the Government Hospital of Thoracic Medicine (GHTM) as a National Center of Excellence for HIV care; and h) providing technical assistance and strategic support to TANSACS for evidence based programs- i) development of curricula as a component of HCD and task-shifting ii) technical assistance in lab quality enhancement at the state and national level.

In seven high-prevalence districts, USG supports demonstration models on prevention to care continuum programs, and supports the state mandate to saturate coverage of MARPs and bridge populations. Nearly 20% of the MARPs in the state are reached through USG support. Based on a request from the National AIDS Control Organization (NACO), USG also supports the Technical Support Unit (TSU) in the state. The TSU provides technical support in specific areas such as: public private partnership, mainstreaming, capacity building, strategic planning

and scaling-up interventions among MARPs and bridge populations. As part of developing Human Capacity in the state, USG supports a one-year residential HIV clinical fellowship.