

# AIDS in position to ravage India

Despite a ten-year AIDS prevention education program (including the use of old drawings from the *Kama Sutra* to "advertise" monogamy), India has more HIV-infected individuals than any other country in the world. What is going wrong?



Having sex with a Bombay housewife today is at least twice as risky as it was with a prostitute in the city's notorious red light district in 1988. Then only one percent of the prostitutes carried HIV; now between two and three percent of all the city's women are infected. "From high-risk groups the virus has gone to the general public," says Shiv Lal, project director of India's National AIDS Control Organization (NACO). "We are in trouble."

Indeed, the Joint United Nations Programme on AIDS says that India already has more HIV-infected adults than any other country in the world (more than three million), and by the year 2005 will surpass the entire African continent in number of infections. But the seriousness does not seem to have sunk in yet, as ignorance, apathy, corruption and lack of commitment at all levels are still the most powerful allies of the galloping AIDS virus.

India's half-hearted campaign against AIDS launched 10 years ago this month has lost steam just as the epidemic is exploding, and at a time when traditional beliefs about cultural barriers and the sexual behavior of Indian males are being called into question. For instance, the myth that HIV in India is spread mainly through heterosexual sexual activity has been shattered by the discovery that the country has a sizable number of gay males and that at least one out of every 100 AIDS cases is known to be related to homosexual sex. "All these years Indian gays were underground because of the law against sodomy," says Shankar Chowdhury, of the NGO-AIDS group at the All India Institute

contributing to HIV's spread through India — and one largely ignored until recently — is the virus's leap from urban areas to small villages. One major conduit for this spread, according to Lal, is through the sexual practices of migrant laborers. The laborers, forced to stay away from their families for weeks or months, pick up the virus from brothels in the cities and infect their wives on their return. In addition, there are an estimated two million long-distance truck drivers in India, a majority of whom indulge in unsafe sex en route, and they are fanning the spread of HIV into the country's interior. Officials of NACO point out that ignorance, illiteracy and poverty in villages will make their task — AIDS prevention — a nightmare.

But the HIV prevention program in India is already in big trouble. For example, only one-third of a US\$87 million loan from the World Bank (WB) to fight AIDS has been used, although the five-year program ends in March 1997. Furthermore, basic AIDS research is a low priority in India: the National AIDS Research Institute in Pune, set up by the Indian Council of Medical Research four years ago, has not been allowed to recruit staff because of bureaucratic hurdles, and its current budget of US\$200,000 a year is just enough for maintenance and paying electricity bills.

distribution of condoms in prisons, needles to injectable-drug users, or free drugs to AIDS patients. The official AIDS control program has also been burdened with indecision from the beginning. For example, NACO is still debating whether condoms should be free or priced, and whether condom vending machines can be introduced. NACO's efforts to clean up blood supplies have failed to dent the organized racket in

blood trade: an estimated one-third of donated blood in India is still untested for HIV. "The AIDS program is a bloody mess," says Sriram Prasad Tripathy, former Indian Council of Medical Research chief and now a consultant to the World Health Organiza-

tion. The World Bank, which reviewed the government's AIDS program in November, 1995, called for "enhanced technical strength, leadership and vision" and said that major efforts are needed to "reenergize" the project.

But it is doubtful that this will happen. Lal, himself frustrated, will soon be leaving NACO to join the malaria control program. And NACO's program will suffer perhaps a final setback if it cannot find an international source for funds once the World Bank withdraws its support next year.

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Sex workers' children appeal for condom use to protect their mothers from HIV.