

STRATEGIES OF NON-GOVERNMENTAL ORGANISATIONS FOR PREVENTION OF HIV/AIDS AND DRUG ABUSE: THE CASE OF NAGALAND, INDIA

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ABSTRACT

This paper aims to explore the involvement and contribution of NGOs in health and allied sector in Nagaland, India. In this study, 45 identified NGOs of Nagaland were considered as respondents. The specific area of development i.e., health and allied issues (viz., health care, HIV/AIDS control, and drug addiction problem, etc.) were included. Similarly, they were asked to select the tools and techniques (extension activity/ies) that were used by their organisation for implementation of development work in health and allied sector. Further, to identify the successful achievement and reason(s) for achievement in health and allied sector, an open-ended question was put to the respondents of NGOs for most successful development work in health sector conducted by them and also to mention the reasons for success. The study reveals that 58 and 71 per cent each of NGOs were involved in HIV/AIDS control and health care, respectively, whereas 51 per cent in addressing the drug addiction problems. Awareness, training and free medicine distributions are the most preferred extension activities to be performed in health and allied sector. In case of HIV/AIDS control and drug addiction, cluster of extension activities were included in each respect and employment of HIV +ve in different health projects by NGOs was the remarkable achievement.

Introduction

Since time immemorial, throughout the world, Non-Governmental Organisations (NGOs) are performing various activities for all round and holistic development and welfare of the society by providing financial

and non-financial benefits/services. The World Bank defined NGOs as 'private organisation that pursue activities to relieve suffering, promote the interests of the poor, protect the environment, provide basic social services, or undertake community development'. In India, especially States like Nagaland, the role and

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contribution by NGOs, VOs (Voluntary Organisation) and/or NPIs (Non-profit Institutes) is very prominent. According to the Central Statistical Organisation (CSO) Survey (2009), in India around 31, 74,420 registered NPIs are present and in Nagaland around 7,330 NPIs are present.

CSO survey (2009), further distributed the NPIs into 12 categories on the basis of activities, viz., i) culture and recreation, ii) education and research, iii) health, iv) social services, v) environment, vi) development and housing and so on. Out of total NPIs, in India, 13,10,911 (41 per cent) are under social services, 6,15, 954 (19 per cent) are under education and research, 3, 69,912 (12 per cent) under culture and recreation, 1,58,666 (5 per cent) under development and housing and 59,507 (2 per cent) under health.

Status of health service or health condition of the population of a country depends largely on the health care facilities and/or infrastructure available and proportionate availability of health personnel as per the recommendation. India constructed huge health infrastructure and produced large number of health personnel since Independence and it is continuing over the years. Even in recent years, Government of India introduced a scheme like 'National Rural Health Mission' (NRHM). In spite of that, Indian health care and service system is not up to the mark and health care and service system is an amalgamation of public and private sectors' health services. Public health care service has mainly been provided by the concerned State Government and, in general, public health care facilities are used to provide low cost health services, whereas private health service is much expensive and people have to incur on their own.

According to Planning Commission of India (2012), availability of health care services from the public and private sectors taken together is quantitatively inadequate and this is starkly evident from the data on availability of doctors or nurses against per lakh of the population. The desirable number of 'Doctors' is 85, 'Nurses' and 'Auxiliary Nurse and Midwives' is 255 against per lakh population, whereas, the available number are 65 and 154, respectively. So, health sector in developing countries like India and other underdeveloped countries of the World is facing severe challenges in providing appropriate services to the population of the nations. According to World Health Organisation (2000), the emerged challenges in health care sector are connected to access, efficiency and quality of services.

Nagaland State was inaugurated as the sixteenth State of India on 1 December, 1963. The State lies between 25°60' and 27°40' latitude North of Equator and between the Longitudinal lines 93°20'E and 95°15'E and having a Geographical area of 16,527 sq km (Govt. of Nagaland, 2006) and total population is 1,980,602 (Census, 2011). Density of population is around 120 per sq km. Average annual rainfall ranges from 2000-3000 mm and temperature ranges from 4°C to 31°C. The topography of the State is undulating, full of hill range which breaks into wide chaos of spurs and ridges. The altitudes vary between 194 to 3,840 meters above the mean sea level and 92 per cent area is hilly in nature (Raatan, 2004).

In Nagaland, malaria is a serious problem and number of Plasmodium falsiparum cases are also prominent, whereas AIDS demands a rethinking of development policy and drug addiction and rehabilitation

of them are the area of health care service. In this juncture, NGO sector is the most prominent alternative to address and redress the lacking of the public sector health services and to serve those people who are in real need.

It is known to all that basic requirements for survival, livelihood, availability of health care facilities and amenities were inadequate in Nagaland. Proper initiatives from public sector to address the same were relatively insufficient compared to the requirement. NGOs are trying to address the same with obvious approach of all round development of the people and the areas.

Taking all the issues and views discussed above, the present study is designed with following objectives, viz., to explore the degree of involvement of NGOs in health sector and type of work continued under health sector (including the prevention of HIV/AIDS and drug abuse/addiction) by NGOs of Nagaland, to identify important tools and techniques (extension activities) adopted by NGOs of Nagaland for proper implementation of developmental work under health sector and to identify the successful achievement

and reason(s) for achievement by NGOs of Nagaland in health sector.

Methodology

The State of Nagaland has a beautiful landscape and consists of 11 administrative districts, viz., Kohima, Dimapur, Kiphari, Longleng, Mokokchung, Mon, Peren, Phek, Tuensang, Wokha and Zunheboto. Out of the 11 districts, 6 districts, namely, Dimapur, Kohima, Mokokchung, Peren, Tuensang and Wokha were purposively selected for the present study. In this study, 85 NGOs were identified by obtaining list from reliable sources (Viz., National Bank for Agriculture and Rural Development (NABARD), renowned NGOs working in the State and from website). Out of the total identified NGOs, 45 NGOs were finally selected which have completed more than four years from the date of their inception. From every selected NGO, one higher level of employee was chosen as a respondent in this study. Higher level employees of NGOs include the top level functionaries, like director, secretary, topmost functionaries of sub-office of the large NGOs etc. Brief profile of the employees/respondents are presented in Tables 1 and 2.

Table 1 : Educational Qualification of Respondents

Status of the Respondents	Total	Educational Qualification of Respondents													
		Class X		Class XII		Graduate		P.G.		Ph.D.		Technical		Others*	
		F	%	F	%	F	%	F	%	F	%	F	%	F	%
Higher	45	1	2	4	9	17	38	19	42	2	4.4	2	4.4	5	11

* 'Others' qualification of respondents is additional.

Table 2 : Work Experiences of the Respondents

Status of the Respondents	Total	Work Experiences in NGO Sector							
		Up to 5		Up to 10		Up to 15		Above 15	
		F	%	F	%	F	%	F	%
Higher	45	10	22.22	15	33.33	10	22.22	10	22.22
		Work experiences in present NGO							
Higher	45	13	28.88	16	35.55	9	20	7	15.55

In Nagaland, large number of NGOs are involved in developmental work with various objectives, where health sector is also an area of work. This study was conducted to explore the degree of involvement of NGOs in health sector and type of work continued under health sector by NGOs (including the prevention of HIV/AIDS and drug abuse/addiction), and to explore and identify the important tools and techniques (extension activities) adopted by NGOs for proper implementation of developmental work under health sector. Further, this study attempted to know the performance and trend of achievement by NGOs to conduct and implement the development work in health sector and reason for success.

In this study, specific area i.e., health and allied issues/development sectors are included (viz., health and family welfare, HIV/AIDS control, and drug addiction problem) after proper discussion with NGOs' employees and taking into consideration of findings of pilot study. The identified development sector(s) were presented to the respondent and instructed them to identify the sector where his organisation is doing work for beneficiaries. After the collection of data, responses of respondents were analysed by frequency and percentage and presented accordingly.

To identify the tools and techniques (extension activity/ies) used by the NGOs for implementation of development work in health sector, some widely accepted and important extension activities were presented as hints (viz., awareness, training, health camp, post-natal care, etc.) and they were asked to select from those or present from their own. After collection of data, statistical tools like, frequency and percentage were used for analysis of data.

To identify the successful achievement and reason(s) for achievement in health sector an open-ended question was put to the NGOs to highlight the remarkably successful achievement in health sector. After the collection of data, responses of respondents were analysed by frequency and percentage and presented accordingly.

In brief, the "Health" or "Health and allied sector" includes all the issues related to health, like communicable and non-communicable diseases (including HIV/AIDS and sexually transmitted diseases), health and hygiene and a state of complete physical, mental and social well-being (including drug abuse/addiction and alcoholism). "Health Care" includes all the issues related to health and allied sector, except HIV/AIDS problem and drug abuse/addiction. "HIV/AIDS control" includes all the

issues related to awareness, detection, care and treatment, mainstreaming and rehabilitation of HIV/AIDS infected people/patient. "Drug abuse/addiction" includes the activities related to awareness and harmful effect of drug abuse/addiction, treatment of the addicted people and mainstreaming the addicted people.

Discussion

Health condition of people of a nation is an important indicator for measuring the development status and economic condition

of the country. If health is good, then economic growth, development and social well-being take place in desirable direction, whereas ill-health has strong link with poverty and underdevelopment. According to Planning Commission of India (2012), health should be viewed as not merely the absence of disease but as a state of complete physical, mental and social well-being. In this study, health care service, HIV/AIDS control and problem of drug addiction are the emerging issues where NGOs intervened to address primary consideration.

Table 3 : Distribution of NGOs by Type of Development Work Continuing in Health Sector

(N=45)			
S.No.	Type of work continuing	Distribution of NGOs	% of total NGOs
1.	Health Care	32	71.11
2.	HIV/AIDS control	26	57.77
3.	Drug abuse/addiction	23	51.11

Table 3 shows the distribution of the NGOs by type of work continuing in health sector. It reveals that 71 per cent of NGOs were working in health care, 58 per cent of NGOs were continuing with HIV/AIDS field, followed by 51 per cent of NGOs involved in addressing the area of drug addiction.

It is obvious that status of health affects the productivity of the potential human being and illness from communicable or non-communicable diseases drastically reduce the potentiality of performing as a quality human resource/force, whereas death brings it down into zero and losses of skilled and knowledgeable human resource. An estimate from World Health Organisation (2006) pointed

out that 300 to 500 million people get sick from malaria, and more than one million die from it. Similarly, another study on farmers engaged in intensive vegetable production in Cote d'Ivoire showed that malaria sufferers produced about half the yields and half the incomes than healthy farmers did (Girardin et. al., 2004). Further, in livestock sector revolution has successfully taken place in developing countries and which has direct impact on livelihood of the community. But, this livestock population has direct influence on zoonotic diseases. These may be the reasons for involvement of a large number of NGOs in health care sector in Nagaland and placed it into the top of the ranking.

In 2006, an estimated 39.5 million people in the world were living with HIV and out of them 5.7 million are from India, and an estimated 2.9 million people died from AIDS (UNAIDS, 2006). In Nagaland, around 14, 998 HIV +ve cases are present and on an average 130 +ve cases are added every month (NSACS, 2013), which is forcing the policymaker and planner to rethink. A study of worker productivity in a Kenya tea estate found the average daily output of HIV- positive workers to be 23 per cent less than that of healthy workers in the same field (Gillespie and Kadiyala, 2005). Large number of HIV +ve cases and accelerated rate of detection of HIV +ve cases is mainly the reason for the NGOs to take part in HIV/AIDS control.

Nowadays drug abuse, drug addiction and alcoholism are in alarming magnitude and pose potential threat to the country and in States like Nagaland. According to World Drug Report (2010), there were 674,000 opium users and 871,000 heroin users in India in 2008. Apart from the ill-effects on physical and mental health of the addicted, the increasing incidence of crime by addicted is also a challenge to the society. According to Planning Commission of India (2012), drug addiction causes immense financial and psychological problems for the addict and his

/her family. This takes the issue out of the domain of individual behaviour and locates it at the centre of the community, whether it is the family or the large society. Therefore, there is an urgent need for effective counter measures. In Nagaland State, addiction of drugs and alcoholism is an enormous problem. Owing to the backwardness of the area and people, remoteness and inaccessibility of the habitation where basic amenities are absent, open and vast international border with Myanmar {According to Ministry of Home Affairs, Government of India (www.mha.nic.in)}, India shares a 1643 km long border with Myanmar and of which 215 km with Nagaland} and other States, which is giving the opportunity of easy, transnational movement and availability of drugs. Myanmar is the principal producer of illicit opium and accounting for nearly 95 per cent of the total opium produced in the region (International Narcotics Control Board, 2010). According to Das (1012), heroin produced in the Myanmar is trafficked into India through the India-Myanmar border into the States of Mizoram, Manipur and Nagaland. These are some of the important reasons for prominent presence of drug addiction and alcoholism problem and because of the severity of the problems NGOs are giving priority to this problem.

Table 4 : Emphasis or Preference of Extension Activity Under Health and Allied Issues with Status of the NGOs

S.No.	Activities	(N=45)	
		Frequency	%
1	Awareness	37	82.22
2	Training	35	77.77
3	Free medicine	29	64.44
4	Health Camp	26	57.77

(Contd...)

Table 4 (Contd...)

S.No.	Activities	NGOs	
		Frequency	%
5	Post-natal care of both mother and baby	18	40
6	Family planning	14	31.11
7	Addressing HIV/AIDS problem	29	64.44
8	Addressing drug addiction problem	27	60

Table 4 contains information about emphasis on extension activities/ tools to reach and support the beneficiaries under health and allied development work. In India, in spite of enormous role of NGOs and VOs in all round development of the society, till 2000 emphasis on health activities by NGO was not up to the desirable mark and only 26,649 NPIs were engaged in health services. On the other

hand, 32,718 NPIs were established/engaged in health services/activities during the period of 2001 to 2008, and altogether, only 2 per cent NGOs are engaged in health sector in the country. In Nagaland, trend of involvement and engagement of NGOs in health sector is quite similar with national trend as presented in Table 5.

Table 5 : Distribution of Traced NPI in Nagaland by Purpose/Sector

Purposes or Sectors	Number of Traced Societies records received by CSO from Nagaland								
	Culture and Recreation	Education and Research	Health	Social Services	Development and Housing	Religion	Unions	Others	Total
Frequency	379	208	53	1267	63	41	160	109	2280
%	16.6	9.1	2.3	55.6	2.8	1.8	7.0	4.8	100

As a result, involvement of NGOs in health sector is relatively new and extension activities / implementation procedures is not standardised in situ. So, it is important to examine the existing ways to implement the developmental work by NGOs in health sector. Table 4 shows that 'Awareness' was the highest emphasised activity under health and allied work and 82 per cent of NGOs considered that the awareness creation about health and allied issues in people was the most important

extension work or activity. 'Training' was the second important and preferred activity to reach, support and tackle the problems of people related to health and allied issues, which was emphasised by 78 per cent of NGOs. 'Free Medicine' distribution to beneficiaries was an important extension activity to tackle the problems related to health and allied issues and support the target people, and it was highlighted by 64 per cent of NGOs, while 58 per cent of NGOs

emphasised on 'Health Camp'. Table 4 also shows that 'Post-natal care' of mother and baby was emphasised by 40 per cent of NGOs, followed by 31 per cent of NGOs who viewed and emphasised on 'Family Planning'.

Further, 64 per cent of NGOs informed that activities to address the HIV/AIDS as important work under health and allied issues and 60 per cent of NGOs informed that addressing drug addiction problem was their preferred area of activity. In Nagaland, rate of detection of HIV +ve cases are faster than other States of the country and problem of drug addiction is also in a vehement state. Accordingly, NGOs are giving emphasis on activities to address the HIV/AIDS or drug addiction problem (use/share of same needle for taking drug also is an important reason for transmission of HIV/AIDS virus). Roughly one-tenth of new HIV infections resulted from needle sharing (UNAIDS, 2007). Another study globally estimated that just one in five 'Injection Drug Users' may be infected with HIV (Mathers et. al, 2008). From the view of the experienced respondents, to address the HIV/AIDS problem or drug addiction problem is a complete cluster of extension activities and because of that reason separate nomenclature, i.e., "addressing HIV/AIDS problem" or "addressing drug addiction problem" was created where all the above activities may be included and some additional activities may also come.

The preferences of extension activities to implement the development initiative under health sector were explored and it is observed that large number of NGOs are continuing with general type of activities, viz., awareness, training, health camp, free

medicine, family planning etc., and these are most appropriate for basic health care services. Simultaneously, the study also explored that NGOs are continuing with specific type or cluster of activities to implement the more complex type of development initiative, viz., HIV/AIDS; Drug addiction problems under health sector.

Successful Development Work by NGOs in Health and Allied Sector and Reasons for Success

It is already accepted that inclusion of health and allied sector by NGOs in their development initiative is relatively new. Particularly, when a new sector is included and handled by a group of people with less experience and expertise in that field, it is essential to measure the necessity and degree of appropriateness of conducting any work in respect of time and place of work. Further, it should be evaluated about the correctness in technical and procedural approach adopted by the implementing agency.

To measure the impact and consistency of a developmental work, direct interaction and feedback from the beneficiaries is absolutely necessary, but in this study beneficiaries are not included. As a result, success and achievement of NGOs were taken into consideration to measure the consistency and appropriateness of conducting the development initiative.

Out of 45 respondents, 33 per cent of higher level of employees of NGOs reported many successful activities. All the successful works in health and allied sector with reason(s) for success are presented accordingly.

Table 6 : Successful Development Work in Health Sector Conducted by NGOs and Reasons for Success

S.No.	Successful work in health and allied field	Reasons for success
1.	Care and support to people living with HIV/AIDS	<ul style="list-style-type: none"> • Strong organisational set-up • Adequate flow of fund • Good support from target group, staff are committed and consistent in their work • Targeted people coming out for help
2.	Mainstreaming of drug addicted people	<ul style="list-style-type: none"> • Staff dedication and commitment • Proper sensitisation of drug users
3.	More than ten HIV affected people employed in various projects	<ul style="list-style-type: none"> • Staff dedication and commitment
4.	Provided nutritional support to 104 women living with HIV/AIDS	<ul style="list-style-type: none"> • Support from female employees • Dedication of subordinates

Table 6 shows the successful development work in health sector conducted by NGOs and reasons for success. Successful work in health and allied field was reported by 33 per cent of higher level of employees of NGOs. Table includes different sub-activities under health and allied sector which were accomplished by employees of NGOs, viz. care and support to people living with HIV/AIDS, mainstreaming of drug addicted people, employment of HIV infected people and nutritional support to the HIV/AIDS infected women. The reasons for success were as follows- strong organisational set-up, adequate fund flow, good support from target group, people were coming for help and strong commitment from staff.

As the study pertains to successful development work conducted by NGOs and reasons for success, respondents highlighted their achievement only from highly specialised / complex area. It can be assumed that NGOs

are more successful in handling and implementation of less complex work.

Conclusion

From the study it can be concluded that the inclusion of health and allied sector as a development initiative by NGOs was most appropriate in respect of inadequate availability of infrastructure and human resources in public health service sector. Further, the degree of severity and occurrence/ outbreak of most of the dangerous diseases and health problems in the study area is also strongly supporting the appropriateness of inclusion of it by NGOs. The selection of extension tools and techniques by NGOs to implement their development initiative in health sector was accepted as accurate and which makes it possible to achieve some remarkable successful results. 'Awareness' and 'Training' were the most preferred extension tools/activities to reach, support and tackle the problems of people related to health and

allied issues. All over the World, HIV/AIDS and Drug addiction are twin problems and sharing of needle for injecting drug used to accelerate HIV infection. Government of Nagaland and India may take initiative on priority basis to check the drug trafficking to control the

availability of drug, new addiction and HIV infection. NGOs are successful in treatment, mainstreaming and supporting of drug addicted and HIV+ve people and Government may take initiative to support all the existing NGOs and encash the potentiality.

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