

Nepal

UNICEF HIV and AIDS Programming Country Profile 2006

UNITE FOR CHILDREN
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HIV and AIDS in Nepal

The first case of HIV was reported in Nepal in 1988. At the end of 2005 UNAIDS estimates that 75,000 people are living with HIV/AIDS in Nepal.

The HIV and AIDS epidemic in Nepal is considered to be a "concentrated" epidemic. It means that HIV prevalence is concentrated among vulnerable groups with some groups exceeding prevalence rates of 5%. HIV prevalence has surpassed 5% in: female sex workers, injecting drug users and male migrants who return after work abroad. In addition, Nepal's political instability and insurgency created greater mobility, migration and urbanization. These have increase Nepal's susceptibility to the spread of HIV.

Most Nepalese with HIV do not know they are infected, and many of them may be engaging in unsafe sexual practices. Pervasive stigma and discrimination prevent these people and others in at-risk groups from practicing safer sex, undergoing testing and, if they know they are infected, from seeking treatment and care.

Without effective public health interventions, AIDS may become the leading cause of death for 15-49 year olds by the end of this decade. At present, there are only 23 functional voluntary counselling and testing sites in the country, 266 people living with HIV receiving antiretroviral treatment, and 6 hospitals offering services for prevention of mother-to-child transmission, which reach only 4 % of pregnant women with primary prevention.

Strategy and Objectives

In 2002, the Government of Nepal finalised a five-year Strategic Plan to guide an expanded response to HIV and AIDS. The 2002-2006 strategy focuses on better prevention, control, care and support, and voluntary counselling and testing efforts to stop the spread of HIV into the general population. The strategy emphasised prevention as the mainstay for effective response, and it highlighted the need to provide care and support for people infected and affected by HIV/AIDS. The 2002-2006 strategy identified five objectives:

- ⓧ Prevent HIV and sexually transmitted infections among vulnerable groups
- ⓧ Prevent new HIV infections among young people
- ⓧ Ensure care and support services are available and accessible for all people infected and affected by HIV/AIDS
- ⓧ Expand monitoring and evaluation activities through evidence-based effective surveillance and research
- ⓧ Establish an effective and efficient management system for an expanded response

Under the framework of the National Strategic Plan, UNICEF supports the government and NGOs to accelerate effective approaches to HIV prevention, care and support. There are presently four main areas of programme focus for UNICEF in Nepal:

- ⓧ Adolescent HIV Prevention
- ⓧ Prevention of Mother to Child Transmission of HIV
- ⓧ Paediatric HIV/AIDS treatment, care and support
- ⓧ Protection, care and support for children affected by HIV and AIDS

During 2006 a new National Strategic Plan for 2007-2011 is being developed under the framework of the Universal Access approach. UNICEF is one of the major partners assisting with the development of this strategy.



Vulnerabilities and risks facing children and young people

- ⓧ Socio-economic disadvantage and exclusion – particularly of girls and young women
- ⓧ Low levels of literacy and education
- ⓧ Widespread child labour
- ⓧ Conflict and insecurity leading to internal migration and displacement
- ⓧ Lack of fulfilment of the rights of children and adolescents
- ⓧ Trafficking of girls and women for sex work
- ⓧ Employment migration
- ⓧ Increased internal mobility and urbanisation
- ⓧ Increasing injecting drug use with widespread needle sharing
- ⓧ Pervasive stigma and discrimination against people living with HIV/AIDS

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HIV and AIDS Estimates

(Source: UNAIDS, Report on the Global AIDS Epidemic 2006)

Number of people living with HIV	75,000
Adults aged 15 to 49 HIV prevalence rate	0.5
Adults aged 15 and over living with HIV	74,000
Women aged 15 and over living with HIV	16,000
Deaths due to AIDS	5100

UNICEF's HIV and AIDS Programme Areas

Prevention: Reduce adolescent risks and vulnerability to HIV by increasing access to and use of gender-sensitive prevention information, skills and services.

More than 40 percent of the population in Nepal is under age 15. Children and young people have little access to information, condoms, counselling and testing.

It is currently estimated that 2.6 million children 5–14 years engaged in various forms of child labour. The number of injecting drug users is increasing and data indicate that risk behaviours are widespread among this group as well as among sex workers, their clients, labour migrants, and young people. Highest rates of HIV have been identified in injecting drug users.

Furthermore, the ongoing conflict has greatly increased the number of young people migrating. Some of these end up living in the streets and street children are the most vulnerable groups to sexual exploitation.

Current programmes

⌘ National Life Skills-Based Education Programme (LSBEP)

UNICEF has catalysed and provided ongoing technical support and funding to the government to ensure integration of behavioural-outcomes focussed life skills-based education into the curriculum for grades 1-10. The programme has a specific focus on HIV/AIDS and drug use prevention, but also covers broader health issues.

⌘ Life Skills-Based Education in out-of-school programmes

Partnering with the NGOs Innovative Forum for Community Development (IFCD) and Oxygen Research and Development Forum (ORDF) UNICEF has designed and is supporting an out-of-school LSBE project for highly vulnerable adolescents in priority districts.

⌘ Edutainment - Chatting with my Best Friend

"Chatting with my Best Friend" is an innovative radio programme by and for young people which is aired weekly by the national and local radio stations. Now in its fourth year, the programme addresses various life skills and is popular among young people. Since its inception, it has received more than 18,000 letters and continues to receive 50 e-mails per week. Among others, it focuses on problems of HIV and AIDS among adolescents. Their worries and concerns are addressed in the programme. To date, 500 listeners clubs have been formed around the country.

⌘ Youth Friendly Multipurpose Centres

Youth Friendly Multipurpose Centres are being piloted in four focus districts working with local community organisations. These will be gradually expanded in the 15 priority Districts for UNICEF and major municipalities.

Future Programming Priorities

- ⌘ Implement communication campaign (media) for youth on HIV and life skills
- ⌘ Most at risk and out-of-school adolescents (10-19) will have completed Life Skills Based Peer Education in seven priority districts
- ⌘ Support core peer educators through mobile video van, young peoples community dialogue meetings, discussion groups, street drama



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Saathi Sanga Manka Kura (Chatting with my Best Friend) is a radio program designed to impart life skills to teenagers. This hour-long programme has now been running for four years, each Saturday afternoon, and is rebroadcast on a number of FM stations. It receives about 1,500 letters and another 200 or so emails each month. Most of the letters deal with personal problems - sexual behaviour, personal hygiene, relationships and HIV/AIDS. The peer-to-peer approach helps break the silence surrounding physiological and emotional curiosities that come naturally with puberty. An estimated 4.5 million young people and an unknown number of adults listen to the programme regularly. November, 2004

Targets

- ⌘ By the end of 2007, overall Knowledge, Attitude, Life-Skills and Sexual Behaviour (KASB) related to HIV and drug/substance use prevention among adolescents (10-18) will have increased



© UNICEF ROSA/Binita Shah – Kale Magar and his wife Gyani say that their family is complete now and do not want more children.

Target

By 2008, the PMTCT programme scaled up from 6 sites to 9 sites and providing quality PMTCT services including, comprehensive care, treatment and support

All identified HIV-positive pregnant women have access to comprehensive PMTCT plus services and follow-up

PMTCT Plus: Reduce HIV infection among pregnant women and prevent transmission of HIV to their infants.

With technical assistance from UNICEF, a National PMTCT Working Group was established in 2004. Since then, National PMTCT guidelines have been developed and disseminated, staff trained, health and community workers sensitized – all leading to the opening of three comprehensive PMTCT sites in hospitals in mid-2005.

Three additional locations offering comprehensive PMTCT in tertiary facilities were opened in early 2006.

Future Programming Priorities

- Update protocols and training materials
- Integrate PMTCT services into existing programmes, i.e. routine ANC and maternal and child health (MCH) services
- Training of health staff
- Strengthen ANC services including the screening and treatment of STIs
- HIV positive mothers will be counselled and provided adequate information on infant feeding options
- Strengthen adherence to universal precautions at all sites
- Strengthen referral with Voluntary counselling and testing, Anti Retroviral Treatment, Public health centres, Youth friendly information centres, Youth friendly health services

Paediatric treatment: Universal access of HIV infected children to treatment, care and support.

WHO/UNAIDS estimated that in 2003 there were 940 children below the age of 15 years living with HIV/AIDS in Nepal. At the end of March 2006, 184 cases have been officially reported. .

UNICEF is currently supporting Nepal in drafting Paediatric AIDS guidelines which is in the final stages. Treatment of Paediatric AIDS will start in 2006 following the training of paediatricians.

Future Programming Priorities

- Training of health workers and counsellors on friendly, quality counselling & testing, PMTCT and paediatric AIDS care and treatment
- Develop/reproduce IEC/communication tools/materials and carry out social mobilization activities to increase awareness on PMTCT/Paediatric AIDS
- Strengthen capacity of networks of PLWHAs that provide psychosocial and peer support services for HIV positive women, children and adolescents
- Procuring back-up supplies and medical equipment
- Establishing monitoring tools and mechanism, conducting supervision and monitoring

Targets

- All identified HIV-exposed babies receive cotrimoxazole prophylaxis
- All identified HIV-positive children have access to drugs, medicines and treatment for opportunistic infections.
- All identified HIV-positive children who require it, have access to appropriate ARVs.

Protection, care and support for children affected by HIV/AIDS:

Increase the proportion of children orphaned and made vulnerable by HIV/AIDS receiving quality family, community and government support, including education, healthcare, nutrition and psycho-social support.

Targets

✂ Increased support for basic education and health services of orphans, vulnerable children living in families affected by HIV/AIDS

✂ By 2008, at least 5 high prevalence districts have increased health care access and school attendance ratio of orphans

In 2003 UNICEF Nepal conducted an assessment of children affected by HIV/AIDS which identified a serious and growing problem. Since then little action has been taken and UNICEF has now prioritised support to the government for development of an action plan.

Future Programming Priorities

✂ A national strategy/action plan for orphans and vulnerable children (OVC) living in families affected by HIV/AIDS developed

✂ District level duty bearers (district development committee, district child welfare committee, paralegal committee, women's group, local NGOs) trained on basic rights of AIDS affected OVC and provision of services

✂ Rapid assessment on OVC's access to services conducted in the target districts

✂ Services for OVCs provided through NGOs and children's organization in the target districts

✂ Advocacy and sensitization campaign for target communities conducted

Partnerships

In addition to strong partnerships with the government at all levels, and with NGOs and community organisations, UNICEF Nepal is working closely together with religious leaders. In 2005, a beginning was made in engaging religious leaders in the programme. A training course was organised for religious leaders of different faith, who in turn went to their work places and used their knowledge for advocacy during appropriate times. The result so far has been encouraging.

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© UNICEF ROSA/Piers Benatar – Nepal: Nine-year-old Ashmitta Chettri cares for her siblings and does domestic work before and after school.

Relevant Documents:

National HIV/AIDS strategy (2002-2006); National Centre for AIDS & STD Control, January 2003.

National Guidelines; Prevention of Mother-to-child transmission of HIV in Nepal: National Centre for AIDS & STD Control, January 2005.

National Cumulative data on HIV/AIDS; National Centre for AIDS & STD Control, April 2006.

Prevention of Mother to Child Transmission of HIV in Nepal: Situation Assessment and Recommendation; UNICEF, July 2004.