



ANNUAL REPORT

2076/77 (2019/20)

National Association of People Living with HIV/AIDS in Nepal (NAP+N)
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FOREWORD

Sixteen years ago, recognizing the urgency to address the issue of HIV and AIDS and the number of lives that were being forgotten and marginalized, National Association of PLWHA in Nepal (NAP+N) was founded. Since then the involvement of PLHIV themselves has contributed a lot to the achievement that our country has made. It gives me great pleasure to present NAP+N's Annual Report, which outlines our major achievements over the fiscal year 2019/20. This Fiscal Year can be divided into two part, the normal part prior to COVID-19 Pandemic and the lockdown phase. It has been a very difficult year for all of us is an understatement. We had to work very hard to somewhat control the situation and protect our people like us.

COVID-19 is known to be particularly dangerous for those with underlying health conditions and as a National Network of PLHIV in Nepal we had think about the problems it may bring to our community and act accordingly. Ensuring every single PLHIV (Approx. 19K) on ART have their stock before the government impose lockdown was very important and our partner CBOs worked very hard to deliver ARV making sure that nobody misses out. Preventing Stock out of ART was another important issue we had to deal with, Shipment of ARV was stuck in Custom for a long time. We relentlessly played our part to bring that ARV in to our Logistics Management Division (LMD) so that it could be circulated to various ART Centers. Nepal was to make transition of NNRTIs based regimen (NVP and EFV) to new ARV regimen (DTG) a long time ago but due to various reasons it could not happen and during the lockdown we were forced to do. Making transition to Dolutegravir came at a wrong time, hospitals where PLHIVs were seeking regular services was turned into Corona Dedicated Hospital in some districts. Testing facilities was limited and bringing all PLHIVs to the hospital for test was impossible. We managed to work very hard to overcome this issue.

Providing Food to the table that was another very important things we had to make sure because lockdown prevented most of us to work and no work means no money. So we managed to arrange some support to the CLHIVs, Ultra Poor PLHIV, Widow Women and PLHIV above 45 through Global Fund and many more PLHIVs were linked for support which Local Government provided.

Securing Fund for 2021-24 was also in high priority, we managed to play our part properly. Organizing Community Consultation, bringing the voice from grass root level which was incorporated in the country proposal submitted to Global Fund. Our negotiation with other donor agencies also went well, managing to secure fund for 2021-24. Providing Network's support to the proposal writing team as usual.

Our achievement this year might have dropped in some indicators but as a President I am Proud of my team and the tasks they performed during this very difficult time, the dedicated CHBC teams in all districts worked very hard to ensure everyone gets their stock of new ARV and has no/less side effects. Our experienced Program Monitoring Unit (PMU) deserves extra credit for managing everything, the support they provided to the CBOs level as well as working in close coordination with Government body and INGOs, are much appreciated.

Thank you very much.

Rajesh Didiya

President

National Association of PLWHA in Nepal (NAP+N)

ABBREVIATION

AHF	: AIDS Healthcare Foundation
AIDS	: Acquired Immuno-Deficiency Syndrome
APN+	: Asia Pacific Network of PLHIVs
ARI	: Acute Respiratory Infection
ART	: Anti-Retroviral Therapy
ARV	: Anti-Retroviral Drugs
CABA	: Children Affected by AIDS
CBOs	: Community Based Organizations
CCC	: Community Care Centers
CCM	: Country Coordinating Mechanism
CHBC	: Community Home-based Care
CLHIV	: Children Living with HIV
CSS	: Community System Strengthening
DR TB	: Drug-Resistant Tuberculosis
FHI	: Family Health International
FNAC	: Fine Needle Aspiration Cytology
GFATM	: Global Fund to Fight AIDS, Tuberculosis & Malaria
GIPA	: Greater Involvement of People Living with HIV & AIDS
HIV	: Human Immuno-Deficiency Syndrome

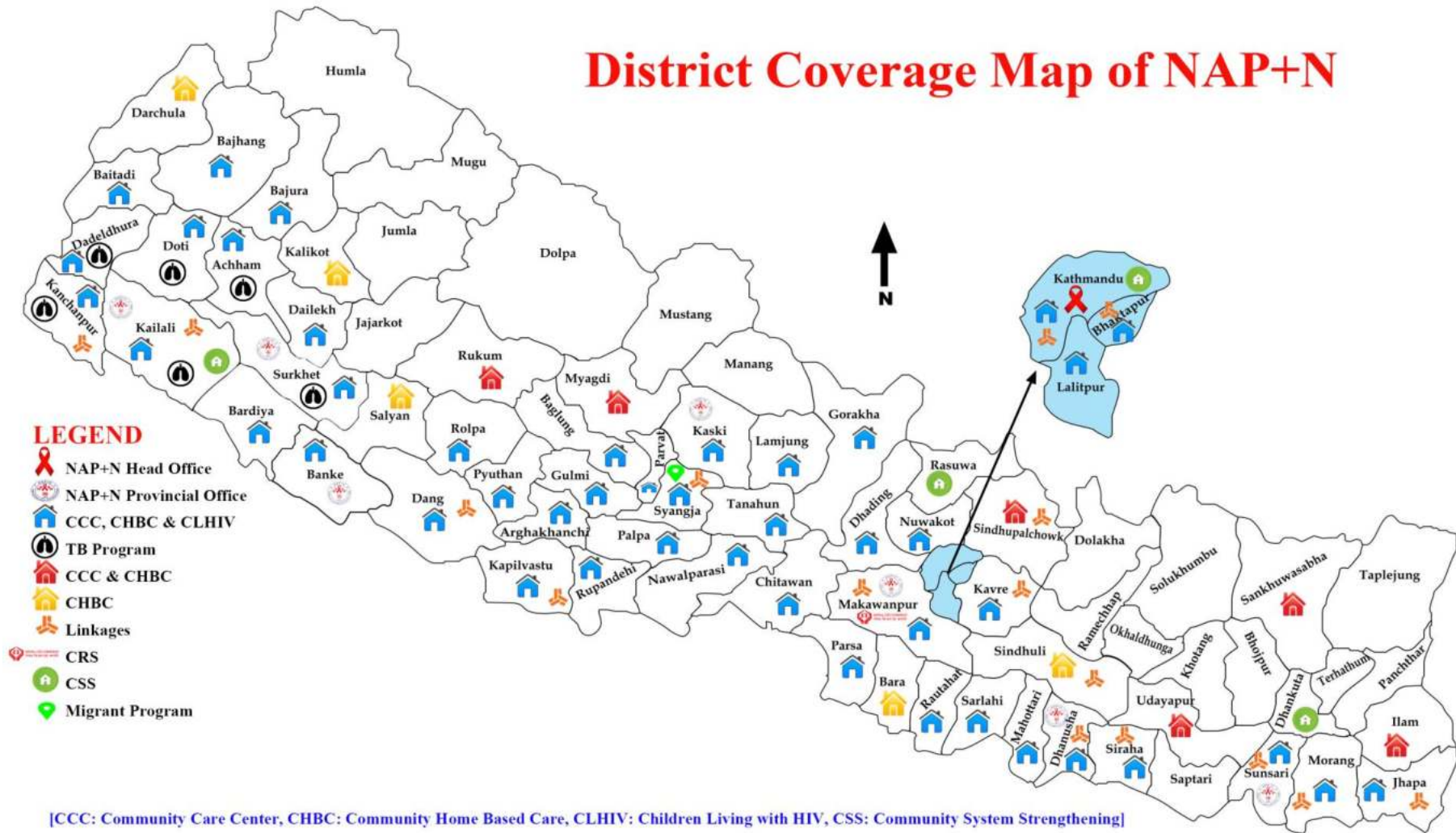
Hep C	: Hepatitis C
IDUs	: Injecting Drug Users
INGOs	: International Non-Government Organizations
IPT	: Isoniazid Preventive Therapy
IRRTTR	: Identify, Reach, Recommend, Test, Treat and Retain
KPRA	: Key Population Research and Advocacy
MTB	: Mycobacterium Tuberculosis
NCASC	: National Centre for AIDS and STD Control
NGOs	: Non-Government Organizations
PBC	: Pulmonary Bacteriologically Confirmed
PLHA	: People Living with HIV & AIDS
PLHIV	: People Living with HIV
RR-MTB	: Rifampicin Resistant Mycobacterium Tuberculosis
S & D	: Stigma and Discrimination
STIs	: Sexually Transmitted Infections
TB	: Tuberculosis
UN	: United Nations
VCT	: Voluntary Counseling and Testing

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COVERAGE MAP

District Coverage Map of NAP+N



INTRODUCTION

MISSION:

Strengthen the voice of PLHIV through formation and strengthening of networks and association of PLHIV to respond to the challenge of HIV and AIDS

VISION:

Create a favorable environment for to access treatment, care and support for PLHA and ensure their quality of lives in Nepal.

GOAL:

To improve quality of life of PLHIVs to respond to the challenges faced by PLHIVs through Greater and more meaningful involvement of PLHA (GIPA) in program and policy development.

TARGET GROUPS:

All people of Nepal Living with HIV and AIDS are the main target for positive prevention.

- Injecting Drug users (IDUs)
- Sex workers (FSWs)
- Client of Sex workers (CSWs)
- Male Sex with Male (MSM-Sexual minorities) and
- Seasonal Labor Migrants (SLMs) and their spouses
- People Living with and affected by TB

ABOUT NAP+N

Introduction of the organization

The National Association of People living with HIV and AIDS (NAP+N) was established after the first national consultation of PLHIVs in 2003. This historic event, succeeded in bringing 30 PLHIV participants from across the country to agree to one common goal: **to unite all those living with the virus in Nepal and fight back.**

NAP+N has focused on building the capacity of local PLHIV groups in different districts to respond appropriately to the needs of PLHIVs in area of advocacy (remove the existing stigma and discrimination), treatment, care and support, counseling, raising community awareness, providing information and education and improving access to the healthcare and legal services. Besides these NAP+N is supporting people living with HIV on income generating activities by providing them small seed money. NAP+N is working to make changes in each people living with HIV in Nepal.

At the national level, NAP+N represents in different national forums, HIV Board and CCM as well represents in various national committees and works closely with NCASC, UN theme groups, governments, national and international organizations. Internationally, NAP+N have formal relationships with numerous national and international agencies including Global Fund, Save the Children, USAID, Pooled Fund, AHF, APN+, Nepal CRS Company. Since, NAP+N has a good relationship with international organizations working in the area of HIV we have to expand our hands more for other civil societies, corporate and business houses, individual philanthropist. So, that we can achieve the national goal, which seems more sustainable too.

NAP+N is committed towards the promotion of autonomy and empowerment of PLHIVs which will help them make informed decision. NAP+N ensure that PLHIVs are in the forefront of policy making debates and their meaningful involvement at all levels is essential. The network is working towards multi-sectored collaboration and aims to develop strong working partnership with

Non-Governmental Organizations (NGOs), the government (GOs) and other informal sector/private sectors (corporate and business houses).

Currently there are over 75 organizations affiliated to NAP+N. NAP+N currently has 7 Provincial offices in Dharan (Province 1), Janakpur (Province 2), Chitwan (Bagmati Province), Pokhara (Gandaki Province), Nepalgunj (Province 5), Surkhet (Karnali Province) and Dhangadhi (Sudurpaschim Province). NAP+N has its central secretariat in Baluwatar, Kathmandu.

The NAP+N and other Provincial Offices are responsible for formulating programs as per policy and plans, implementation, use of financial resources and accountability, and monitoring and evaluation. NAP+N works on network strengthening by providing assistance to 7 Provincial offices and the central Secretariat with the support from FHI/Linkages Nepal project and Save the Children/Global Fund. Similarly Save the Children/Global Fund has supported to implement the Key Population Research and Advocacy (KPRA) project on Hepatitis C & HIV Co-infection.

From few years NAP+N has expanded its network to bring the grass root level organization in one umbrella, approaching the different mobilization for its members, also by exposing PLHIVs in the society for positive prevention and capacity building of the grass root level organizations.

Objectives

- To act as an umbrella organization for PLHIV led organizations in Nepal and ensure universal access on treatment and care of PLHIV in Nepal.
- To organize capacity building programs to strengthen the network and its member organizations.
- To build network and alliance with international PLHIV organizations to foster HIV response.
- To advocate lobby and facilitate mainstreaming of PLHIV issues in the National agenda.

- To increase meaningful involvement of PLHIV including key populations to achieve national goals in response to HIV epidemic in Nepal.
- To facilitate and improve access to treatment, care and support for PLHIVs in Nepal.
- To represent Nepalese PLHIV in international policy decision making bodies, associations, conferences and various platform.
- To strengthen the active involvement of media, politicians, private sectors and civil society to act against stigma and discrimination related to HIV.

Human Resource

NAP+N has an inclusive human resource policy. In 2020, NAP+N has altogether 168 staffs in different projects (The Global Fund: HIV Program, The Global Fund: TB Program, KPRA, Migrant Program, Repackaging Project & FHI/LINKAGES Project) and 5 volunteers, of whom 77 are men and 91 are women. NAP+N has enormous range of diverse staffs in its team (i.e. Religion, Ethnicity, KPs to Professional, youth to experienced, gender to gender etc.) and we are positively progressing in terms of diversifying our staff configuration.

NAP+N itself currently has two levels i.e. Provincial and Central level. NAP+N has its central secretariat in Baluwatar, Kathmandu, which is responsible for strategic planning, project and program design, donor counterpart and partner relations, concluding project and program agreements, financial management, policy and goal setting, organizational structure, staffing, implementation of project and program activities, monitoring and evaluation. And, Provincial offices of Dharan, Janakpur, Chitwan, Pokhara, Nepalgunj, Surkhet and Dhangadhi are responsible for execution of programs, advocating for the rights of the PLHIV, raising the issues of PLHIVs.

2076/77 BY THE NUMBERS

Community Care Center (CCC) Services

District Covered	52
Number of New PLHIV received services from CCC	2103
Number of Follow-up PLHIV received services from CCC	5120
Number of PLHIV admitted to CCC to start ART	684
Number of PLHIV received counseling services from CCC	2103
Number of PLHIV (New & Old) received nutritional support from CCC	7223

Community and Home Based Care (CHBC) Services

District Covered	57
Number of New PLHIV who received CHBC services	1924
Number of Total PLHIV (New & Old) who received CHBC services	10816

CLHIV Cash Transfer Program

District Covered	46
Children enrolled in Cash Transfer (End of FY)	1319

TB Program

District Covered	6
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Courier System

No of Dots Center linked in Courier System	238
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Number of Sputum of Presumptive TB cases collected for courier	5464
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Number of TB cases diagnosed at Sputum Microscopy	155
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Contact Tracing

Number of Visits to Household of PBC and all Child cases	1471
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No of family members screened for TB	7141
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No. of family members identified as presumptive TB and referred or sputum collected for sputum Examination	1343
--	------

No. of MTB cases detected in GX	1
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Childhood TB Management

No. of presumptive child TB cases referred to hospital for diagnosis (HF Level)	180
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No. of child TB cases clinically diagnosed (HF Level)	3
---	---

No. of children identified as presumptive TB examined for TB (Hospital Level)	2062
---	------

No. of child TB cases clinically diagnosed (Hospital Level)	16
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DR TB Management

No. of sputum samples of presumptive DR TB cases examined by GX	228
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No. of Rifampicin Resistant TB (RR-MTB) cases detected	7
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No. of family members identified as presumptive TB and collected sputum for examination	39
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No. of RR MTB TB cases detected	2
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IPT

Number of children (<5 years of age) eligible for TBPT	246
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No. of children (<5 years of age) enrolled under TBPT	163
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No. of children completed TBPT course	178
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Community System Strengthening (CSS)

District Covered	4
Number of PLHIV received Treatment for Ultra Poor	135
Number of PLHIV received Treatment Support (Districts)	376
Number of PLHIV received Nutrition Support	515
Number of PLHIV received Hygiene Support	511

Viral Load Sample Collection

Sample Collection Sites	39
Sample Collected	7509

HIV Testing through Community Led Testing (CLT)

Screened	5366
Reactive	209
Confirmed	202
Linked to ART	195

Migrant Program

District Covered	1
<u>Behaviour Change Program (BCC)</u>	
Number of other vulnerable population reached with HIV prevention programs - defined package of services	468
<u>HIV Testing and Counseling (HTC)</u>	
Number of other vulnerable population that have received HIV test during the reporting period and know their HIV status	62
<u>TB-HIV</u>	
Number of vulnerable population Screened for TB	405
Number of TB presumptive referred for sputum examination and linked to existing TB SR package	2
<u>Condom Distribution</u>	
No. of condom distributed	747

LIST OF PROJECTS

I. The Global Fund: HIV Program

NAP+N has been implementing The Global Fund: HIV Program to implement care and support packages program in 57 districts through local PLHIVs led organization. This will fulfill the gap in HIV intervention program and will certainly support to achieve the goal established by the nation. Furthermore, they are mobilizing PLHIV to work for PLHIV which helps to address all needs and issues related to PLHIVs. As a result, the program has achieved its best outcomes in these years. By knowing these facts, Government has also developed the strategy to involve the PLHIV led organization for implementing the Targeted Intervention program for PLHIVs.

Project Goal:

To achieve optimized IRRTR 90-90-90 by 2020 and ending AIDS by 2030.

Working Districts:

Darchula, Baitadi, Dadeldhura, Bajhang, Bajura, Doti, Achham, Kanchanpur, Kailali, Kalikot, Dailekh, Surkhet, Salyan, Bardiya, Banke, Rukum, Rolpa, Pyuthan, Dang, Gulmi, Arghakhanchi, Kapilvastu, Myagdi, Baglung, Parvat, Kaski, Syangja, Palpa, Rupandehi, Lamjung, Tanahun, Nawalparasi, Gorkha, Chitwan, Dhading, Nuwakot, Makwanpur, Kathmandu, Bhaktapur, Lalitpur, Sindhupalchowk, Kavre, Sindhuli, Parsa, Bara, Rautahat, Sarlahi, Mahottari, Dhanusha, Siraha, Saptari, Udayapur, Sunsari, Sankhuwasabha, Morang, Jhapa & Ilam.

Target Population:

People Living with HIV and AIDS (PLHIVs) and their families.

Project Period:

1st January, 2020 to 31st December, 2020.

Funding Agencies:

Global Fund through Save the Children International.

*In addition to this, Global Fund to Fight AIDS, TB and malaria supported countries that apply for grants to develop and scale up programs to remove human rights-related barriers to health services. In fulfillment of this objective, the Global Fund has undertaken a special initiative, **“Breaking Down Barriers”** in which 20 countries, including Nepal, have received **catalytic funding** to reduce human rights and gender-related barriers to services for HIV and TB. Human rights-related barriers remain major obstacles to the uptake of prevention, treatment and care for HIV, TB and malaria. A baseline assessment of human rights-related barriers to HIV and TB services and existing programs to reduce them was carried out in Nepal in June 2017. The assessment data was used as a baseline for subsequent reviews to assess the impact of scaled up programs in reducing human rights-related barriers to services. Therefore, the project **“Reducing Human Rights and Gender related barriers accessing HIV and TB services in Nepal”** is developed and implemented in 58 districts across all 7 Provinces of Nepal, where HIV Care & Support Program is implementing.*

II. “Scaling up coverage and quality of HIV and AIDS prevention targeted to most at risk Population and treatment care and support service to PLHIV in Nepal”

Since 2009, NAP+N is the partner organization of Save the Children International. NAP+N has been implementing project on “Scaling up coverage and quality of HIV and AIDS prevention targeted to most at risk Population and treatment care and support service to PLHIV in Nepal” supported by Global Fund as sub recipient and is currently implementing it through its member CBOs in 4 districts.

Project Goal:

To achieve optimized IRRTR 90-90-90 by 2020 and ending AIDS by 2030.

Working Districts:

Dhankuta, Rasuwa, Kailali & Kathmandu.

Target Population:

People Living with HIV and AIDS (PLHIVs).

Project Period:

1st January, 2020 to 31st December, 2020.

Funding Agencies:

Global Fund through Save the Children International.

III. HIV care and support services among PLHIV in Nepal

NAP+N has been implementing a project on “HIV care and support services among PLHIV in Nepal” supported by LINKAGES Nepal. Since 2005, this program is continuously going on. NAP+N has conducted a training needs assessment and various need-based training and capacity building workshops including network and project management, evidence-based advocacy and management information systems. NAP+N also serves a crucial role in increasing the capacity of member organizations in the districts. NAP+N has also coordinated with the Saath Saath project implementing partner agencies in the districts to improve coordination efforts in and resource allocation for HIV programming in the districts. Its main target is to link PLHIV to care and services through the demand generation with the help of conducting literacy sessions and support group meetings. It promotes evidence-based advocacy. LINKAGES Nepal also helps

to link the PLHIV in CCC, CHBC, CHLHIV, Cash transfer and other services that enhance the quality of life. It also helps to promote the information, advocacy events, and news through social media so that community and related stakeholders can be updated about the current situation.

Project Goal:

Increased demand generation and availability of comprehensive prevention, care and treatment services, including reliable coverage across the continuum of care for KPs.

Working Districts:

Five Development Regions (Kathmandu, Bhaktapur, Jhapa, Morang, Sunsari, Kapilvastu, Rupandehi, Makwanpur, Kaski, Banke, Dang, Kailali and Kanchanpur) of Nepal.

Target Population:

People Living with HIV and AIDS (PLHIVs), Secretariats of Central and Five Provincial offices of NAP+N.

Project Period:

1st October, 2016 to 30th September 2020.

Funding Agencies:

LINKAGES Nepal

IV. TB Program

TB is one of the most widespread infectious disease in Nepal which becomes the major public health problem. Tuberculosis (TB) is responsible for high morbidity among thousands of people every year in Nepal. TB ranks as the sixth leading cause of death in Nepal. According to Nepal National TB

Prevalence Survey (2018-2019), there are 117,000 people with TB disease are living in Nepal today. Around 69,000 people developed TB in 2018. The survey also shows that annual incidence of TB has declined by 3% which is a very positive sign.

Currently NTC has implementing Tuberculosis program by two modalities that is one through existing government system and another is through SR method through NGO partnership. NAP+N, Save the Children (SCI) & National Tuberculosis Centre (NTC) agree to work collaboratively to carry out the National Tuberculosis Program and to facilitate the delivery of services to the beneficiaries in Surkhet, Achham, Dadeldhura, Doti, Kailali & Kanchanpur is also one of the implementing partner of Save the Children to run Tuberculosis program in Karnali Province and Sudurpaschim Province. The main strategic interventions include active case finding, enrollment in treatment and Childhood TB prevention Through Isoniazide Preventive Therapy.

Project Goal:

Support National Tuberculosis Program to achieve 'End TB Strategy' goal adopted by World health organization.

Working Districts:

Surkhet, Achham, Dadeldhura, Doti, Kailali & Kanchanpur.

Target Population:

- TB and DR/TB suspects, patients, TB patients and their close contacts.
- HIV infected/affected vulnerable groups and
- Prisoners, migrants, street children, slum dwellers, factory workers, hard to reach populations and health care workers.

Project Period:

1st January, 2020 to 31st December, 2020.

Funding Agencies:

Global Fund through Save the Children International.

V. The Global Fund: Migrant Program

The project of HIV/TB for migrants and their spouses is supported by Save the Children under Global Fund with specific focus towards HIV prevention program by targeting to Migrant and their Spouse. This project will be implemented for providing comprehensive prevention packages, HIV/TB testing, counseling and referral services to the targeted population in Syangja district. NAPN at district level will work closely in coordination with community based organizations, rural/municipalities of Syangja, department of Health at rural/ municipal level, District Health Office, Health Post and Sub-health Post, CBOs and other organization to ensure the smooth running of the project and the achieve the desired goal.

Project Goal:

The overall goal of the project to achieve 90-90-90 targets through IRRTTR approach by 2020 through the provision of HIV/TB testing and counseling services among migrant and their spouses in Syangja district.

Working Districts:

Syangja district.

Target Population:

Migrants and their spouses

Project Period:

February, 2020 to February, 2021.

Funding Agencies:

Global Fund through Save the Children International.

VI. Evidence based Advocacy on community based testing and monitoring of quality services for key populations (KPRA Project)

National HIV strategy 2016-2021 has also addressed PWID and TG population as key populations and recommended for institutionalize, identify, reach, recommend, test, treat and retain for all key populations in order to minimize HIV transmission. Community led and driven responses are essential for scaling up HIV prevention and treatment services for meeting the targets of 2020. For this, the role of community in prevention and testing is central. Capacity of people living with HIV and key population led networks to be strengthened in areas of researches, community based studies and gather evidence that can be interpreted into the effective tailored advocacy strategies.

The program gather evidence for community led prevention and testing services amongst KPs, assess policies, laws, legislation and other barriers as well as community-based testing that affect access to HIV services including HIV prevention, testing, treatment and other services associated for PWID and transgender people and developed advocacy strategies for programmatic intervention at that are community initiatives. Good practices and lessons learned of the project will advocate and tailor in national HIV response. This project has envisioned and designed to contribute national HIV responses in meeting 90-90-90 targets therefore the project will work closely with national HIV program actors.

Project Goal:

The overall goal of this program is to strengthen community capacity to improve access to quality HIV prevention, testing, treatment, care and support services among key populations in Nepal.

Working Districts:

Lalitpur, Chitwan & Kaski.

Target Population:

- People Living with HIV & AIDS
- People Who Inject Drugs
- Transgender People

Project Period:

April 2018- December 2020

Funding Agencies:

Global Fund through Save the Children International.

VII. Repackaging Project (Income Generating Activities)

Nepal CRS Company is a pioneer social marketing company in Nepal which is distributing low-cost family planning (FP) material, maternal and child health (MCH) and other health products through its innovative social marketing strategies. NAP+N and CRS Company agreed to work together to uplift the socio-economic status of KPs through generating employment opportunities for female living and affected by HIV. In this project more than twenty female KPs working under a same roof and repackage the family planning materials as per the need of Nepal CRS Company.

Project Goal:

Uplift the socio-economic status of female KPs.

Working Districts:

Makwanpur based repackaging unit.

Target Population:

- Female key populations.

Project Period:

July, 2019 - June, 2021

Funding Agencies:

Nepal CRS Company.

Our Works During COVID-19 Pandemic

COVID-19 has changed the lifestyle of each and every human kind. Due to this Pandemic situation, Nepal has imposed country LOCKDOWN which was not pleasant. LOCKDOWN affects the life of everyone in many ways. Health is the major area, this Pandemic hit very hardly. LOCKDOWN also deteriorate the situation of public health. Many people lost their lives not only because of COVID but also because of vehicle movement restriction/LOCKDOWN. As a National Network of PLHAs in Nepal we have also experienced lots of problems faced by People Living with HIV like the others and to save the life of PLHAs we also have tried our best to respond this critical situation. Some activities that we performed during LOCKDOWN are mentioned as follows:

S.N.	Description of major activities performed	No. of individuals benefited	Remarks
1	Number of adults and children living with HIV currently receiving C&S services outside facilities (CHBC)	6585	Head count
2	Number of new PLHIV receiving services from Community Care Centre (CCC)	718	Head count
3	No. of times distributed ARV to clients at their home	10467	Times count
4	No. of people get their ARV at their home	7464	Head count
5	Clients supported to change their regimen to TLD	2846	Head count
6	Nutrition distributed to CLHIVs (below 18 years)	1320	Head count
7	Nutrition distributed to ultra-poor PLHIVs	716	Head count
8	Nutrition distributed to FSW	43	Head count
9	COVID-19 Insurance of Staffs & Board Member	552	Head count
10	PPE Distribution to ART Sites	14	ART Sites
11	Partner Organizations get Mask, Hand Sanitizer & Gloves	52	Organizations
12	Food support to drug rehabilitation centers.	9	Rehabilitation centers
13	Response package distribution for COVID-19 Positive PLHIVs.	30	Head count
14	Treatment support to 63 ultra-poor PLHIVs	63	Head count

EVENTS

Some Picture of works during COVID-19 Pandemic







An old age woman of 65yrs. happy to get her medicines on her own door-step by CHBC Mobilizer during country LOCKDOWN. (Parshuram Municipality, Dadeldhura)



CHBC Case Tracker of Bishwasilo Aasha, Mr. Bali Das providing the ARV medicines to a client from Mahendranagar, Kshireshwornath Municipality, Dhanusa.

CHBC Mobilizer of Hamro Jeevan Plus providing ARV along with nutrition for CABA child in Ruru Rural Municipality, Gulmi.





A client from Birtamod Municipality receiving his ARV for a month.



Client of Gauriganga Municipality receiving ART at her premises.

Some Picture of Orientation/Training/Meeting



Child Safeguarding Training at Dhangadhi, Kailali



FCHV Onsite Coaching in Kailali



FCHV Orientation in Dadeldhura



FCHV Orientation in Syangja



S & D Training in Kavre



TB Review Meeting in Kailali



Semi-Annual Youth PLHA Meeting in NAP+N, Head Office



Pre service Orientation to Health Workers on Human Rights and Medical Ethics related to HIV/AIDS at Kathmandu



OCMC Orientation on issues of PLHIV at Gaur



Performing Street Drama in Palpa

Some pictures of National PLHA Consultation



Pictures of National Consultation at Chitwan

Pictures of Mobile HIV Testing



Pictures of Mobile HIV Testing camp from Syangja

Coordination with different stakeholders



Stakeholder meeting in Syangja



Coordination meeting at Janakpur of Province 2

FUNDING AGENCIES

- ❖ Save the Children/Global Fund
- ❖ Linkages Nepal/FHI
- ❖ Nepal CRS Company

OUR PARTNERS

Arambha Nepal, Gorkha	Lava Kush Ashram, Jhapa
Arun Plus Mahila Misrit Sarokar Kendra, Sankhuwasabha	Lava Kush Ashram, Illam
Asha Jyoti Sahayog Samuha, Rupendehi	Life Vs Addiction, Sindhupalchowk
Baitadi Plus, Baitadi	Lumbini Plus, Nawalparasi
Baitadi Plus, Darchula	Mahottari Paramarsha Sewa Kendra, Mahottari
Bajhang Plus, Bajhang	Makwanpur Positive Group, Makwanpur
Bajura Plus, Bajura	Maya Nepal, Rautahat
Bara Plus, Parsa	Nava Asha, Kanchanpur
Bara Plus, Bara	Nava Kiran Plus, Surkhet
Bishwasilo Aasha, Dhanusha	Nava Kiran Plus, Kailali
Chitwan Sakriya Women's Foundation, Chitwan	Nirnaya, Myagdi
Community Support Group, Kaski	Pratibaddha Sahayog Samuha, Palpa
Community Support Group, Parbat	Prayash Mahila Samuha, Udayapur
Community Support Group, Syangja	Pyuthan Plus, Pyuthan
Community Support Group, Tanahun	Rolpa Plus, Rolpa
Dadeldhura Plus, Dadeldhura	Saathi Samuha, Kathmandu
Dailekh Plus, Dailekh	Sakriya Plus Nepal, Kavre
Dang Plus, Dang	Samarpan Sahayog Samuha, Kapilbastu
Dang Plus, Rukum	Sandesh Sahayog Samuha, Argakhachi
Dhading Plus, Dhading	Sankalpa Sahayogi Samuha, Syangja
Dhading Plus, Lamjung	Sarlahi Plus, Sarlahi
Dharan Positive Group, Dhankuta	Shakti Milan Samaj, Kathmandu
Dharan Positive Group, Sunsari	Sharada Plus, Salyan
Dhaulagiri Positive Group, Baglung	Sindhuli Plus, Sindhuli
Godawari Plus, Kailali	Sparsha Nepal, Lalitpur
Hamro Jeevan Plus, Gulmi	Sparsha, Morang
Helping Hands Nepal, Bardia	Sparsha Nepal, Saptari
Jiwan Rekha Sewa Samaj, Siraha	Suruwat, Bhaktapur
Junkiri Mahila Samuha, Banke	The Creative Group, Kathmandu
Karnali Plus, Kalikot	Trisuli Plus, Nuwakot
Laligurans Ekta Samaj, Doti	Trisuli Plus, Rasuwa
	WAC-Nepal, Achham

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Bagmati Province Office, Hetauda,
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