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Teku, Kathmandu



Factsheet N 7: HIV Surveillance in Nepal, 2013

HIV Surveillance Activities in Nepal, 2013

- ✘ Nepal's priority in HIV surveillance is strengthening of the Second Generation Surveillance system including surveillance of HIV drug resistance.
- ✘ **Routine case reporting:** National Centre for AIDS and STD Control (NCASC) receives HIV and STI case reports from HIV Testing and Counseling (HTC) and PMTCT services sites.
- ✘ **Regular Integrated Biological and Behavioural Surveillance (IBBS) Surveys** among Key Populations at Higher Risk such as Sex Workers, People who Inject Drugs, Men having Sex with Men and Transgender People, Truckers (proxy of clients of female sex workers) and Labour Migrants to India are being conducted in selected high risk regions in every 2-3 years to track the changes in the HIV prevalence and associated risk behaviours. Now, it is planned to include Hepatitis B and C screening and associate risk behaviours in the ongoing IBBS surveys.
- ✘ **Routine programme monitoring data** such as people currently receiving anti-retroviral (ARVs), women receiving ARV and prophylaxis (PMTCT), people (young, adults, pregnant women and key populations at higher risk) tested for HIV, blood units screened for HIV, STI cases by population groups diagnosed and treated are received regularly. Data are also collected for TB screened among people living with HIV and vice-versa.
- ✘ Demographical and behavioral data from **special studies** such as Nepal Demographic and Health Surveys.
- ✘ **Researches** (including operational researches) generate evidence for improving programme coverage, quality and effectiveness, and so informing the policies and intervention designs.
- ✘ **Size estimation of key populations** at higher risk in districts has conducted in 2010. The population size is to update in 2-3 years interval.
- ✘ **HIV infection estimations and projections** are being done annually in Nepal based on upon available prevalence and population size data among population groups as well as the updated programme coverage of key interventions such as ART, PMTCT, TB-HIV. This provides estimates to track impact of interventions and ART and PMTCT needs. Nepal contribute to the regional and global estimates of epidemic update through UNAIDS/WHO calendar. Nepal contributes every year the country estimates to Global Epidemic Update through UNAIDS.
- ✘ **Sentinel surveillance** among key populations at higher risk, ANC attendees and STI patients are planned and to be started in the all regional, zonal and central level hospitals across regions.
- ✘ **Surveillance of HIV drug resistance**, including monitoring of early warning indicators is planned.
- ✘ **HIV surveillance results** are regularly disseminated to policy makers, programme managers, development partners other relevant stakeholders to ensure public health actions.
- ✘ National plan on surveillance of HIV and STI is updated regularly.
- ✘ NCASC developed and disseminated **National guidelines on HIV and STI** surveillance in Nepal have been disseminated to key stakeholders, policy makers, programme managers and donors.
- ✘ **National level Training of Trainers and roll out on HIV and STI surveillance** in Nepal with the objective to upgrade the understanding of HIV and STI Surveillance in Nepal, specifically on epidemic situation of HIV and STI, application of second generation surveillance systems, components and tools and use of surveillance data for public health action.
- ✘ NCASC is taking lead in HIV surveillance activities in Nepal, in technical collaboration with WHO, UNAIDS and USAID/FHI360 including the engagement of communities and people living with HIV.

Figure 1:
Stable HIV Prevalence below 2% among Female Sex Workers in Nepal

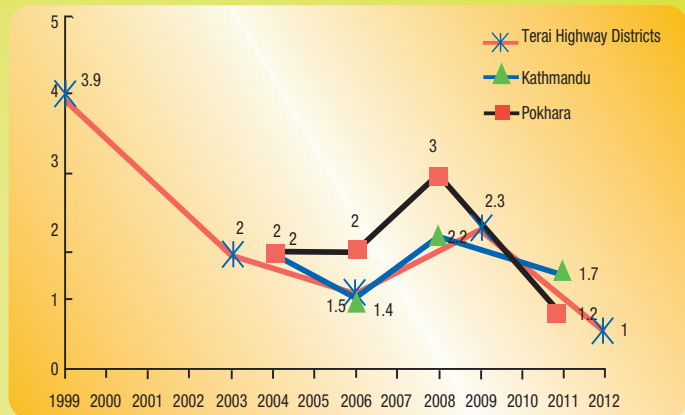


Figure 2:
HIV and STI Prevalence among Men who have Sex with Men in Nepal



Figure 3:
Declining HIV Prevalence among Injecting Drug Users in Nepal

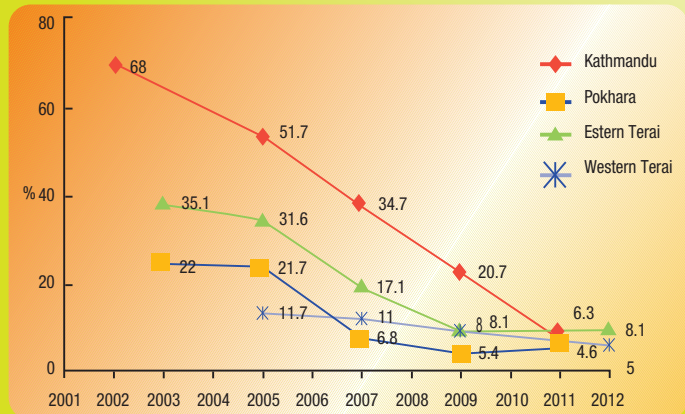
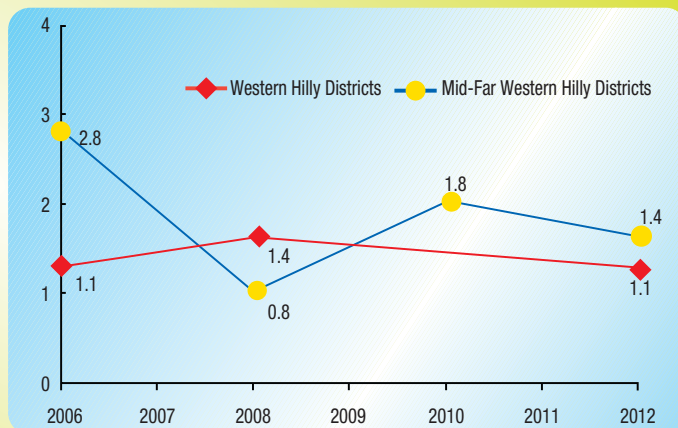


Figure 4:
HIV Prevalence among Client of Sex workers in Nepal



Figure 5:
HIV Prevalence among MLM in Nepal



Key populations at higher risk	Survey areas	Rounds	Survey years
Female Sex Workers (FSW)	Kathmandu Valley	4	2004, 2006, 2008, 2011
	Pokhara Valley	4	2004, 2006, 2008, 2011
	16 Terai Highway Districts	5	1999, 2003, 2006, 2009, 2012
	6 Terai Highway Districts	4	2004, 2006, 2009, 2012
People who Inject Drugs (PWID)	Kathmandu Valley	5	2002, 2005, 2007, 2009, 2011
	Pokhara Valley	5	2003, 2005, 2007, 2009, 2011
	East Terai Districts	5	2003, 2005, 2007, 2009, 2012
	West to Far West Terai Districts	4	2005, 2007, 2009, 2012
Truckers (Clients of FSW)	22 Highway Districts	4	1999, 2003, 2006, 2009
Men who have Sex with Men (MSM) and Transgender (TG)	Kathmandu Valley	4	2004, 2007, 2009, 2012
Male Labour Migrants (MLM)	Western to Mid & Far Western Districts	4	2006, 2008, 2010 ^a , 2012
Wives of Migrants	Far Western Districts	2	2008, 2010 ^b

^a in 2010, IBBS among MLM was conducted in Mid and Far Western Clusters only; ^b discontinued from 2010.