



Government of Nepal
Ministry of Health and Population
National Centre for AIDS and STD Control
Teku, Kathmandu



Factsheet 7: HIV Surveillance in Nepal, 2014

Nepal has been monitoring HIV/STI epidemic by routinely collecting data from the following sources:

Case Reporting of HIV and STI

Routine case reporting of STI and HIV is continued from HIV testing and counseling and PMTCT sites as well as other service sites. This routine reporting of HIV and STI from these sites is on a monthly basis and analyzed regularly.

Integrated Biological and Behavioral Surveillance

Nepal has been conducting HIV/STI surveillance particularly among key populations, namely: PWID, FSW, and clients, MSM/TG, and male labor migrants for more than a decade mainly tracking changes in HIV and STI prevalence along with behavioral components such as condom use. There is plan to include Hepatitis-B and C screening and associated risk behaviours in the upcoming IBBS surveys.

Monitoring of HIV Drug Resistance

Preparations for setting up a system for monitoring of HIV drug resistance for example monitoring of early warning indicators is underway. In this regards, guidelines on monitoring for HIV Drug Resistance Early Warning Indicators has been prepared in November 2013.

Size estimation of key populations

The size estimation of key population in districts has been conducted in 2010. The population size is to be updated in 2-3 years interval.

HIV Infection Estimations and Projections are being done annually in Nepal based on 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. Nepal contributes to the regional and global estimates of epidemic update through UNAIDS/WHO calendar. Nepal contributes every year to the country estimates for Global Epidemic Update.

HIV surveillance results are regularly disseminated to policy makers, programme managers, development partners and other relevant stakeholders to ensure public health actions.

Sentinel surveillance among key populations at higher risk, ANC attendees and STI patients are planned and will be started in the all regional, zonal and central level hospitals across regions.

NCASC is taking the lead in HIV surveillance activities in Nepal, in technical collaboration with WHO, UNAIDS and USAID/Saath-Saath Project including the engagement of communities and people living with HIV.

Source: NCASC, 2013

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

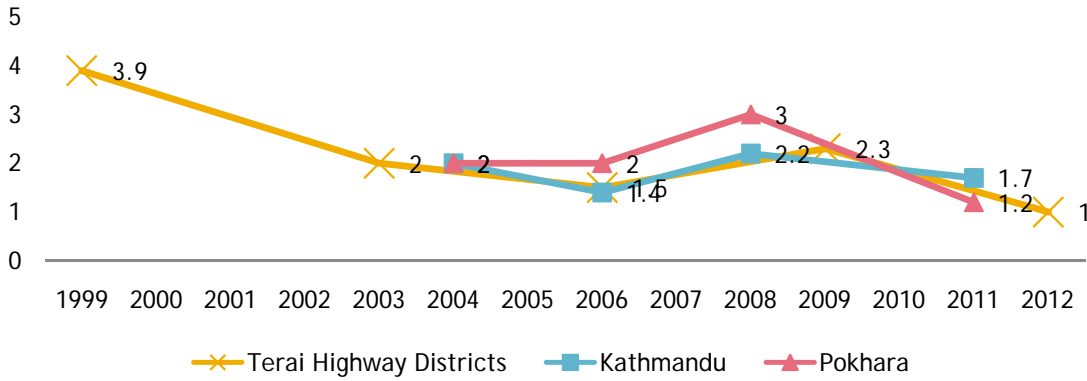


Figure 2: HIV and STI Prevalence among Men who have Sex with Men

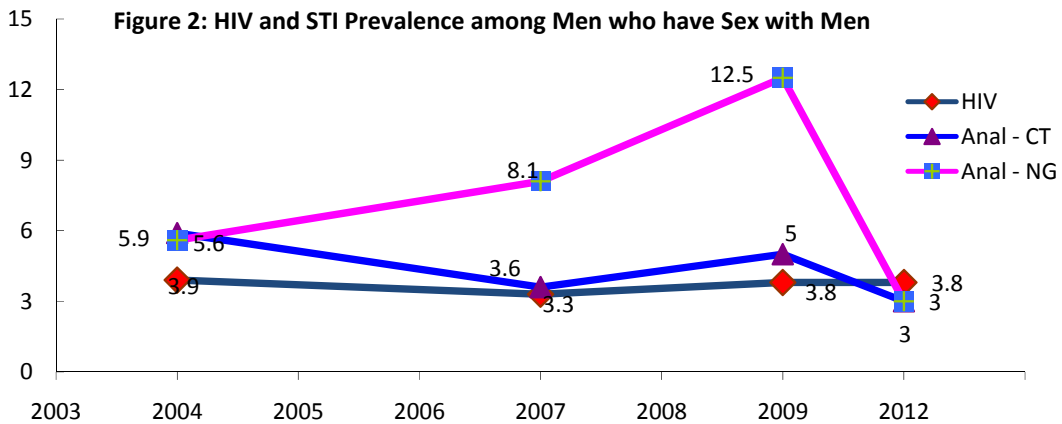
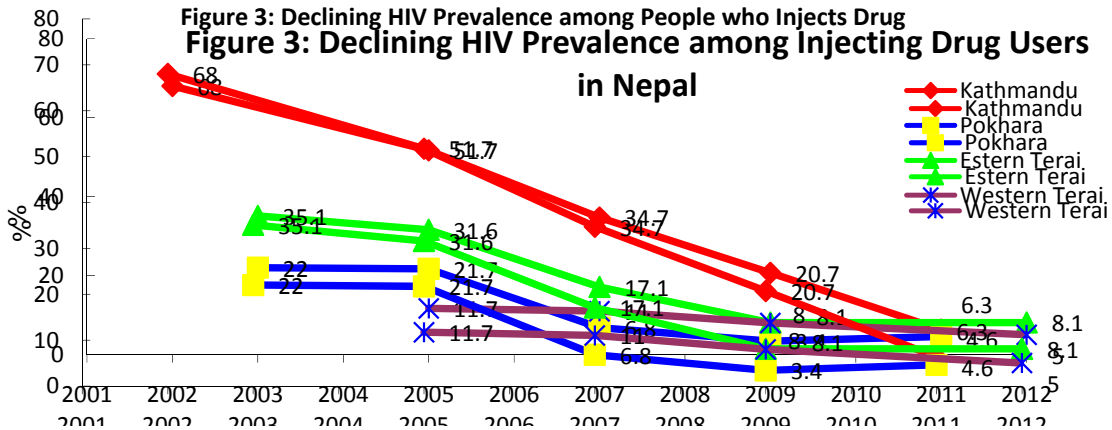


Figure 3: Declining HIV Prevalence among People who Injects Drug
 Figure 3: Declining HIV Prevalence among Injecting Drug Users in Nepal



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Figure 4: HIV Prevalence among Truckers

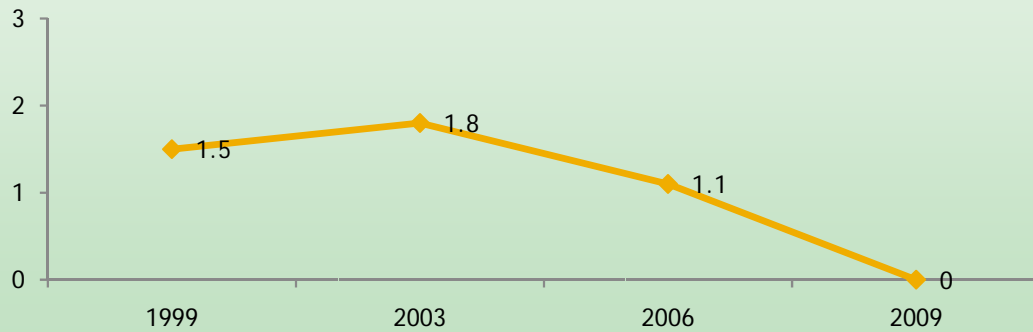
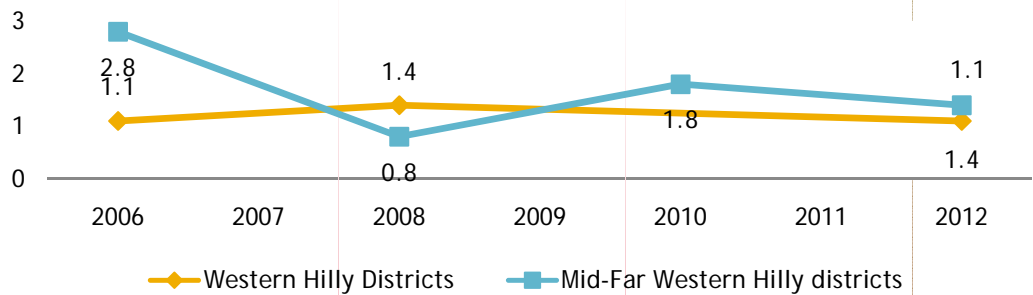


Figure 5: HIV Prevalence among MLM



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Table 1: IBBS surveys conducted (2000 – 2012)

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.

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