



## Factsheet N°12: Care and Support Service Package for PLHIV (People living with HIV) in Nepal, as of 15 July 2012

### Background

- HIV in Nepal characterized as concentrated epidemic; HIV prevalence of 0.30 percent among adult aged 15-49 years (2011).
- Approx. 50,200 people estimated to be living with HIV; four out of every five infections transmitted through sexual transmission (2011).
- People who inject drugs, female sex workers (FSW) and men having sex with other men (MSM) are the key populations at higher risk of spreading the epidemic due to exposed to or engage in risk behaviours.
- Key populations at higher risk accounted to 58% of all adult HIV infections (2011).
- Male labor migrants (particularly to India) and clients of female sex workers in Nepal acts as bridging populations.
- Targeted Intervention is a cost effective HIV prevention model for reaching people who are most at risk of HIV infection.

**Source:** NCASC 2012

### Implementing organizations

1. NCASC/Pooled Fund
2. Save the children
3. Saath-Saath Project
4. CARE

Figure 1: Cumulative number of PLHIV as of July 2012

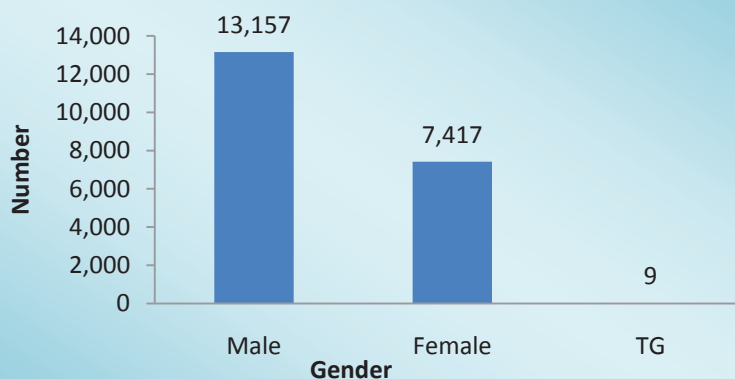


Table 1: Some Facts about Service Component of PLHIV Targeted Programs

#### Service Package

Comprehensive treatment, care and support service package for PLHIV:

- Targeted interventions: IEC, BCC, Condom programming,
- ART and OI management

Stigma and discrimination reduction

Capacity development

Social Protection, human rights and impact mitigation

Community system strengthening

Source: NCASC. 2012

#### **For Further Information Please Contact:**

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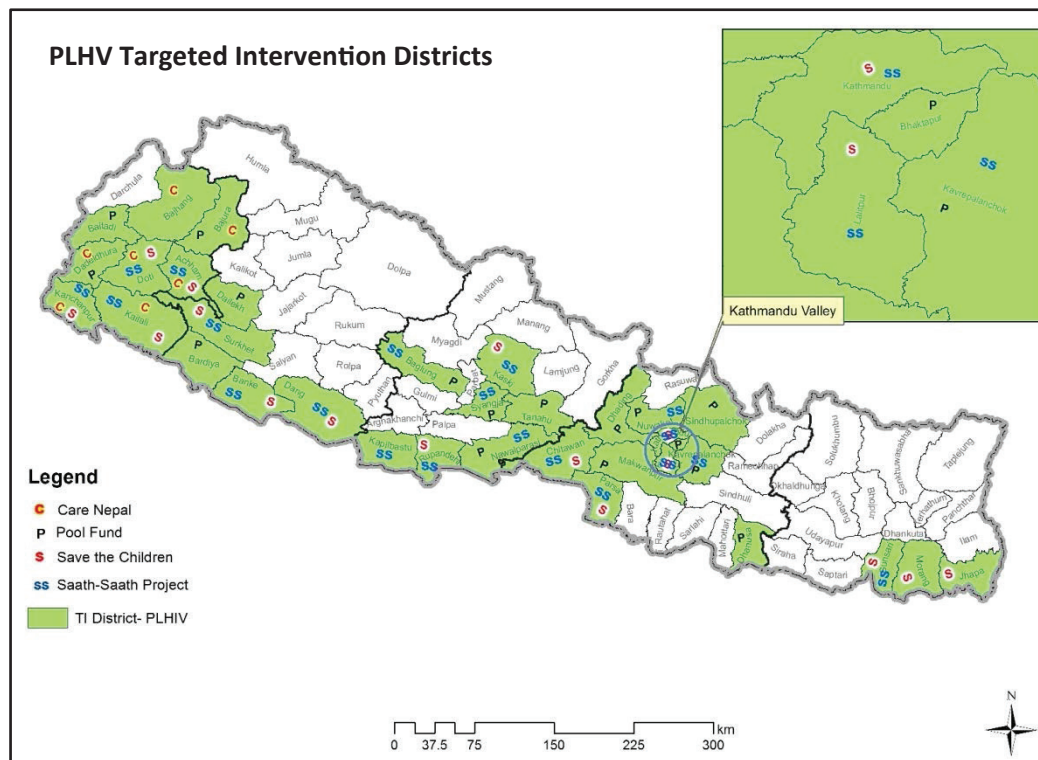
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**Figure 2: Map of districts with targeted intervention-PLHIV**

**Table 3: Program Achievements as of 16 July 2011 -15 July 2012**

Components	Save the Children	Pooled fund	SSP (Oct 11-Jul 12)	CARE
Received CCC services	1,410	358	NA	NA
Received CHBC services	1,633	NA	4298	1027

Source:NCASC 2012

**Table 4: Challenges**

- Reluctance of PLHIV to disclose their HIV status due to stigma and discrimination associated with HIV.
- Addressing other social welfare and livelihood related expectations/needs of PLHIV like income generation, access to and provision of essential medical care, transportation support, nutritional and educational support.
- No ART site in some of program districts making difficulties to run community care centre (CCC). So there is urgent need to scale up of ART sites in those districts

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