

Project Progress Report

*Sept 2022 to Oct
2023*

**Community Led Comprehensive Harm Reduction Project
and
Primary Healthcare Services for WWUD implemented in
four Districts of Nepal
supported by
ViiV Healthcare International
'Positive Action Program'**

RECOVERING

NEPAL



1.	Contractual Background to the Project.....	3
2.	Introduction to the partner organizations	3
2.1.	ViiV Healthcare	3
2.2.	Recovering Nepal.....	4
3.	Problem statement /Rationale/Justification for the Project	5
4.	Objectives/Goals	6
5.	Operational Methodology of Project Implementation	6
6.	Monitoring and Evaluation (M&E) Error! Bookmark not defined.	
7.	Performance Framework of Jan 2023- Sept 2023.....	10
8.	Amplify Impact Budget	
9.	Program Activities	
10.	Data Analysis/Annual Overview and monthly breakdown of progress vs. achievements ..	9

1. Contractual Background to the Project

Harm reduction refers to policies, programmes and practices that aim to minimize the negative health, social and legal impacts associated with drug use, drug policies and drug laws. It is grounded in justice and human rights. It focuses on positive change and on working with people without judgement, coercion, discrimination, or requiring the condition that people stop using drugs as a precondition of support¹.

The project was signed between ViiV Healthcare UK and Recovering Nepal on the 30th of July 2020 and was planned to be launched by the 1st September of 2020. However, the project launch date had to be postponed indefinitely due to the unprecedented upsurge of Covid-19 in the country. Nevertheless, despite the curfews and lockdowns during the pandemic, the approval letter from the Social Welfare Council to kick start the project in the proposed districts, was eventually, issued and when the curfews and lockdowns were lifted by the government in **October** 2020, we could move forward by selecting partner organizations for the project.

Twenty-one organizations from the three proposed districts had applied and out of that 3 organizations from provinces one, three, and five were selected by the Technical Review Panel (TRP) for the project. All the three selected organizations for the project were interviewed online and a memorandum of understanding was signed among each party to proceed with the project activities, namely, Jagaran Arogya Samuha at Sunsari district in province 1 of Nepal, Ekta Nepal at Chitwan district in province 3 of Nepal, Asha Foundation at Rupandehi district in province 5 of Nepal.

Upon the signing of the contract, the project was designed with a collaborative approach to ensure the inclusion of local WWUD issues. As per the project's execution plan, Recovering Nepal would facilitate the overall management of the Harm Reduction Program through ViiV Healthcare and the National Center for AIDS and STD control center (NCASC) would be responsible to supply HR Commodities in the project sites.

2. Introduction to the partner organizations

2.1. ViiV Healthcare

ViiV Healthcare is an organization dedicated to HIV medicines and research and focused on people living with HIV and AIDS. It has had a track record of doing things differently from its unique origins to its innovative medicines, pushing the boundaries of what might be possible in HIV treatment and care. To accelerate the HIV response, they have put significant focus on community initiatives to strengthen local healthcare services for people living with HIV. Through the 'Positive Action program', supporting over 300 projects worldwide, ViiV Health care works with local communities aiming to deliver long-lasting impacts on groups such as women and children, while enhancing local expertise and resources towards global goals, as well as the mission of leaving no person living with HIV behind².

ViiV Healthcare is investing in community-based harm reduction efforts in Nepal, focusing on supporting people who inject drugs and increasing usage of HIV and harm-reduction services. Since 2020, *Positive Action Programme* has directed funding towards harm reduction programmes in targeted geographies in the following locations.

Phase I (Challenge Fund)

¹ What is Harm Reduction? - Harm Reduction International (hri.global), <https://hri.global/what-is-harm-reduction/>

² <https://viivhealthcare.com/about-viiv/>

1. Jagaran Arogya Samuha at Sunsari district in province 1 of Nepal.
2. Ekta Nepal at Chitwan district in province 3 of Nepal.
3. Asha Foundation at Rupandehi district in province 5 of Nepal

Phase II (Positive Action Grant)

1. Ekta Nepal at Chitwan district in province 3 of Nepal.
2. Asha Foundation at Rupandehi district in province 5 of Nepal
3. Neeta Foundation, Makwanpur
4. Nawa Drishti, Banke

2.2. Recovering Nepal

As the National Federation of PUDs and Drug Service Organizations in Nepal, '*Recovering Nepal (RN)*' was formally registered in 2003. Recovering Nepal was first established in 2001 by enthusiastic drug users and PLHA to fight HIV and drugs and conducts business through partnerships with the Nepali government. With 166 formal organizational members and individual members, Recovering Nepal works to stigma & discrimination, raise of fundamental rights, push legislative change, and People Who Use Drugs access to affordable, all-encompassing care. to the RN's Strategic Plan 2022, it was intended to the network of women who (WWUD) to advance gender provide access to high-affordable services.



combat awareness for improve (PUDs)

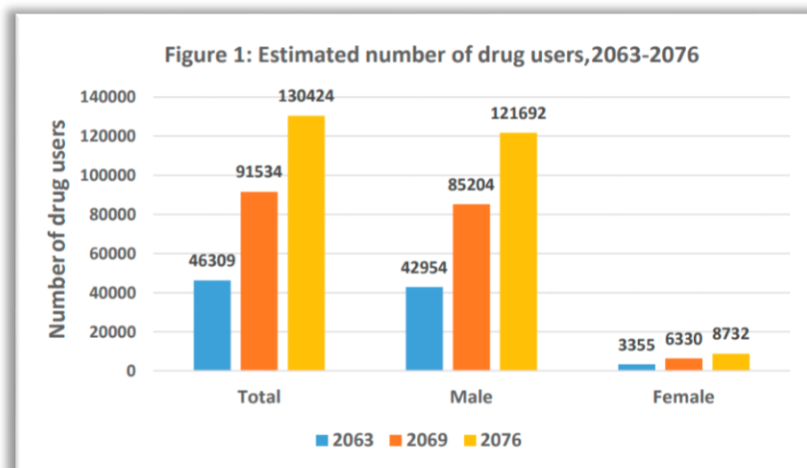
According 2018—strengthen use drugs parity and quality,

Consequently, in 2017, RN in collaboration with Recovering Nepal Women (*RN Women*)—spearheaded by incredible former WWUD took off as a WWUD movement in Nepal—envisioned creating strategies to establish gender-responsive harm reduction services considering the current evolving trends and trajectories, to enable WWUD to access healthcare and legal services. The first National Consultation meeting was held on the 12th of January 2018 to develop its strategic framework and discuss the pressing issues of WWUD in different regions of Nepal. Subsequently, on the 2nd of January 2020, RN Women was formally registered as a National Network of Women Who Use Drugs (WWUDs) in Nepal. The primary areas RN WOMEN focuses is to promoting and ensuring gender equality, the right to health, and empowerment of WWUD in Nepal. Since the inception of RN Women, one of the most important achievements has been the expansion of a robust network among the WWUD-led organizations, support groups, and loose networks across 5 different newly created provinces of Nepal. The involvement of WWUD in the Country Coordination Mechanism (CCM) through RN WOMEN has tremendously

empowered the community's ability to identify issues and clearly articulate their demands on their terms. The small and close-knit WWUD community in Nepal has been bolstered furthermore under one banner since the advent of RN Women.

3. Problem statement /Rationale/Justification for the Project

The drug user survey undertaken in Nepal in 2020 estimated a total of 1,30,424, and out of that 13,121,692 (93.3 percent) were male and 8,732 (6.7 percent) were female. With the average annual growth of 5.06 percent from 2069 to 2076. The low number of female respondents is likely due to the higher level of stigma associated with drug use faced by women. It is very important to address gender concerns and understand the vulnerabilities of women drug users. [1] In 2019 HIV prevalence among the PWID has followed an encouragingly declining trend from 68 % in 2002 to 6.4 % in 2015. However, it has increased by 2.1 percent in this round (8.5 % in 2017) – a much higher rate than that of the general population in Nepal, which is 0.1%. HCV was 18.8% (95% CI=16-29.2), HBV was 1.3% (95% CI=0.1-3.6), Active Syphilis was 1.7% and History Syphilis was 2% among the PWID. Similarly, co-infection of HIV and HCV was alarmingly high among the PWID (7.35%). [2]



Women have unique situations, such as pregnancy. The postpartum period may present a number of emotions in the new mother, especially for a woman who may be at risk for a relapse with opioids. Increased stressors may lead to a relapse or overdose events.³ Women are more inclined to develop an opioid dependency in a shorter timespan than their male counterparts. Potential factors for women's dependency susceptibility include having Smaller framed bodies, leading to opioids having a greater biological impact on women. The connection between hormones, such as estrogen and a heightened sensitivity to pain and women's propensity to have chronic pain. This may drive the use for prescription opioids to manage pain.^{4, 5}

Personal experiences of emotional and psychological grief and trauma, such as sexual assault or domestic violence with a partner, have been discovered to be risk factors in the use of opioids in women, yet not in men. The limited and fragmented data on WWUD in Nepal suggests that they are at greater risk of gender-based violence, HIV, HCV, and other communicable diseases than men who use drugs. This increased vulnerability is a consequence of a range of environmental, economic, social, and individual factors affecting women in Nepal, which also compromises their ability to engage in health-promoting services such as harm reduction programs, Antiretroviral Therapy (ART), and Direct Observation therapy (DOTs). The high prevalence of HIV, HCV and syphilis among women who inject drugs in Nepal highlights the need for tailored interventions and prevention programmes for this group. The high

³ Centers for Disease Control and Prevention. (2020). [About Opioid Use During Pregnancy](#).

⁴ Office of Women's Health. (2017). [Final Report: Opioid Use, Misuse, and Overdose in Women](#).

⁵ Centers for Disease Control and Prevention. (2018). [Prescriptions Painkiller Overdoses](#)

prevalence of HCV among women who inject drugs further emphasizes the need for a national programme to access HCV treatment free of cost in Nepal. Family programmes tailored to women in Nepal appear to considerably reduce risk behaviours among women who inject drugs, however, enrolment in these services remains low. Understanding barriers and facilitators for its participation could decrease the prevalence of both HIV and Hepatitis C among women who inject drugs in Nepal. [3] Drug use is considered as deviant behaviour and drug users are stigmatized in many countries including Nepal. When women use drugs the stigma and subsequent social isolation is even more severe than when compared to male drug users. In the Asian setting, this is particularly true. Women especially in South Asia (which includes Nepal) often have lesser education, poorer access to health services, and do not enjoy parity with men in terms of employment as well as other privileges. The use of drugs weakens their socially disadvantaged position and increases her vulnerability further. [4]

Harm reduction acknowledges that many people will continue to abuse drugs and engage in other dangerous behaviors despite prevention efforts. It also accepts that many people are unwilling or unable to seek treatment. But while some people who use substances may not necessarily require treatment, it is helpful for them to be aware of resources that can help minimize harm.⁶

4. Objectives/Goals of the project

"To established community-based harm reduction services for WWUD in 4 Districts of Nepal, collaborating with Government to ensure sustainable resource allocation based on health Human Rights for WWUD in Nepal by 2023."

Spearheaded by RN Women, Recovering Nepal seeks to increase access to and uptake of harm reduction service for Women Who Use Drugs in Nepal.

1. The main objective of RN is to identify linkages for reaching out to women who use/inject drugs through peer group to access the services, routine program data, IBBS surveys and national estimates.
2. The RN seeks to establish comprehensive service package for women and other gender minorities who use drugs.
3. To continue support successfully established community-based HR program for WWUD with ownership and collaboration of national program of sustainability.
4. To create entry point for linkage building case identification for uptake and utilization of services for WWUD through peer-based model.
5. To build the capacity for empowerment of WWUD with psycho-social and life skills intervention are also necessary for social reintegration.
6. To standardize comprehensive harm reduction services in respond to Standard National Minimum Services Packages for KPs-2020 for Nepal.

5. Operational Methodology of Project Implementation

Twenty-one organizations from the three proposed districts had applied and out of that 3 organizations from provinces one, three, and five were selected by the Technical Review Panel (TRP) for the project. All the three selected organizations for the project were interviewed online and a memorandum of understanding was signed

⁶ <https://americanaddictioncenters.org/harm-reduction>

among each party to proceed with the project activities, namely, Jagaran Arogya Samuha at Sunsari district in province 1 of Nepal, Ekta Nepal at Chitwan district in province 3 of Nepal, Asha Foundation at Rupandehi district in province 5 of Nepal.

Beside the three implementing grass roots organizations Recovering Nepal coordinated the crucial inventory supply chain of commodities and the administrative legwork required for the inception of the project. Following are the key responsibilities of the concerned agencies relegated to the implementation of the project.

HR commodities Supply: NCASC/SAVE the Children/Global Fund

Grant: ViiV HealthCare, UK

RN:

- ✓ Regular coordination and communication with program Focal Person ViiV
- ✓ Coordination with National HIV prevention Care program NCASC, save the children, local governments, and Social welfare Council
- ✓ Regular monitoring and compiling progress reports
- ✓ Provide funds to the Partner organization at the district partner
- ✓ Financial Management of the Project
- ✓ Carryout National Level Advocacy and activities
- ✓ Provide training and technical support to the district partners and staff under the project
- ✓ Coordination and Collaboration with Governments
- ✓ Report to the concerned Agencies

IMPLEMENTING PARTNERS:

1. **Ekata Nepal, Chitwan**
2. **Aasha Foundation, Rupandehi**
3. **Nawa Drishti, Banke**
4. **Neeta Foundation, Makwanpur**

- ✓ Implement community-based harm Reduction programs in their respective District
- ✓ Operate Drop-in Center
- ✓ Outreach Program at 4 districts—Mobilize In-reach worker IRW
- ✓ Distribute HR commodities (Needle, Syringes, condoms, alcohol swap, and IECs.
- ✓ HIV testing and referral to ART
- ✓ Conduct SRHR orientation program
- ✓ Provide treatment support
- ✓ Referral services
- ✓ Coordination and Collaboration with Local government and stakeholders
- ✓ Reporting to RN

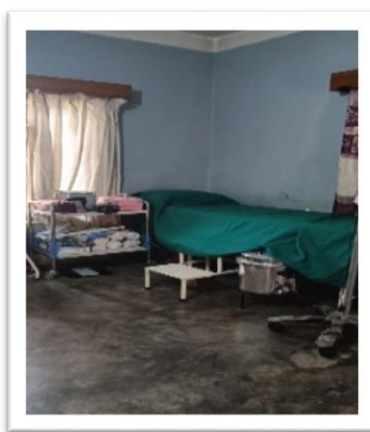
Performance Framework Sep 2022- Oct 2023

	Indicators	Sep	Oct	Nov	Dec	Total 2022	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	TOTAL
																0	
1	KP-1d: Number of FIDUs reached with HIV prevention programs - defined package of services [HR]	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.1	New Client	48	42	19	8	463	5	13	12	13	15	6	9	6	1	0	80
1.2	Old Client	452	480	503	523	4572	546	540	551	553	546	585	542	599	517	0	4979
1.3	Lost to Follow up for the current month	345	365	384	381	3615	375	384	379	389	409	417	437	452	471	0	3713
1.4	KP-4: Number of needles and syringes distributed per person who injects drugs per year by needle and syringe programs	2481	2438	2229	2350	21259	1540	3460	1522	2969	2807	3898	3329	4374	2848	0	26747
1.5	No. of condom distributed	462	620	1044	1402	15133	1308	1394	1064	1300	1457	1422	1158	2105	2164	0	13372
1.6	KP-3d: Number of FIDUs that have received an HIV test during the reporting period and know their results	31	14	82	80	292	35	77	143	118	60	93	93	116	99	0	834
1.7	Number of determine reactive cases through Community Led Testing (CLT)	0	0	0	0	6	0	0	0	0	0	0	0	4	0	0	4
1.8	Number of Clients received Primary Health Care services	0	0	0	0	2	1	1	0	31	16	17	15	0	0		81
1.9	Number of Clients visits DIC (safe spaces)	98	78	90	87	946	70	95	70	105	94	93	110	10	0	0	647
2	Referral and other Support	0	0	0	0	0										0	0
2.1	Referral for drug treatment center	1	0	0	1	4	0	0	0	1	0	1	0	0	0	0	2
2.2	Referral for SRH	1	1	2	0	12	1	0	0	2	0	1	1	1	0	0	6
2.3	Referral for Primary Health Care Program	0	0	0	0	3	0	0	0	0	10	12	10	10	0	0	42
2.4	Referral for (ARV PMTCT) with accompanied	1	1	2	1	6	0	0	0	0	0	0	0	0	0	0	0
2.5	Referral Support for female drug users: legal support, SRH, medical treatment for children	1	1	2	0	9	0	0	0	1	0	2	2	1	0	0	6
2.6	Drug Treatment Support	1	0	0	1	6	1	0	0	1	0	1	0	0	0	0	3
3	Testing	0	0	0	0	0										0	0
3.1	HIV confirmatory test	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.2	Hepatitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3	TB	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	Treatment	0	0	0	0	0										0	0
4.1	No. of clients are in ART	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.2	No. of clients enrolled in ART treatment	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	Capacity Building	0	0	0	0	0										0	0
5.1	No. of SRH Orientation	4	4	4	3	44	4	4	4	4	4	4	4	4	4	0	36
5.2	No. of Number of Service Providers Trainings	3	4	4	6	220	2	2	2	2	5	3	3	9	9	0	37
5.3	No. of Number of key population Trainings	11	11	11	11	146	11	11	11	12	11	11	11	7	7	0	92
6	No. of Other Activities	0	0	0	0	0										0	0
6.1	No. of Stakeholders Meeting Including representative of local government of district	3	1	0	1	16	0	3	1	0	0	0	2	0		0	6
6.2	No. of Meetings with staff participation by Staffs	5	5	5	6	61	3	6	7	8	6	14	8	9	5	0	66
6.3	No of advocacy events	4	4	3	8	45	2	0	4	7	1	2	5	3	1	0	25

6. Amplified Activities

SN	Activities	Target	Achievement	Remarks	Percentage
1	Resource Person (Development of comprehensive harm reduction package for FIDUs)	1	1	We have hired the resource person and he is working on it.	100%
2	National Consultation Meeting for Comprehensive Harm Reduction Package for FIDUS	1	1	Held on September 2023	100%
3	Printing & Designing Cost for Comprehensive Package for Harm Reduction Program	1	1	We have used some budget while couriering PHC set up to our partner organization.	100%
4	M&E System Strengthening Orientation /Training	1	1	Held on 22 nd and 23 rd Oct 2023	100%
5	Equipped Primary Health Care Setting at DIC	1	1	We have dispatched PHC set up for all our 4 partners organization and Lalitpur DIC, WSG in the month of April, 2023	100%
6	FGD	3	4	We have successfully	100%

				conducted 4 FGD and KII.	
7	Audit Fee	1	0	We will charge audit fee Oct 2023	0%
8	Laptop	1	1	Laptop is purchased for M&E Officer working under ViiV Healthcare project.	100%
	Total	10	10		



- Neeta Foundation, Makwanpur
- Women's Support Group, Lalitpur

The PHC services will be contracted from April, 2023 to 2023. The doctor contracts have been made from each of the organization and the doctor checkup services has been provided from the month of April, 2023 twice a day in one

6.1. Primary Health set up and Doctor Visit

In our Amplify budget we have a service with heading of '**Equipped Primary Health Care Setting at DICS**' of **ViiV** Partners as well as one Women's Drop-in Center of Lalitpur.

- Ekata Nepal, Chitwan
- Aasha Foundation, Rupandehi
- Nawa Dristhi, Banke



August,
month.



6.2. FGD

In Focus Group Discussion the participants are drawn from similar backgrounds or experiences to discuss a particular subject and interest. Question-based qualitative research is inquired about their attitudes, perceptions, convictions, opinions, or ideas. FGD guideline was prepared by Mr. Sushil Koirala as the protocol is prepared to conduct focus group discussions with women who use drugs (WUD) to comprehend the availability, problems, and status of HIV prevention, treatment, and care as well as reproductive health, psychological health, and encounter with violence. The meeting was conducted 4 times with service provider and within beneficiaries. In the discussion session we mainly focus on the beneficiaries needs, their concern and challenges that they faced. They also talked about their quires and suggestion in the meeting.



7.3 M&E Strengthening Training

M&E System Strengthening training was held on the 21st and 22nd of September, 2023 at Bougainville, Tripureshwor, Kathmandu. There were participants: the Chief of the Ministry of Home Affairs, the Director, of the National Center for AIDS and STD Control (NCASC), UNODC, Regional Focal Persons, and Board members of RN. The program was facilitated by Mr. Bishnu Fueal Sharma with the introductory session highlighting the main objective of the M&E training. The main purpose of our meeting was to inform about our progress work, challenges as well and action plans for the future of the **ViiV** Healthcare project and learn more about the effective ways of operating the organization through the Monitoring and Evaluation process. The goal of this training is to help organizations reflect on and improve their plans by reviewing the different stages of a monitoring and evaluation system such as planning, data collection, making data usable, and using data for decision-making. The representative from our ViiV partners was able to learn in detail about the process of M&E and its implementation throughout the tr

7. Program Activities (Target Vs Achievement)

SN	Activities	Target	Achievement	Remarks	Percentage
1	SRH Orientation	60	60	We are continuously organizing SHR event in partner organization as well as head office monthly.	100%
2	School, College Community based harm reduction Orientation	15	15		100%
3	Community based Harm Reduction Orientation	1	1	We held on June 2 nd , 2023	100%
4	Network Support meeting in Kathmandu	1	1	Held on In RN Meeting Hall.	100%
5	Stakeholder meeting including representative of local government of districts	4	6	Held in each partner organizations.	100% Extra 2 stakeholder was held to do the DPACT meeting in Ekata Nepal and Nawa Drishti
6	HIV and Drug Awareness Program	12	12		100%

Figure: Program Activities Target VS Achievement



		100%
	On December 2022	100%
	Held by each partner districts as well as in central office	100%

training

7.1.SRH Orientation

Sexual and Reproduction Health Orientation for WWUD was conducted by all the respective organization in support of Recovering Nepal and **ViiV** Health care. The total number of participants for this program is 7. It is conducted for about 1 hour of time duration where all the participants get information about sexual and reproductive health and share their ideas, issues as well as concern in discussion session. The main purpose of this event is to inform the FIDUs about the Sexual and Reproductive Health and service implementation of Harm Reduction services in the respective District.



7.2. School/College Community based harm reduction Orientation

School college community-based harm reduction orientation is designed to provide the knowledge on Drug addiction as well as to let the young population about its consequences, prevention and treatment. The program was designed as participants could get the minimum knowledge on effect of drug. Apart from that causes of HIV & its prevention is also informed.

7.3.Community based Harm reduction Orientation on 2nd June, 2023

The stakeholder meeting (High Level Advocacy) on harm reduction program for women who use drug was held on 2nd of June, 2023 at Hotel Himalayan, Kupondole, Lalitpur. There were participants: Chief of Ministry of Home Affairs, Drug Control Program DCP, Director, National Center for AIDS and STD Control (NCASC), Senior Program Manager from Save the Children International (SCI), representative of UNAIDs, UNODC, WHO, Monitoring Focal Person form Social Welfare Council SWD, representative from National Human Rights Council, NHRC, Regional Focal Persons, Board members of RN and other key stakeholders.

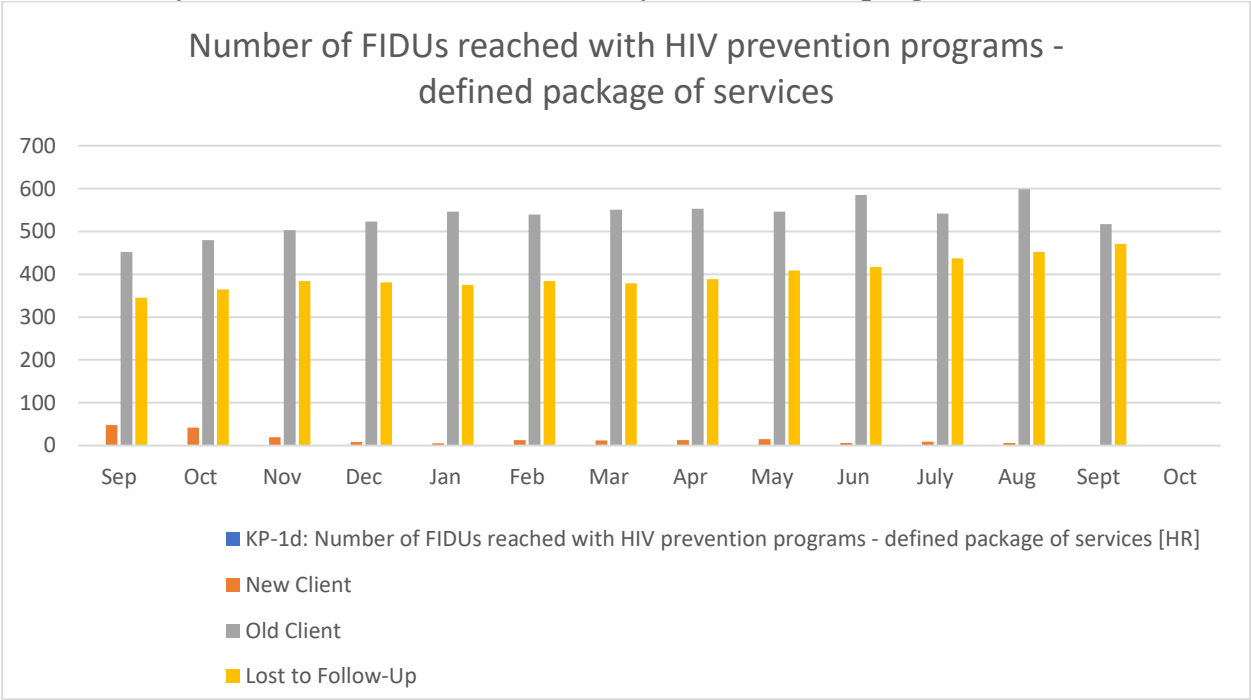


7.4. Legal Literacy Training

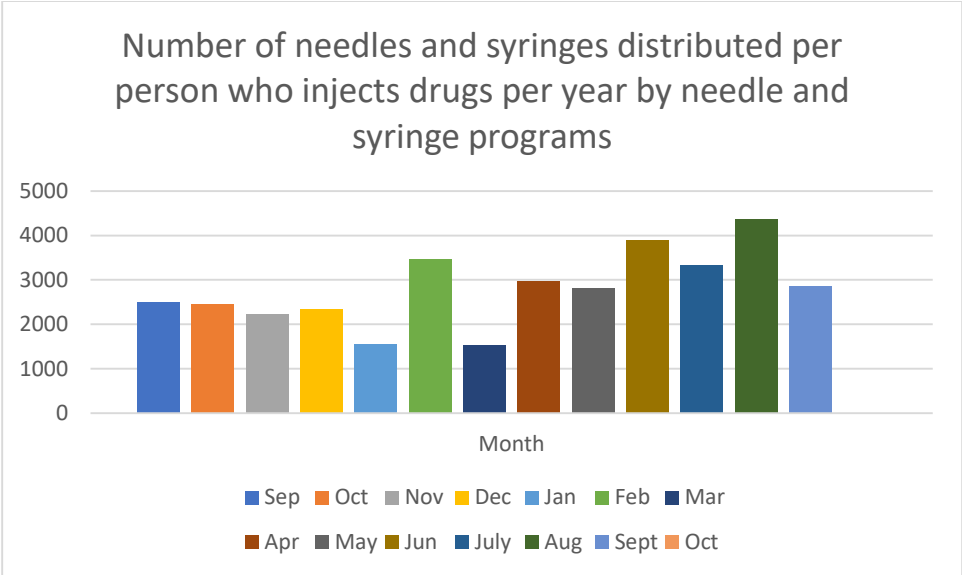
Legal Literacy training was held in partner organizations as well as in the central office. The discussion at the training was to focus on legal issues that women face in their life course and how women alone can advocate for their rights. It all focused on interventions needed to uplift the health, human rights and social condition of WWUD in Nepal. A discussion took place, on policy prioritized areas to address the WWUD issues with basic problems stigma & discrimination and other factors that are affecting women facing barrier to receive primary health check up.



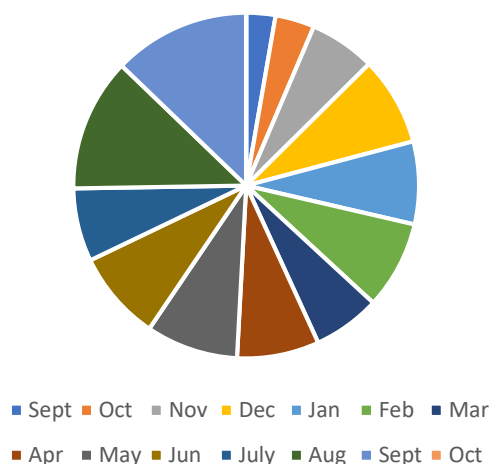
8. Data Analysis/Annual Overview and monthly breakdown of progress vs. achievements



The total number of new beneficiaries is 80, lost to follow up is 3713
whereas old beneficiaries' counts are 4979.

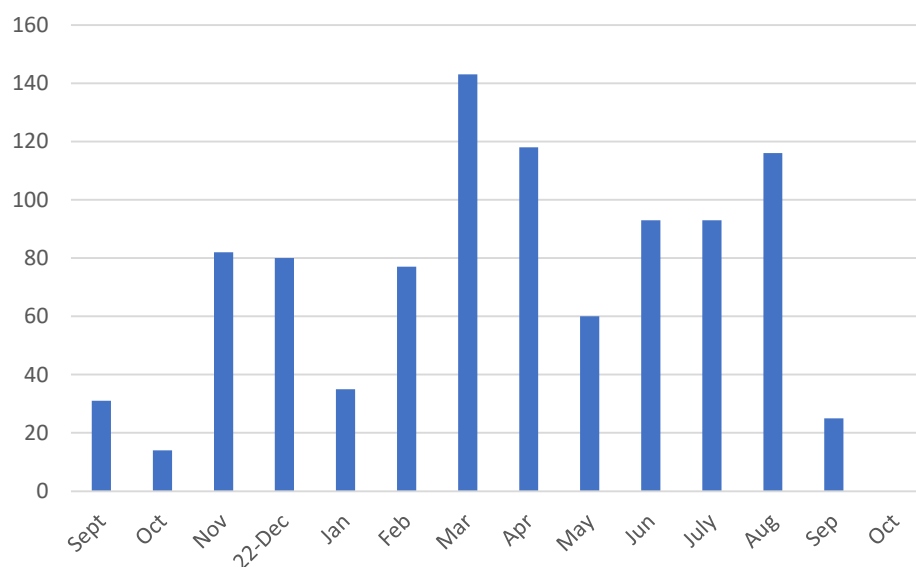


No. of condom distributed by Month

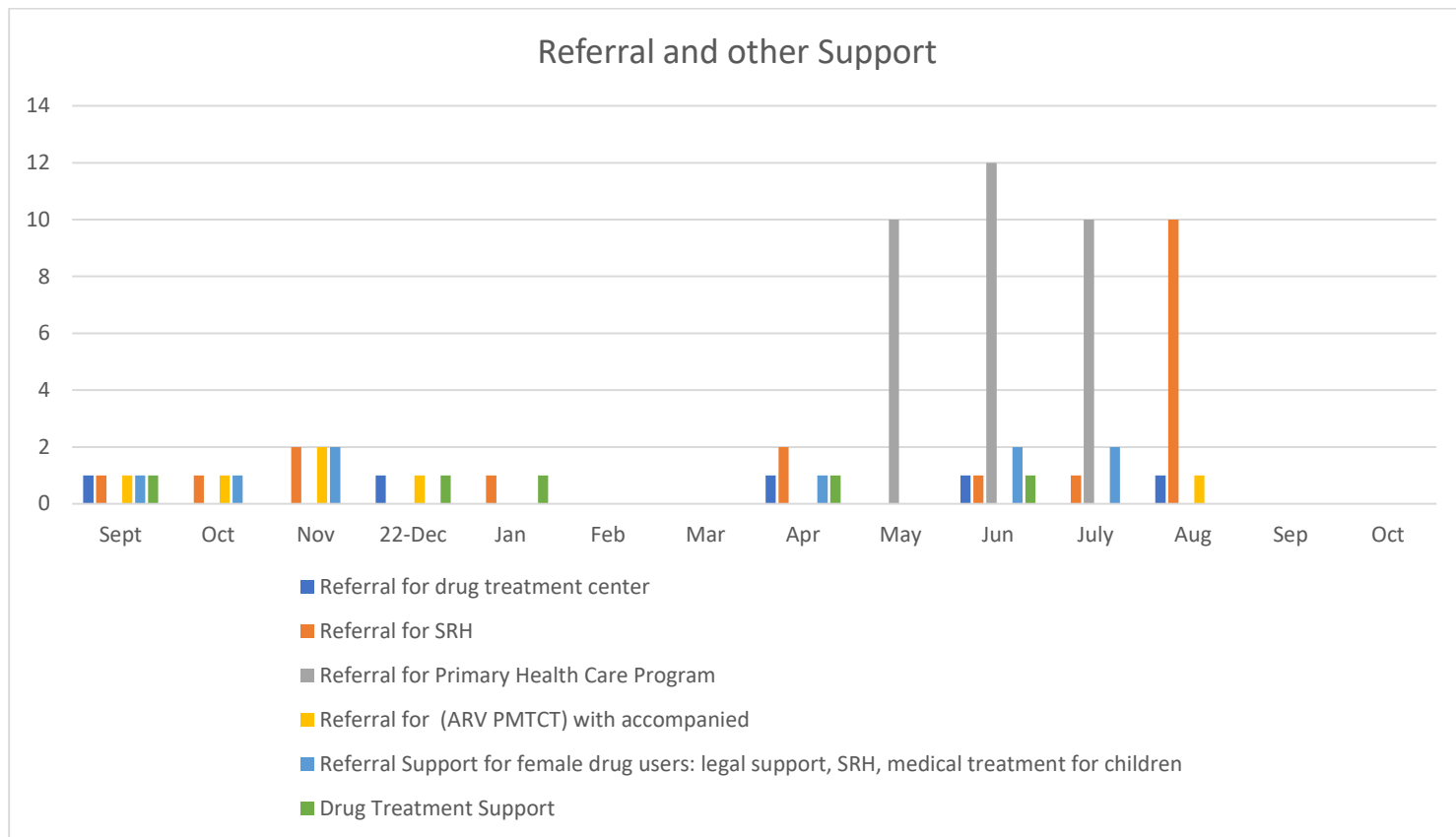


The total magnitude of needles and syringes distributed was 36245 from the month of Sep 2022 to Oct 2023, while the total No. of condom distributed were 16900

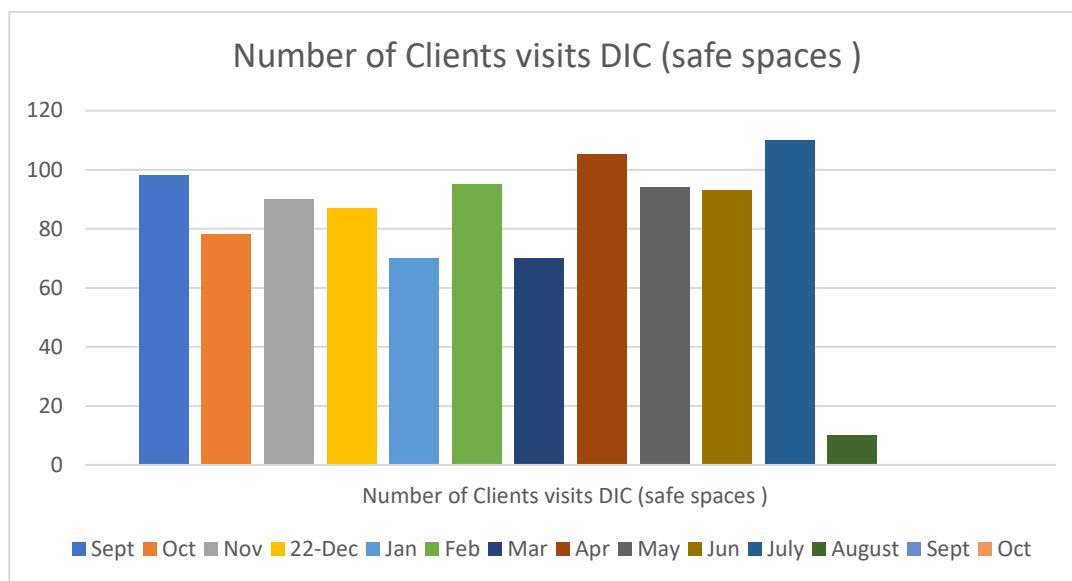
KP-3d: Number of FIDUs that have received an HIV test during the reporting period and know their results



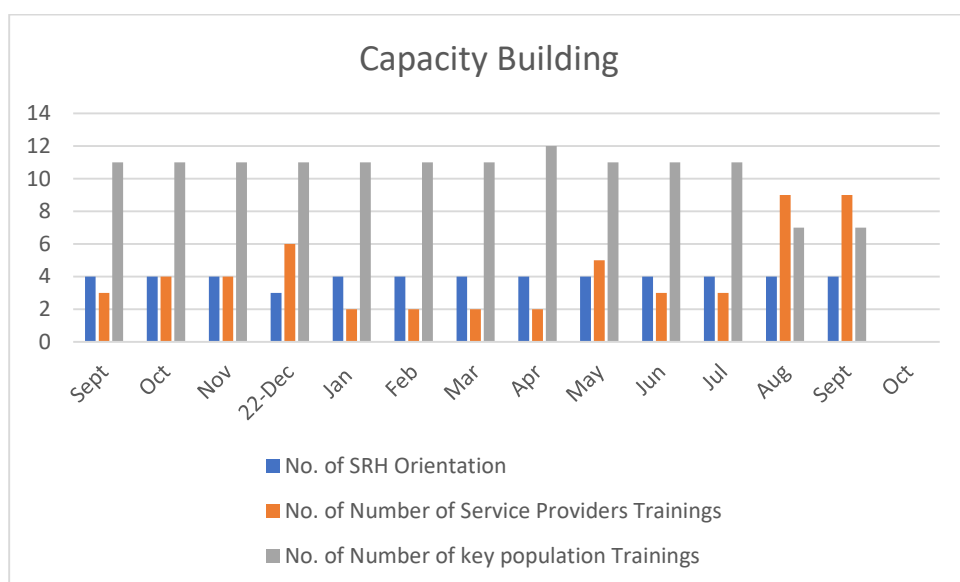
Regarding testing, over the course of the year Sep 2022 to 2023 AD the total Number of FIDUs receiving an HIV test and having access to knowledge their HIV Status results was 967 FIDU.



Referral and other Support was also provided during the year with 5 Referrals to drug treatment centers with a total of 19 Referrals for Sexual Reproductive Health (SRH) services. 32 referrals for the Primary Health Care Program were made with accompanied Referral for ARV and PMTCT. 6 female drug users' individuals were provided Referral for legal support, SRH along with medical treatment for 9. Similarly, financial support for detoxification and residential drug treatment Support was provide to 5 female drug user individuals.

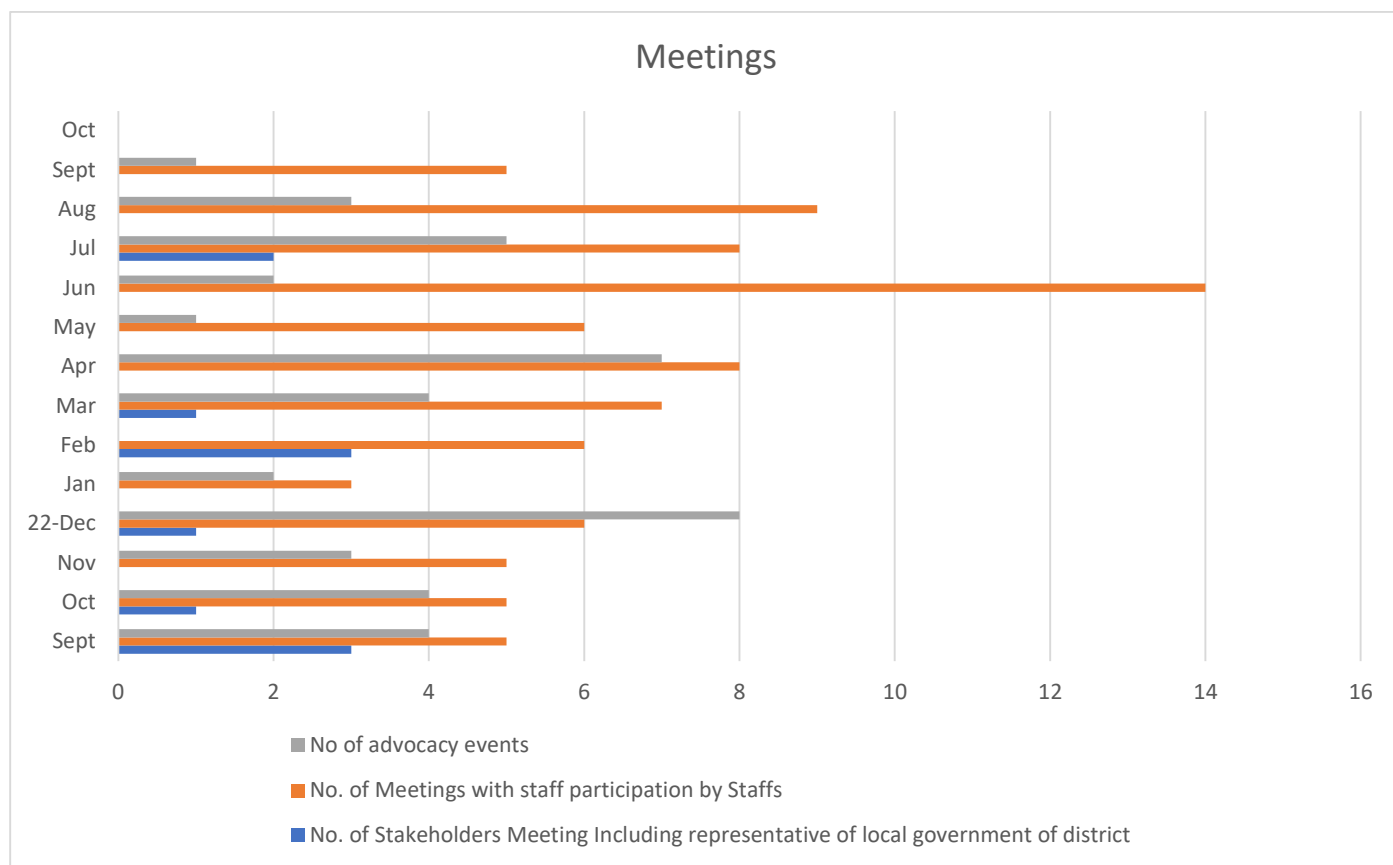


FIDU while a total of 1000 Clients visited Drop-in Center (DIC) safe spaces.



In the area of Capacity Building, 51 Orientation sessions on Sexual and Reproductive Health (SRH) among WWUDS were carried out over the course of the year with 54 service providers trained in their respective didactic

areas of harm reduction service provision and client care. From KAPs communities, 136 Trainings were provided for the number of key populations.



Some other advocacy-related activities were also carried out with different relevant Stakeholders Including representatives of local governments and district administrative bodies totaling 11 such meetings. So, the number of meetings with staff participation was 87 whereas the advocacy event counts 44 from month Sep 2022 to Oct 2023.

Conclusion

Hence, the project activities were held smoothly in the given period. Throughout this project, we have achieved substantial progress in developing and implementing innovative strategies aimed at enhancing better lifestyle towards our beneficiaries’ and expanding access to primary health care within our partner organizations.