

Project Annual Report

August 2024-July 2025

17th Sharwan, 2081-15th Sharwan 2082

**Community Led Comprehensive Harm Reduction Project
and
Primary Healthcare Services for WWUD implemented
in five Districts of Nepal
supported by
ViiV Healthcare Pvt. Limited
'Harm Reduction Momentum Grant'**



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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 of September 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. When the government lifted the curfews and lockdowns 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.

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

2. Introduction to the organization and partner organizations of Viiv

2.1. 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 unofficial individual members, Recovering Nepal works to combat stigma & discrimination, raise awareness of fundamental rights, push for legislative change, and improve People Who Use Drugs (PUDs) access to affordable, all-encompassing care.

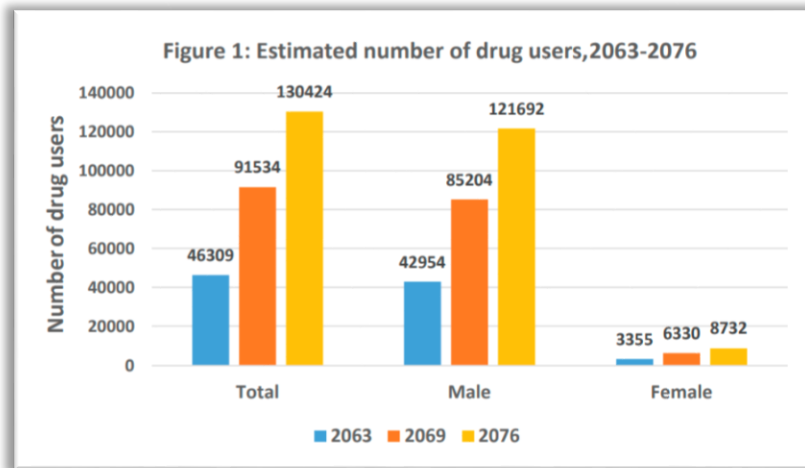


According to the RN's Strategic Plan 2018–2022, it was intended to strengthen the network of women who use drugs (WWUD) to advance gender parity and provide access to high-quality, affordable services.

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 focus 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.

2.2 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 several 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.² Women are more inclined to develop 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.^{3, 4}

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

² Centers for Disease Control and Prevention. (2020). [About Opioid Use During Pregnancy](#).

³ Office of Women's Health. (2017). [Final Report: Opioid Use, Misuse, and Overdose in Women](#).

⁴ Centers for Disease Control and Prevention. (2018). [Prescriptions Painkiller Overdoses](#)

syphilis among women who inject drugs in Nepal highlights the need for tailored interventions and prevention programs for this group. The high 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.⁵

2.3 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 Grant', 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 behind⁶.

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. 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

⁵ <https://americanaddictioncenters.org/harm-reduction>

⁶ <https://viivhealthcare.com/about-viiiv/>

Phase II (Positive Action Grant)

1. Ekta Nepal at Chitwan, Nepal.
2. Asha Foundation at Rupandehi, Nepal.
3. Neeta Foundation at Makwanpur, Nepal till Dec 2024 and Siyaan DIC from the month of Jan 2024 to July 2024.
4. Naya Dristhi at Banke, Nepal

Continuation of Positive Action Grant

(Harm Reduction Momentum Grant)

1. Ekata Nepal, Chitwan
2. Asha Foundation Rupandehi
3. Siyaan Rehabilitation, Makwampur
4. Damayanti Foundation Nepal, Banke

The Harm Reduction Momentum Grant supports community-based harm reduction initiatives targeting WWUDs in Nepal. The approach integrates public health, human rights, and gender-sensitive strategies to address HIV prevention, reduce stigma, and promote empowerment among marginalized women. Implemented through women-led organizations, the program leverages lived experiences to ensure inclusive and effective service delivery.

3. Objectives/Goals of the project

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

Spearheaded by RN Women, Recovering Nepal seeks to increase access to and uptake of harm reduction services 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 groups to access the services, routine program data, IBBS surveys and national estimates.
2. The RN seeks to establish a comprehensive service package for women and other gender minorities who use drugs.
3. To continue to support a successfully established community-based HR program for WWUD with ownership and collaboration of national program of sustainability.
4. To create an entry point for linkage building case identification for uptake and utilization of services for WWUD through a peer-based model.
5. To build the capacity for empowerment of WWUD with psycho-social and life skills interventions 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.

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**HR commodities Supply by: National Centre for AIDS and STDs Control (NCASC)-
Government of Nepal**

- ✓ Coordination with the National HIV prevention Care program, NCASC.

IMPLEMENTING PARTNERS:

9. Ekata Nepal, Chitwan
10. Asha Foundation Rupandehi
11. Siyaan Rehabilitation, Makwanpur
12. Damayanti Foundation Nepal, Banke

Activities Conducted:

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

4. District-wise Target vs. Achievement of total reached (till July 2025)

Total Beneficiaries Reached till 15th Sharwan, 2082 (31st July 2025)

Districts	National Size Estimation (By the government of Nepal)	Target (95%) UNAIDS 95 95 95	Reached till July 2025	Remarks
Chitwan	269-308	274	320 (116%)	New Women who inject drugs are rapidly growing, or the estimated size was low
Rupandehi	342-440	371	160 (43%)	Size estimation might be high, or drug-using patterns have been changing
Makwanpur	104-139	115	122 (106%)	
Banke	432-516	450	337 (74%)	
Total		1210	926 (77%)	

Based on the national size estimation by the Government of Nepal and UNAIDS' 95-95-95 target, the project set a target of reaching 1,210 Women Who Use Drugs (WWUD) across four districts. By July 2025, a total of 926 WWUD (77%) had been reached.

Chitwan (116%) and Makwanpur (106%) exceeded their targets, indicating either rapid growth of new injectors or underestimation in the size estimation.

Banke (74%) made good progress but fell short of the target, while Rupandehi (43%) lagged significantly, likely due to overestimation in population size or shifts in drug-use patterns.

Overall, while achievements were strong in some districts, the gap between target and reach highlights the need for revised population size estimation and adaptive outreach strategies to better align services with the realities on the ground.

5. Program Details of Sub Grantee:

5.1. Behaviour Change Communication (BCC) Session

BCC Orientation for WWUD was conducted by all the respective organizations in support of Recovering Nepal and **ViiV Healthcare**. BCC is conducted bi-monthly in the DIC center. 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 concerns in a discussion session. The main purpose of this event is to inform women who use drugs about the following topics:

- Introduction to Behavior Change Communication
- HIV/AIDS and STI prevention
- Personal hygiene and safe injection practices
- Accessing healthcare and support services
- Communication and negotiation skills



Fig: BCC Orientation/Sessions

5.2. HIV and Drug Awareness Program

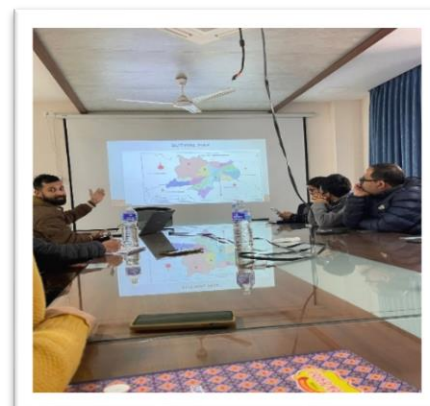
The **HIV and Drug Prevention Awareness Program** is one of the scheduled activities implemented by the partner organizations. The program provides comprehensive information on HIV, including its causes, symptoms, modes of transmission, and preventive measures. It also raises awareness about drug addiction, highlighting its health and social impacts. During the session, the focal person facilitates discussions on the interconnection between HIV and drug use, and shares practical strategies to help individuals protect themselves from both HIV and substance-related harm.



Fig: HIV/Drug Awareness program

5.3. Meeting with Local Government Authority:

A meeting is held with the local government authority to review ongoing and planned program activities, address existing challenges, and explore areas for cooperation. The discussion focused on aligning partners' interventions with local government priorities, promoting resource sharing, and establishing sustainable support mechanisms for vulnerable populations affected by drug use, HIV/AIDS, and gender-based violence. The engagement marked a significant step toward strengthening partnerships for long-term public health outcomes. It highlighted the critical role of collaboration between civil society and government institutions in addressing drug-related harm, advancing HIV prevention, and responding to the needs of People Who Inject Drugs (PWIDs).



5.4. Stakeholder Meeting with Law Enforcement

Stakeholder meetings are conducted with the active participation of 15 members in each event within four partner organizations, including representatives from local government, civil society organizations, and police personnel. The sessions provided an opportunity for stakeholders to gain a deeper understanding of the organization's work and the realities faced by Women Who Use Drugs (WWUD). The meetings fostered interactive discussions, facilitating the exchange of ideas, clarification of concerns, and collective reflection on the scope and objectives of the project.



5.5. MPAC Meeting

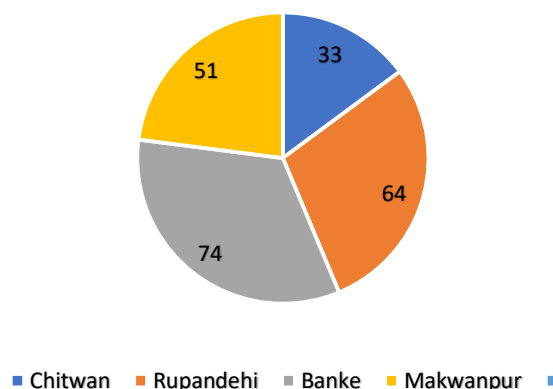
The Municipality level Project Advisory Committee (MPAC) meeting was convened with the participation of representatives from government agencies, civil society organizations, law enforcement, health service providers, and community members. The meeting served as a strategic platform to review project progress, discuss key challenges, and guide effective implementation. Members actively contributed by sharing their insights, offering technical inputs, and recommending practical solutions to strengthen program delivery. The MPAC meeting also reinforced collaboration among stakeholders, ensuring that the project remains aligned with its objectives and responsive to the needs of Women Who Use Drugs (WWUD).



5.6. Primary Healthcare (PHC) / Doctor Check-up

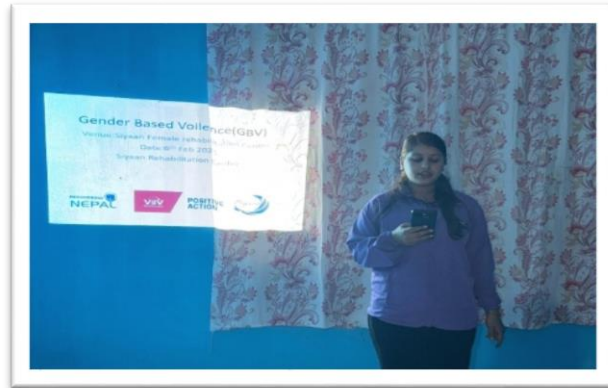
From August 2024 to July 2025, monthly Primary Healthcare (PHC) services were conducted to provide timely medical support for Women Who Use Drugs (WWUD). Total number of 222 beneficiaries were provided services during Primary Checkup Doctor Visit. During this period, a total of beneficiaries accessed PHC services as highlighted below in a pie chart:

Primary Healthcare (PHC) / Doctor Check-up Total service provided (Aug 2024-July 2025)

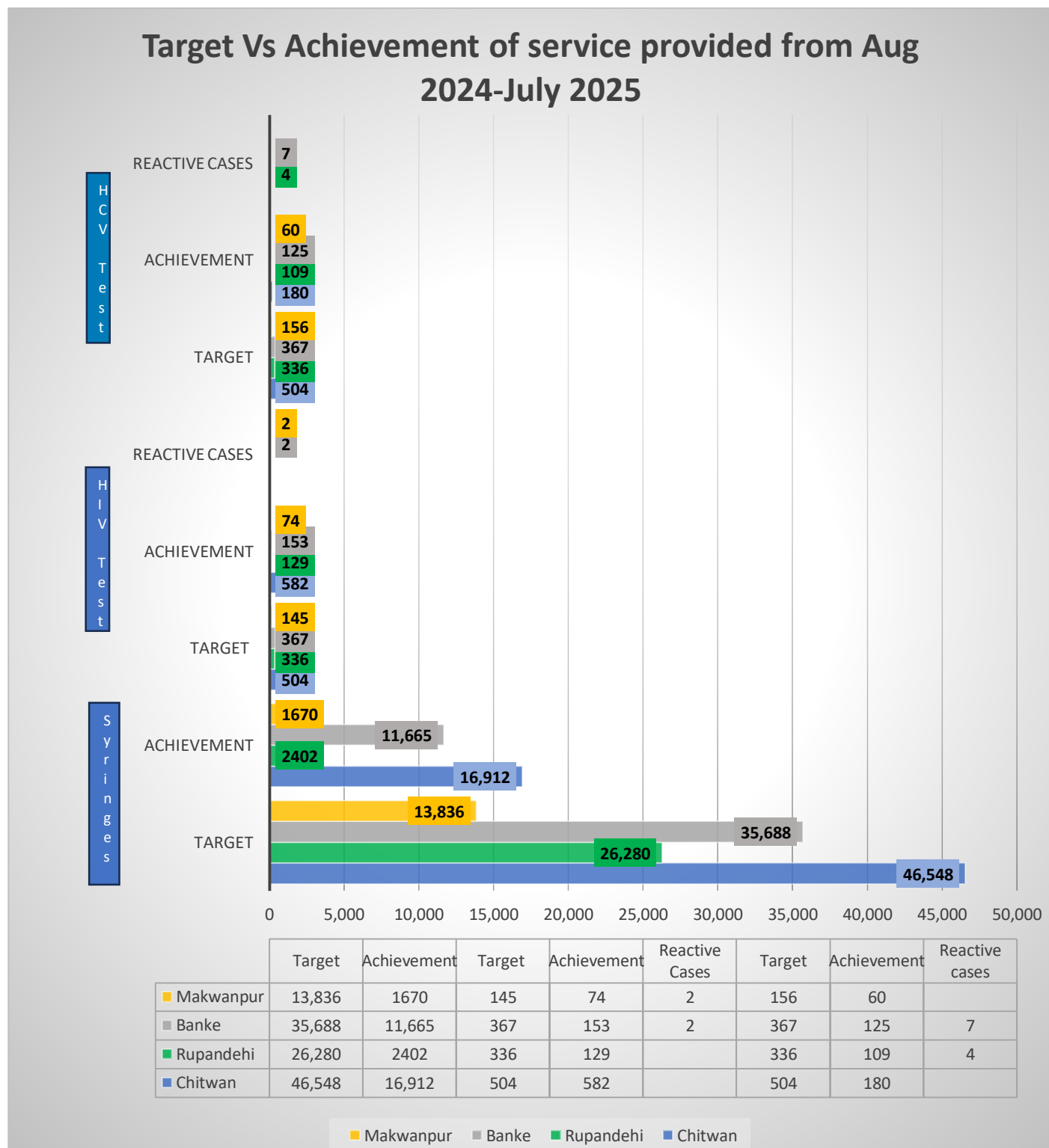


5.7. Gender Based Violence Orientation

The Gender-Based Violence (GBV) Orientation aims to enhance participants' understanding of GBV, its root causes, forms, and the profound impact it has on individuals and communities. It seeks to raise awareness of human rights and legal protections while promoting gender equality and challenging harmful social norms. The orientation also focuses on strengthening participants' capacity to identify, respond to, and refer GBV survivors to appropriate services, ensuring timely and effective support. Furthermore, it emphasizes the importance of collaboration and coordination among communities, service providers, and local authorities to create a safer and more supportive environment for those affected by GBV.



6. Target Vs Achievement of Service provided from August 2024- July 2025



The chart compares the service targets set by the central office with actual achievements across four districts. Chitwan had the highest target and achieved the largest number of services, while Banke and Rupandehi showed steady progress, though slightly below their targets. Makwanpur, with the smallest target, also met a fair share of its goal. Reactive cases identified highlight the project's contribution to early detection. Overall, districts made strong efforts despite ambitious targets. The total of **32,649 syringes** were distributed within a year. **4 HIV Reactive** cases and **11 HCV reactive** cases in a year.

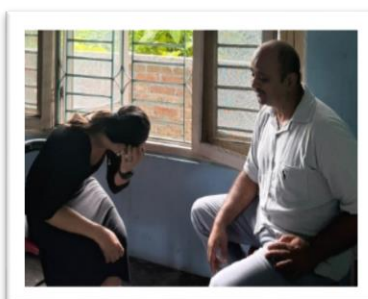
7. Activities conducted at the Central Level

7.1. M&E Visit from 23rd July, 2025-30th July 2025

The central monitoring and evaluation visit covered **four districts** (Banke, Rupandehi, Chitwan, Makwanpur) to assess the work of partner organizations under the **ViiV Harm Reduction Momentum Grant**.

- **Strengths:** Offices and documentation systems were generally well-organized, with proper stock management, daily log sheets, and program records. Stakeholder coordination meetings and beneficiary interactions highlighted positive community trust and effective service delivery.
- **Challenges:** Common gaps included a lack of laptops/printers, inadequate budgets for medicines and transportation, storage issues for HIV test kits due to the hot climate (requiring refrigerators), and delays in CLT services due to training and equipment shortages.
- **Good Practices:** Regular log sheet cross-verification, transparent financial documentation, collection of used syringes, and strong rapport with WWUDs were observed across sites.
- **Urgent Needs:** Provision of laptops, refrigerators, printers, transport support, and basic equipment to strengthen program efficiency and ensure reliable service delivery.

The visit showed consistent service delivery efforts despite resource constraints. Addressing infrastructure and logistical needs will enhance program accuracy, sustainability, and access to health services for Women Who Use Drugs (WWUDs).



7.2. Day Celebration



Fig: International Day Against Drug Abuse and Illicit Trafficking 2025

The event International Day Against Drug Abuse and Illicit Trafficking 2025 was organized on **26th June 2025 at Mahendra Police Club, Kathmandu**, by Recovering Nepal with support from the ViiV Harm Reduction Momentum Grant.

Key Highlights:

- **Youth Engagement:** 500 T-shirts distributed to students to spread awareness and reduce stigma.
- **Recognition:** The Ministry of Home Affairs honored Recovering Nepal with a Certificate of Appreciation for its contribution to harm reduction and rights advocacy.
- **Advocacy Campaign:** “Support. Don’t Punish” campaign led by women advocates emphasized shifting from punitive drug policies to compassionate, rights-based approaches.

Major Outcome:

The **Home Minister (Ramesh Lekhak)** announced the establishment of a Dedicated Department for Drug Control in Nepal, aiming for a more structured, coordinated, and health-centered response to drug issues. The day reinforced the message that drug use should be addressed through **support, not punishment**, marking progress toward evidence-based, humane, and inclusive drug policy reform in Nepal.



7.3. Emergency Support

The emergency fund has been strategically utilized to provide critical support for Women Who Use Drugs (WWUDs), addressing their most urgent health and treatment needs. It has been used to facilitate access to drug treatment programs, ensuring timely intervention for women seeking recovery support. Additionally, the fund has covered medical expenses for abscess management, a common and serious health complication among injecting drug users, preventing further health deterioration. Beyond this, it has supported a range of essential health-related treatments, enabling WWUDs to receive immediate care during emergencies. Overall, the fund has played a vital role in safeguarding the health and well-being of total number of 8 WWUDs by ensuring that emergency medical and treatment services are readily available when most needed.

7.4. Data Management Training

An **RNIS online data management system** has been developed and introduced for the four partner organizations focal person. This system enables standardized data entry, secure storage, and efficient management of service delivery information. Centralizing data collection allows real-time monitoring, cross-verification, and analysis at the central level. The system not only improves accuracy and transparency but also strengthens evidence-based decision-making, reporting, and overall program efficiency.

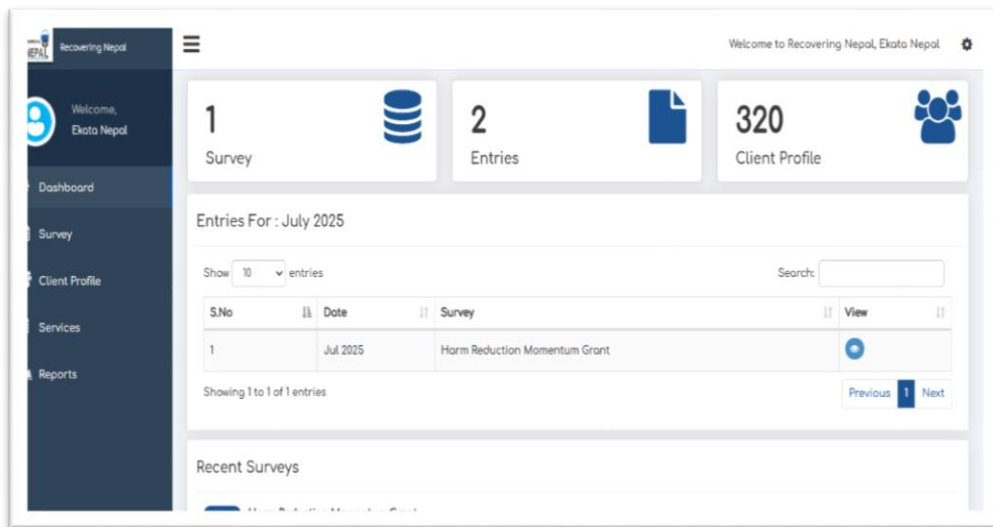


Fig: Recovering Nepal Information System (RNIS) online data entry

8. Conclusion

The Harm Reduction Momentum Grant has significantly advanced gender-sensitive harm reduction services for Women Who Use Drugs (WWUD) in four districts of Nepal. Despite resource and outreach challenges, the project reached 77% of its national target, with notable success in Chitwan and Makwanpur. Through community-led initiatives, partnerships with local stakeholders, and the introduction of the RNIS data system, the program strengthened service delivery, improved transparency, and amplified the voices of WWUD. Importantly, national recognition and policy commitments signal progress toward a more compassionate, rights-based drug response in Nepal. Sustained investment and government support will be vital to build on these achievements and ensure long-term impact.

Thank You

