

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



Factsheet 7: HIV Surveillance in Nepal, 2015

Nepal has been monitoring HIV and STI epidemic by collecting routine data from the following sources:

Case Reporting of HIV and STI

Routine case reporting of HIV and STI is done from HIV testing and counseling and PMTCT sites as well as other service sites. The routine reporting of HIV and STI from these sites is integrated in HMIS since 2014.

Integrated Biological and Behavioral Surveillance

Nepal has been conducting HIV and STI surveillance particularly among key populations, namely: PWID, FSW and their clients, MSM/TG, and male labor migrants for more than a decade mainly to track changes in HIV and STI prevalence along with behavioral components such as condom use. Hepatitis-B and C screening among PWID has been started in the IBBS surveys from 2015.

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. HIV drug resistance survey is being initiated among patients initiating and receiving ART to assess the prevalence and patterns of both acquired as well as pretreatment drug resistance in the country.

Size estimation of key populations

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

HIV Infection Estimations and Projections

These are being done annually in Nepal based on available prevalence and population size data among population groups as well as the updated program coverage of key interventions such as ART, PMTCT and 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, program managers, development partners and other relevant stakeholders to ensure public health actions.

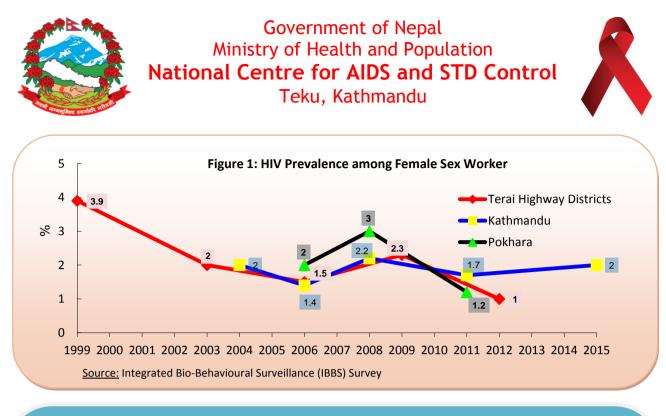
Sentinel surveillance

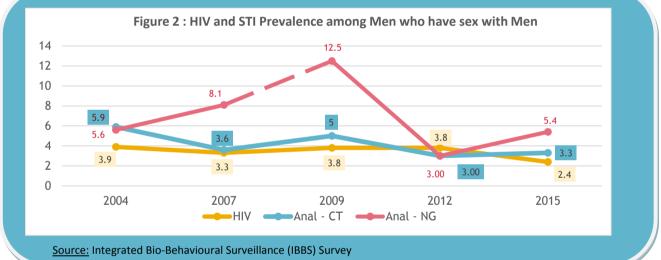
Sentinel Surveillance among key populations at higher risk, ANC attendees and STI patients are planned and will be started in the all regional, zonal and central level hospitals across regions.

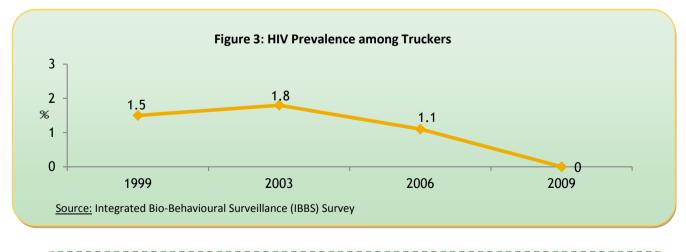
NCASC is taking the lead in HIV surveillance activities in Nepal, in technical collaboration with WHO, UNAIDS and USAID/Saath-Saath Project including the engagement of communities and people living with HIV.

Source: NCASC, 2015

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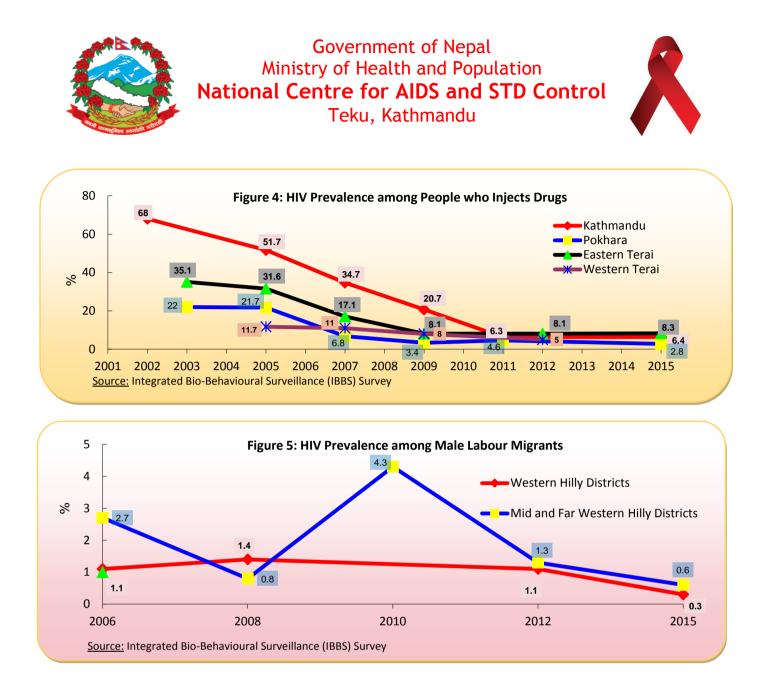


Table 1: IBBS surveys conducted (1999 – 2015)

Key populations at higher risk	Survey areas	Rounds	Survey years
Female Sex Workers (FSW)	Kathmandu Valley	5	2004, 2006, 2008, 2011, 2015
	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	6	2002, 2005, 2007, 2009, 2011, 2015
	Pokhara Valley	6	2003, 2005, 2007, 2009, 2011, 2015
	Eastern Terai Districts	6	2003, 2005, 2007, 2009, 2012, 2015
	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	Kathmandu Valley	5	2004, 2007, 2009, 2012, 2015
Transgender (TG)			
Male Labour Migrants (MLM)	Western to Mid & Far Western Districts	5	2006, 2008, 2010 ^ª , 2012, 2015
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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