

# THE LINK - NEPAL

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Special Issue on  
Treatment Initiation Efforts

## LINKAGES Nepal Project Treatment Initiation Efforts

Globally, rapid expansion and early access to antiretroviral therapy (ART) have resulted in the **reduction** of HIV-related morbidities and mortalities. ART initiation on the **same day or within seven days** of confirmation of an HIV-positive test prevails as a cornerstone in the path of the second 90 benchmark in the **90-90-90** by 2020 target set by the Joint United Nations Programme on HIV/AIDS (UNAIDS). The **World Health Organization (WHO) recommends** treatment initiation on the same-day—if feasible—or within seven days of HIV confirmation. Universal HIV treatment, also termed as the “treat-all approach” or “test and start,” is an essential strategy to follow in order to meet the 90-90-90 target. Optimizing treatment initiation efforts is a priority activity and **minimum program requirement** of the Linkages across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES) project, funded by the United States Agency for International Development (USAID) and the United States President’s Emergency Plan for AIDS Relief (PEPFAR).

Nepal adopted the **test-and-treat** approach in 2017. Since then, cluster of differentiation 4 (CD4) count results are no longer recommended as a requirement for determining when to start ART. Recent revision of the National HIV Testing and Treatment Guidelines 2020 (currently in draft) recommends ART initiation on the same day or within seven days. LINKAGES Nepal’s treatment optimization efforts for various levels are described below.

### National Level

LINKAGES Nepal has worked with government and non-government stakeholders for ART initiation on the same day as test confirmation or within seven days at national HIV technical working group (TWG) meetings, logistic task force (LTF) meetings, and lab technical committee meetings. In addition, LINKAGES Nepal played an active role in the revision of the National HIV Testing and Treatment Guidelines and contributed to addressing issues related to ART initiation, community-based ART (CB-ART), and regimen optimization with tenofovir/lamivudine/dolutegravir (TLD).



### Contents

- LINKAGES Nepal Project Treatment Initiation Efforts 1-2
- Breaking the Barriers in Treatment Initiation: A Case in Point 3
- The Power of Persuasion: A Family Reunites through Efforts from a Peer Navigator 4
- LINKAGES Nepal Project Achievements (October–December 2019) 5
- Important Activities and Events (October–December 2019) 6-7
- Visitors Log 8-9



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All these approaches will contribute to rapid treatment initiation. The project is also assisting with the revision of the National Clinical Management of HIV Training Curriculum and training slides that include same day or within seven days treatment initiation. Further, LINKAGES Nepal, under the [National Centre for AIDS and STD Control's \(NCASC\)](#) leadership, is conducting national level training for clinical management of HIV with updated recommendations on same day or within seven days ART initiation. LINKAGES Nepal plans to conduct seven trainings for more than 150 ART service providers. Although major procurement of ARV medicines is done by the Government of Nepal, LINKAGES Nepal is also supporting procurement of ARV medicines as per the request from NCASC as a gap-filling measure.

### Anti-Retroviral Therapy Sites

To facilitate timely ART initiation and increase adherence and retention, LINKAGES Nepal conducts regular mentoring and continuing medical education (CME) sessions for staff at ART sites. During October–December 2019, CME sessions were held at more than 16 ART centers and about 830 service providers were sensitized for facilitating same day and within seven days ART initiation. In addition, LINKAGES Nepal, in coordination with NCASC and the ART sites through LINKAGES Nepal implementing partner



Photo 1 : LINKAGES Nepal conducting continued-medical education in ART sites

agency (IP) has provided human resource support in 14 ART sites to ensure efficient and orderly initiation of ART.

### Community and Clinic Level

LINKAGES Nepal has a strong community- and clinic-based system to support treatment initiation. LINKAGES Nepal has promoted messages on undetectable equals untransmittable (U=U) message through community, clinics and social media influencers. LINKAGES Nepal has formed case management team in the clinics under leadership of the paramedical person as case manager including peer navigators (PN) and ART counsellors. PNs are mobilized to accompany individuals who have an HIV-positive test result to the treatment center for ART initiation. PNs are also mobilized to identify HIV-positive individuals in the community who are not enrolled in treatment, and then counsel, educate, and encourage them to begin treatment as well as providing support to reach the facility. From October to December 2019, a total of 51 PNs from LINKAGES Nepal districts enrolled 411 people living with HIV (PLHIV) in treatment. Likewise, LINKAGES Nepal initiated to mobilize peer champions from December 2019 and positioned peer champions as “STARS”, who are outstanding performers. These role models STARS share their journey and experience of the treatment and motivate PLHIV for treatment initiation.



Photo 2: LINKAGES Nepal implementing partner agency staff providing clinical services



## Breaking the Barriers in Treatment Initiation: A Case in Point

*“There is no difference between saving lives and extending lives, because in both cases we are giving people the chance of more life.” - Aubrey de Grey*

An instance of LINKAGES Nepal Project’s pledge to save lives found relevance in the life of Manish Sharma.\* Manish was confirmed as HIV positive and needed to be enrolled in treatment as soon as possible but getting his consent turned out to be a challenge we had not anticipated. Social stigma associated with HIV-positive individuals and the deep-seated belief among the general population that one’s life ends once an HIV-positive diagnosis is determined discouraged Manish from seeking appropriate treatment.

As our repeated attempts at treatment initiation failed, he was taken to Sudur Paschim Samaj (SPS) office where we accommodated him for a month. During this time, we found Manish to be depressed and distraught with life, often contemplating dying as he felt he had no other option. However, with repeated consultation and counselling, he eventually agreed to initiate treatment after 15 days. Even then, the period after medication was not smooth either. Manish experienced side effects including nausea and had difficulty walking for several months. His CD4 count was reduced to just 34. Disheartened with treatment, Manish started contemplating the discontinuation of antiretroviral (ARV) medicines as he thought it did not suit him.

“It is not easy to counsel clients for treatment initiation. Our key population members do not want to disclose their status and most of them want to enroll in treatment in some other district which makes following up tough for us. However, counselling them and saving lives feels rewarding.”

Buddhi Dhungel  
Peer Navigator,  
Human Conscious Society (HCS),  
Chitwan

In such a dire condition, two transgender PLHIV from the community came forward to counsel him. Citing their own examples, they counselled Manish telling him that he should be hopeful toward life

since an HIV-positive diagnosis does not mean the end of life. Such attempts at counselling by different people affected Manish in such a way that he eventually found the courage to continue treatment and fight this condition. Manish started taking the medicines, his side effects subsided, and finally he returned home committed to follow the treatment regimen. With regular follow-up visits, our community-based supporters (CBSs) now make sure Manish is taking his medicines.



“Until and unless the client starts ART, I feel restless, reminded of the responsibility I have in client’s health. Sometime even after a lot of hard work and counselling, some clients do not enroll in treatment. That is when I feel bad, realizing I couldn’t do much for the client.”

Ishwori Pandey  
Peer Navigator, NAMUNA

\*Pseudonym

## The Power of Persuasion: A Family Reunites through Efforts from a Peer Navigator

Raju Prasad Subedi is a PN from the General Welfare Pratistan (GWP), a LINKAGES Nepal IP working in Makwanpur district. During Raju's routine visits, Kalawati,\* a woman living with HIV, informed Raju that her husband had left her and married someone else. The ex-husband, Janardan,\* was living with HIV and on ART. According to Kalawati, Janardan moved to Palung, Makawanpur district, but Raju could not locate the newlywed couple despite his repeated efforts. Raju later learned that Janardan and his new wife, Manmati,\* were living in Rajaiya, Makawanpur district, and Manmati was expecting a child. Janardan had not disclosed his HIV infection status to Manmati; in fact, upon meeting Raju, Janardan requested Raju to hide his HIV-positive status from his new wife. Raju counselled Janardan on multiple occasions to bring Manmati for HIV testing, but he refused. Nonetheless, Raju did not give up.

After Raju met Janardan multiple times, Janardan took Manmati for an HIV test and antenatal checkup. Raju referred her to the clinic where she tested positive for HIV. The clinical team at GWP counselled her extensively before referring her to Bharatpur Hospital, where she could access prevention-of-mother-to-child transmission services. However, she said she would be unable to go for the services because her delivery date was fast approaching, and her financial situation was not good.



“It feels great to enroll clients on ART but it is becoming tougher day by day. Let alone the medicines, patients complain of not having enough money for groceries also. In such cases, I feel happy to buy them groceries in order to help enroll them to treatment.”

Karuna Thing  
Peer Navigator, SAHAVAGI, Chitwan

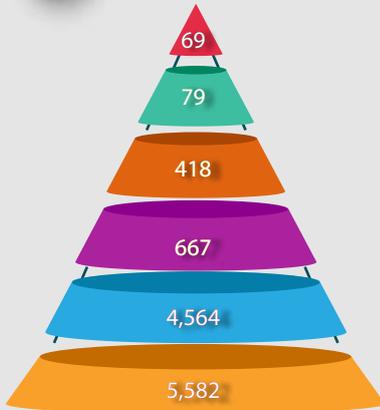
Soon afterward, Raju learned that Manmati had delivered the baby boy at her home. Raju continued to visit her to ensure that she took her ARV medication. As the baby grew sick, it became imperative to have the one-month-old boy tested for HIV. At the same time, Janardan and Manmati's financial situation grew worse, and they met a couple willing to adopt the baby boy, as they had no son. Given their dire financial situation, Janardan and Manmati reluctantly gave up their son in exchange for payment. However, when the baby's test result was returned by National Public Health Laboratory (NPHL) as positive for HIV, they did not disclose the baby's HIV status to his new family. Once the adoptive couple discovered the baby's status, they decided to return him.

The GWP team immediately referred the child to Bharatpur ART center. Now that the child has been started on ARV medications, the doctors say he is stable and improving. GWP will continue to monitor the child's health and help with his treatment. The family is happy and grateful to LINKAGES Nepal for making all this possible.

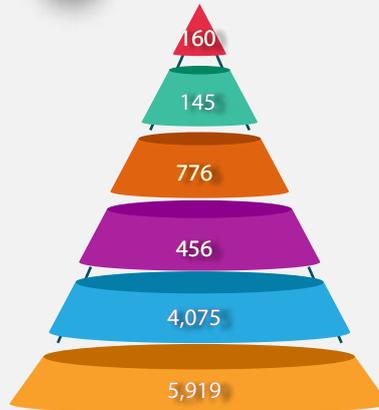
\*Pseudonym



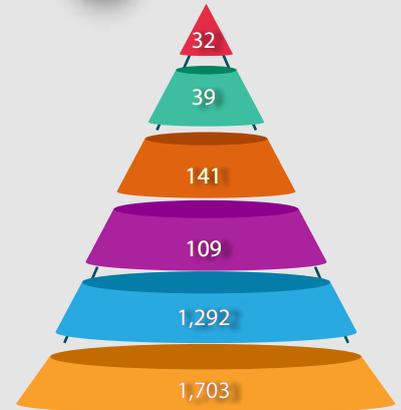
Female Sex Workers



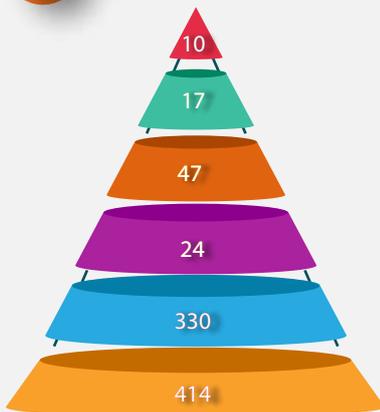
Clients of FSWs



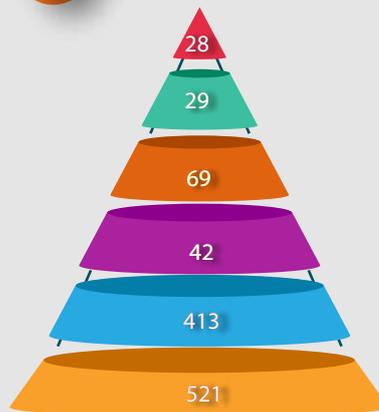
Men who have Sex with Men



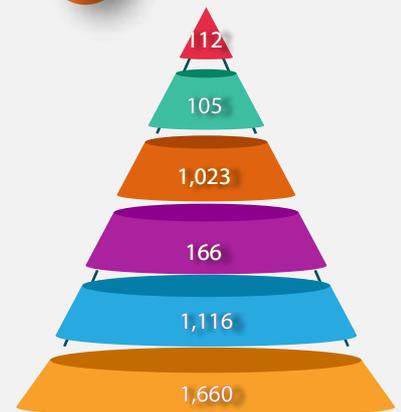
Male Sex Workers



Transgender People



Other High Risk Individuals



15,799

HIV Prevention Interventions



11,790

HIV Testing and Counselling Services



2,474

HIV-Positive Individuals Received Care and Support Services in Community



1,464

Screened for Sexually Transmitted Infections (STIs)



414

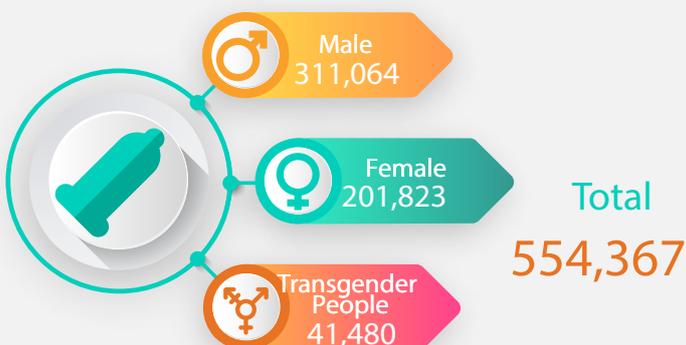
HIV-Positive Diagnosed



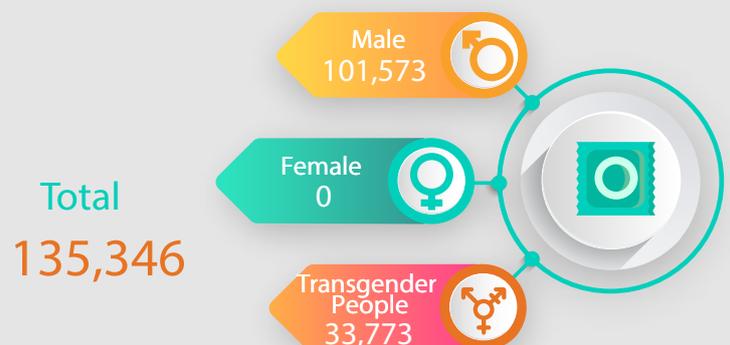
411

HIV-Positive Individuals Initiated Treatment

### Condom Distribution



### Lubricant Distribution



## Important Activities and Events (October–December 2019)

LINKAGES Nepal, in collaboration with the NPHL and NCASC, conducted a training on community-led testing (CLT) of HIV on October 17–19, 2019 in Kathmandu. The goal was to improve the capacity of community level workers—CBSs and PNs—for conducting HIV screening using the Determine test kit.



LINKAGES Nepal conducted a training on peer navigation on October 15–16, 2019 in Kathmandu. Thirty-three newly recruited PNs were trained on treatment navigation and community care for improving ART adherence and retention to treatment, care, and support.



LINKAGES Nepal conducted various events such as National Condom Day, World AIDS Day, and festival campaign during *Dashain*, *Tihar* and *Chhath* festivals with local stakeholders to create awareness and to accelerate HIV case finding and treatment initiation. During these campaigns, 343 were tested for HIV and 11 were diagnosed HIV positive.



LINKAGES Nepal conducted a training on data analysis and use for IPs' project coordinators, monitoring and evaluation officers, and district supervisors on October 15–18, 2019. Topics included changes in the PEPFAR monitoring, evaluation, and reporting (MER) indicators, changes in recording and reporting tools, and how to clean and analyze data of different services to identify gaps in the continuum of prevention, testing, case finding, treatment, viral load testing, and care and support services.

LINKAGES Nepal, in collaboration with NCASC, conducted a training of trainers (TOT) on HIV counselling on November 25–December 6, 2019 in Kathmandu to prepare a pool of trainers who will be capable of providing HIV counselling trainings.



LINKAGES Nepal, in collaboration with NPHL and NCASC, conducted five batches of training on HIV self-testing in Banke, Dhanusa, Kailali, Kaski, and Morang to initiate HIV self-testing in LINKAGES Nepal project districts.



LINKAGES Nepal conducted a TOT on motivational interviewing for enhanced interpersonal communication and counselling for HIV services on November 4–8, 2019 in Kathmandu to demonstrate appropriate active listening techniques and questioning strategies, and to provide relevant information respecting client autonomy. A rollout plan was then prepared for 19 districts.



LINKAGES Nepal conducted a training on motivational interviewing for HIV prevention, treatment, care, and support services on November 27–30, 2019 in Kathmandu regarding strategies to optimize HIV case finding, and encourage treatment support and viral load testing with suppression using motivational interviewing skills.



LINKAGES Nepal completed an orientation on hot spot and key population (KP) mapping for consultants of LINKAGES Nepal project and Save the Children International on December 4–5, 2019 in Kathmandu to understand the purpose of mapping, the operational definition of key population, and the appropriate tools to use.

LINKAGES Nepal completed a data cleaning workshop for IPs' monitoring and evaluation (M&E) officers, health assistants, and field supervisors on December 15–17, 2019 in Kathmandu on key PEPFAR indicators of MER, the relationship of LINKAGES Nepal recording tools with Mero Data tools, and to clean all data errors observed in Mero Data.

LINKAGES Nepal conducted training on HIV care and ART services tracking system on December 23–24, 2019 in Kathmandu. The goal was to teach participants how to capture individual client details including how to record a biometric sample (fingerprint) in the system, analyze data at the site level, and generate reports.





Kate Killberg, senior project manager, LINKAGES, visited LINKAGES Nepal on October 14–18, 2019 with the main objective to provide guidance and support on implementing PEPFAR activities. She visited LINKAGES Nepal IPs—STD/AIDS Counseling and Training Services (SACTS) and Parichaya Samaj—to observe outreach and community care services, observe a CB-ART site, and hold meetings with NCASC and NPHL.

Bir Rawal, statistics officer of Management Division, Health Management Information System (HMIS) section, visited IP Nepal National Social Welfare Association (NNSWA) on October 23, 2019. He gave an orientation and hands-on session for the M&E officer and health assistants (HAs) in preparing monthly reports from the city clinic through the district health information system (DHIS 2)/HMIS.



Madan Kumar Shrestha, senior public health administrator from NCASC, visited IP GWP on October 23, 2019. He observed the drop-in centers (DICs) and clinical rooms, and interacted with staff on HIV case finding including sexually transmitted infection (STI) diagnosis and treatment. He expressed appreciation for the project's provision of services, especially to KPs, and the follow-up to offer index testing to HIV-positive clients.

Mr. Shrestha also visited IP SAHAVAGI in Nawalparasi district. He interacted with staff on the topics of HIV case finding and STI diagnosis/treatment on November 1, 2019. He appreciated the contribution made by the project to provide services, especially to KPs and the follow-up to offer index testing for HIV-positive clients. He visited ART centers to discuss PLHIV ART initiation.

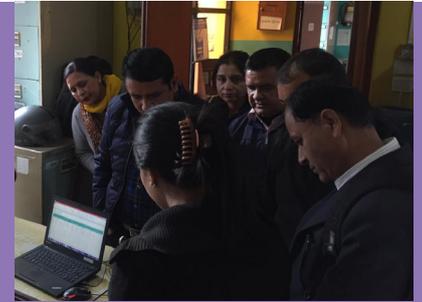
A monitoring visit from Hetauda Sub-Metropolitan was conducted on November 26, 2019 at LINKAGES Nepal IP GWP. The social development chief and health coordinator participated in this visit. They observed the DIC and its client registration process, clinical service in the lab, and the counseling room. The officials expressed appreciation for the work plan activities as well as regular reporting to the government and suggested coordination with local health organizations.



Asia Pacific Council of AIDS Service Organizations (APCASO), BACKUP Health Project team visited LINKAGES Nepal IP Nari Chetana Samaj (NCS) in Lalitpur district on November 20, 2019 for cross country learning and sharing, where the team held discussions on LINKAGES Nepal project activities for KPs including female sex workers (FSWs), men who have sex with men (MSM), male sex workers (MSWs), transgender people, clients of FSWs, and other high-risk individuals. The project team leader and program officer facilitated the visit. LINKAGES Nepal project director shared strategic priorities, approaches, activities, and achievements.

The health officer and the health coordinator from Bedkot Palika conducted a monitoring visit to LINKAGES Nepal IP NNSWA in Kanchanpur district. The visit occurred during a stigma and discrimination reduction training by NNSWA; the officials interacted with the participants.

The director of Kathmandu Metropolitan and health coordinator of nine Palikas from Kathmandu district conducted a monitoring visit to SACTS. The team observed the city clinic and HMIS recording tools. They expressed appreciation for SACTS' work related to HIV and STI services.



Dr. Khageshwor Gelal, senior health administrator; Rajaram Adhikari, HIV focal person; and Sabina Rijal, data entry person; all from the Health Office Lalitpur district, made a monitoring visit to NCS and city clinic. Dr. Gelal expressed appreciation for their work and the work of LINKAGES Nepal in supporting the government to achieve the 90-90-90 target in the district.

Dr. Michael Cassell, senior technical advisor, and Murugesan Sivasubramaian, project director, The Humsafar Trust, visited LINKAGES Nepal to support program acceleration for MSM, MSWs, and transgender people. The team visited LINKAGES Nepal IPs' sites and conducted a workshop to devise strategies for program improvement.



### Editorial Team

Bhagawan Shrestha, Country Representative, FHI 360 Nepal, Project Director, LINKAGES Nepal Project  
Rajesh P. Khanal, Deputy Project Director, LINKAGES Nepal Project  
Dr. Durga P. Bhandari, Technical Advisor, LINKAGES Nepal Project  
Kiran Bam, Technical Advisor-SBC, LINKAGES Nepal Project  
Anuradha Sharma, Program and Documentation Officer, LINKAGES Nepal Project  
Stevie Daniels, Editor, Research Utilization, LINKAGES Project

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### For further information, contact:

**LINKAGES Nepal Project | FHI 360 Nepal**

GPO Box 8830, Gopal Bhawan, Anamika Galli, Baluwatar, Kathmandu, Nepal

**Tel:** 977.1.4437173 | **Fax:** 977.1.4117475 | **Email:** LINKAGES-Nepal@fhi360.org