

SS Annual Progress Report 2009/2010

SAATHI SAMUHA

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1. LIST OF ACRONYMS AND ABBREVIATIONS

ART– Anti-retroviral therapy

BCC- Behavior change communication

CHBC- Community & Home-based Care

DACC –District AIDS Co-ordination Committee

DCP – Drug Control Program

DIC – Drop in Centre

FIDU – Female injecting drug users

GFATM- Global fund to fight AIDS, Tuberculosis and Malaria

IDU- Injecting drug user

MoHA – Ministry of Home Affairs

M&E – Monitoring and Evaluation

NAP+N- National Association of People Living with HIV/AIDS in Nepal

NCASC –National Center for Aids and STD Control.

NSEP– Needle syringe exchange programme

ORW – Out reach worker

OST – Oral Substitution Therapy

PLHAs – People living with HIV/AIDS

PR- Principal Recipient

RN – Recovering Nepal

SS – Sathi Samuha.

STI – Sexually Transmitted Diseases.

TB – Tuberculosis.

UNDP – United Nations Development Program

UNODC – United Nations Office of Drugs and Crime

VCT –Voluntary Counseling and Testing

VSON – Voluntary Service Overseas-Nepal

2. General Information

Name of the Organization

SAATHI SAMUHA

Projects & Partnership of the Fiscal Year 2009/2010

1. Scaling up coverage and quality of HIV & AIDS prevention targeted to most at risk populations: Treatment, care and support services for PLHAs (IDU Component)-Global Fund Round-7 HIV & AIDS Program (*Save the Children*)
2. Advocacy for strengthening the supportive/enabling environment to access HIV/AIDS services for female IDUs (*UNODC*)
3. VSO Partnership (*VSO-Nepal*)

Telephone No:

Email Address

+977-01- 4375712 (Central Office)
2071414 (Community Care Center)

sathi_samuha@yahoo.com

Report Prepared by:

Designation

Mr. Binod Gurung

Team Leader

Type of Report (Interim/Final/Annual Progress)

Annual Progress report

Report Period

16th July 2009- 15th July 2010

3. Organizations' History and Mandate

In the beginning of 1990s, drug use trend in Nepal shifted from oral to injection drug use due to severe law enforcement on illicit oral drugs use alongside with easy availability of injection pharmaceutical drugs like Buprenorphine (Brand name-Tidigesic) in all urban areas, highways and border districts. This switch in trend and severe law enforcement on drug use escalated a high risk behavior among injecting drug users such as sharing of non sterile syringes and injecting equipments which resulted to a peak prevalence of HIV among injecting drug users; up to 68% in 2002 and above 90% of Hepatitis C infection.

Confronted with this reality, around 2003 a group of people who use drugs met in a rehabilitation center in the process of their addictions' treatment and agreed to take up some actions. Some had been diagnosed as HIV positive and the others were struggling with social re-integration issues into the society. Stigma and discrimination remained prevalent to PWUDs and PLHAs while proper drugs and HIV treatment, care and support programs or options were quite few. Therefore, this group of former drug users decided to work together to address these gaps and especially in Kathmandu Valley. Hence in February 2006 SATHI SAMUHA (SS) was founded as a community based organization of people who use drugs and people living with HIV and AIDS in Kathmandu- Nepal. It was later officially registered under district administrative office and with Social Welfare Council. Since then, the organization has grown and it currently addressing the HIV and AIDS, health and livelihood needs of its target population (PWUDs, PLHAs and the general community).

Vision

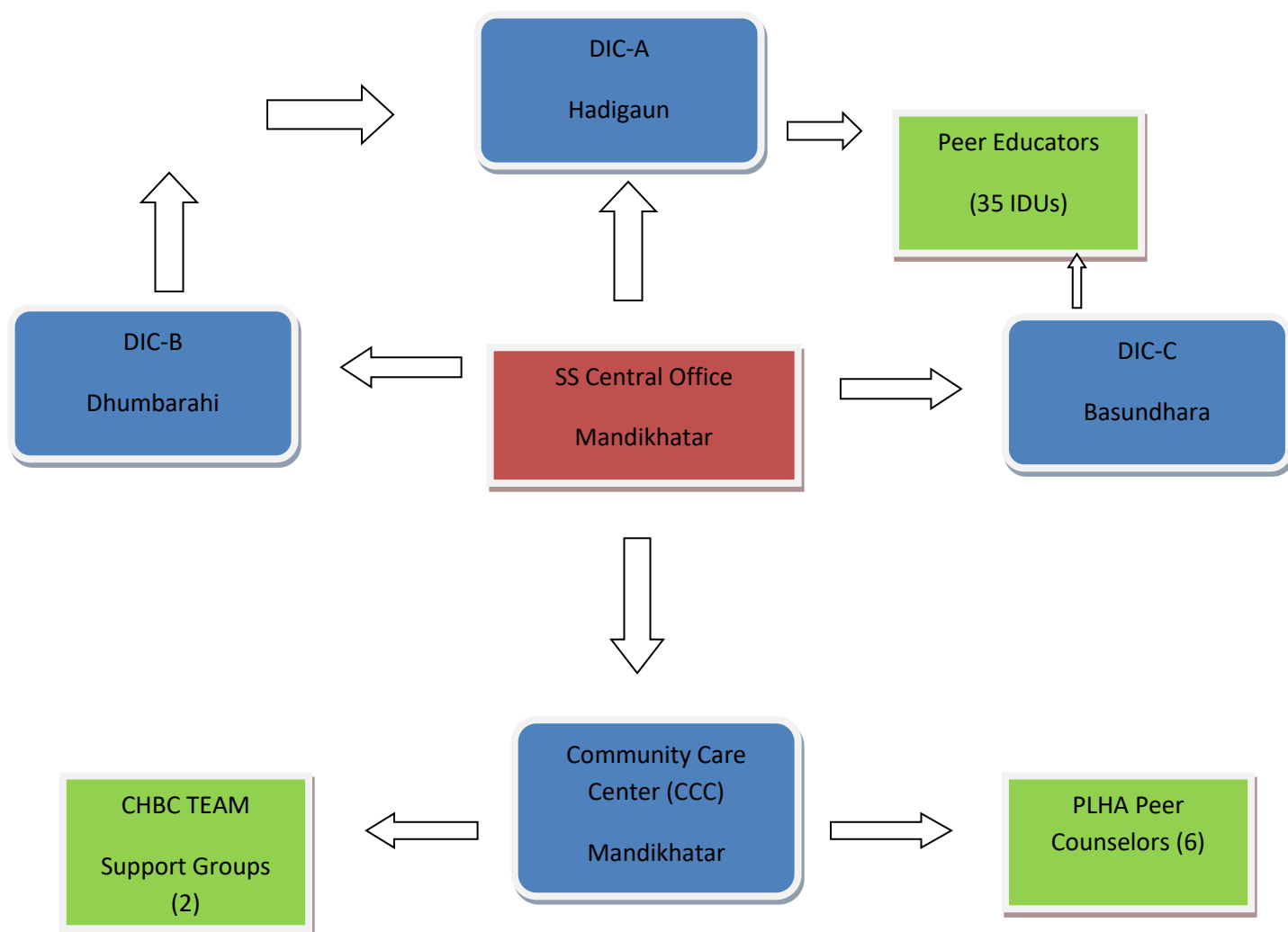
The vision is informed by the underlying challenges of HIV/AIDs, health, poverty and resources. The vision statement was revised to encompass the new wider community which is also SS's target. Our vision is: **'A society where people who use drugs and people living with HIV and AIDS enjoy equal rights and opportunities and living dignified & respected life'**

Mission

To provide health and social services to people living and affected with HIV & AIDS and people who use drugs, through prevention, awareness, treatment, care and support, harm reduction and advocacy programs to promote their rights to lead quality life.

4. Organ-o-gram

Save the Children/GF round-7 Project



5. Projects & Partnership 2009/2010

1. Save the Children/Global Fund round-7 HIV/AIDS programme

General Information

Project name: Scaling up coverage and quality of HIV/AIDS prevention targeted to most at risk population; Treatment, care and support services for PLHAs.

Project Duration: 16th November 2009- 15th November 2010 (1st Phase-Year-2)

District & Project Area: Kathmandu district, Maharajgunj belt

Final Beneficiaries: Injecting drug users & People living with HIV & AIDS

Cumulative Target-IDUs: 1260 IDUs (1st February 2009-15th November 2010)

Project Summary

SATHI SAMUHA initiated to implement the project “Scaling up coverage and quality of HIV/AIDS prevention targeted to most at risk population; Treatment, care and support services for PLHAs” in partnership with the Principal Recipient-Save the Children-Nepal under Global Fund round-7 HIV & AIDS Programme since 1st February 2009. On the second year, SS is continuing the same project from 16th November 2009-15th November 2010 in focus to reduce HIV prevalence among IDUs and to provide treatment, care and support service for PLHAs. SS is operating through its 4 service centers; 3 drop-in-centers for IDUs in different location of Maharajgunj belt and 1 Community care center for PLHAs in Mandikhatar, Kathmandu.

Drop-in-centers:

In order to achieve the 1st goal of the project “Reduce the HIV prevalence among IDUs”, SS have been providing different harm reduction services through its 3 drop-in-centers & outreach program for IDUs. The 3 drop-in-centers of SS are located at following places:

- DIC-A, Bhatkekopul-Hadigaun,
- DIC-B, Dhumbarahi and
- DIC-C, Basundhara



Drop-in-center at Dhumbarahi

The key activities of these DICs are:

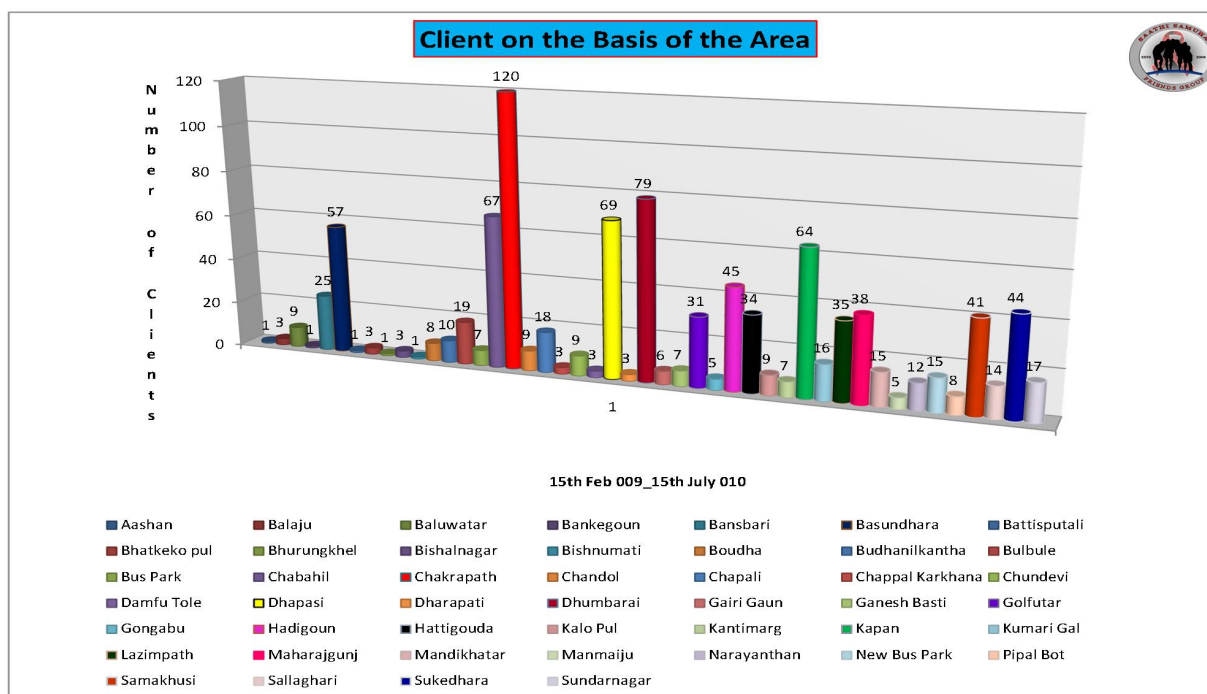
- Needle/syringe exchange program
- Outreach program
- Condom distribution
- Counseling, Information & Education
- Primary health care service
- Peer Education
- BCC session & Focus Group Discussion
- Day-care facility
- Referral service (VCT/STI/OST/Rehabilitation treatment, HIV related services etc)

Outreach Activities:

Regular outreach services with targeted HIV intervention including NSEP, BCC education, condom distribution, IEC material distribution etc for IDUs is an evidence-based intervention for reducing HIV and other blood borne infections among IDUs all over the world. SS under Save the Children/GFATM project is carrying out the same intervention for IDUs around its project area since the beginning of the project.

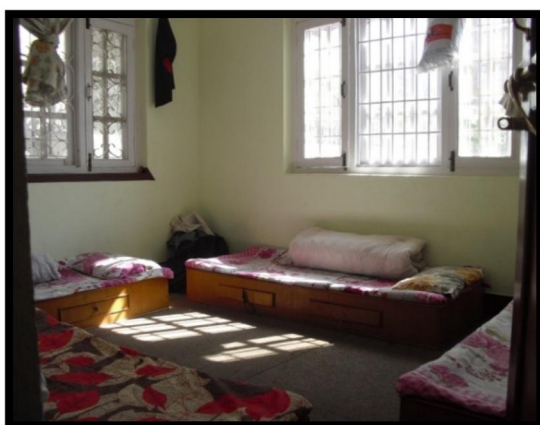
5 outreach workers through 3 drop-in-centers of SS conduct regular outreach activities with targeted HIV intervention in 47 IDU hot-spots around Maharajgunj belt and its surrounding VDCs. This outreach program has been the most successful intervention in an entire harm reduction program under GFATM project to reach the marginalized, socially excluded and hidden population; injecting drug user. One of the major reasons behind the effectiveness of harm reduction program carried out by SS is that all the staffs working under harm reduction program of SS are a former drug user that brings more compassion and quality in the service provided.

Chart of harm reduction program areas and client stature under GFATM project



Community Care Center (CCC):

CCC under GFATM project of SS is established to attain the 2nd goal of the project “Enhance the quality of life of PLHAs”. The major objective of this center is to increase access to quality care and support services for PLHAs. SS is delivering various services for PLHAs through this center.



CCC Dormitory



Clients having informal discussions

The key services provided by CCC are:

- Residential support (provide shelter, nutrition, care & support to PLHA and their family)
- ART observation facility
- Regular hospital based aid & assistance (access to comprehensive HIV services including TB/STI/OI & ART)
- Counseling (Individual and Family Counseling)
- Primary health care
- Minor treatment support (Pathological tests/CD4 count/Viral load test etc)
- Extensive information & education on HIV, ART, Treatment literacy, OIs, Positive living, Reproductive health etc).
- Referral and follow-up service

Some of the pictures under GFATM project



Interaction meeting with Law Enforcement



Coordination meeting with Stakeholders



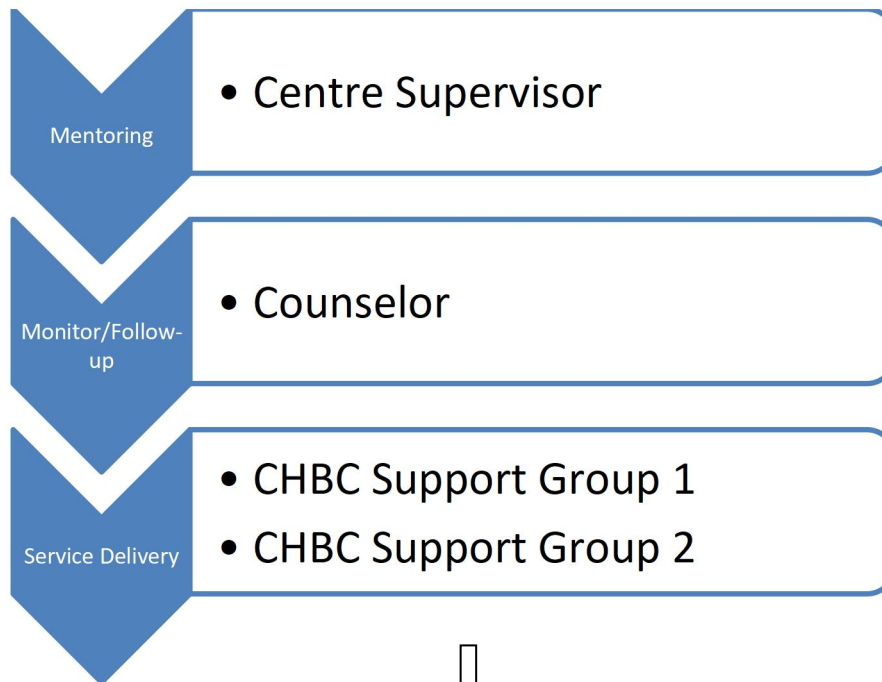
Observation of 27th Candle Light Memorial Day



Peer Educators meeting at DIC

CHBC Mobilization Chart

Community Care Center



Number of person in each CHBC support group is 6.

There are currently 33 HIV positive people receiving CHBC services from 2 CHBC support groups.

Note: All the people enrolled in the CHBC service are from & within the Kathmandu valley

Final Beneficiaries

People living with HIV & AIDS

Projects & Partnership 2009/2010

2. UNODC-FIDU Project

General Information

Project name: Advocacy for strengthening the supportive/enabling environment to access HIV/AIDS services for Female Injecting Drug Users

Project Duration: 1st October 2009-31st March 2010

District & Project Area: 5 Development Regions of Nepal

Final Beneficiaries: Female Injecting Drug Users

Project Summary:

Since 1st October 2009, SS got an opportunity to work directly for Female Injecting Drug Users through the project “Advocacy for strengthening the supportive/enabling environment to access HIV/AIDS services for FIDUs”. The key objective of this project is to develop an effective response in the indicated districts as expressed by the users’ group, community and district partners and the output is the development of enabling environment for gender and culture sensitive approaches in HIV prevention, treatment, care and support services for Female Injecting Drug Users in Nepal.

Specific activities undertaken:

Central level consultative meeting

SS initiated the project through conducting the series of consultation meetings with users group, Female Forum (female drug users wing under Recovering Nepal), Recovering Nepal and female health activists with the objectives to identify key issues affecting the FIDUs of central level such as existing social, health and legal service, barriers to access these services & gaps, family and societal supports to FIDUs and ultimately to create an enabling environment for upcoming regional level advocacy workshops.

Regional level consultative meetings

After the central level consultations SS conducted all 5 regional consultative meetings with female IDUs, regional coordinators of Recovering Nepal and representatives from FIDU service providers. All 5 regional consultative meetings were conducted at following dates and places respectively:

- Dharan- 18th November 2009 (Eastern region)

- Pokhara- 26th November 2009 (Western region)
- Chitwan- 29th November 2009 (Central region)
- Butwal- 2nd December 2009 and (Mid-western region)
- Nepalgunj- 5th December 2009 (Far-western region)



Participants at Consultative Meetings-Dharan



Participants at Consultative Meeting-Chitwan

During the consultative meetings at all 5 different regions, we tried to discover and find out the overall issues affecting FIDUs in the regional level as such to make the regional level advocacy workshops enable, but most of all the FIDUs attending the meetings were more focused on the service gaps rather than identifying and raising the issues directly related to the environment that supports and ensure their rights, family and societal supports and probable advocacy issues supporting their access to HIV/AIDS and reproductive health services.

1-day Regional level advocacy workshops

One of the key activities of this project was to organize a 1-day regional level advocacy workshop in 4 development regions of the country involving female injecting drug users and female living with HIV and AIDS (FLWHA), FIDU & FLWHA service providers, local authorities (CDO, DACC), health care providers, CBOs, journalists and media houses. The major objectives of these workshops was to gather all the issues affecting FIDUs at local, district and regional level, present the advocacy issues, conduct pre-test for IEC development, sensitize target groups about the advocacy strength and process and collect feedbacks from participants for further advocacy events.

SS conducted all 4 regional level advocacy workshops in conjunction with National Federation of Women living with HIV/AIDS (NFWLA) at following dates and places:

Eastern Region- Morang district on 17th February 2010

Central Region-Chitwan district on 17th March 2010

Western Region- Pokhara on 13th April 2010 and

Far-western Region- Nepalgunj on 5th May 2010



Regional level Advocacy Workshop-Morang

All 4 advocacy workshops were organized successfully to achieve its objectives. Various stakeholders participated actively in the workshops to make it happen which were representatives from UNODC Mr. Oliver Lernet, Ms. Binija Goperma, members of government bodies and networks such as CDO, DACC, NAP+N, Recovering Nepal, NANGAN, service providers, media representatives with female injecting drug users & female living with HIV/AIDS.

Development of IEC materials

The information on female injecting drug users (FIDU) and female living with HIV & AIDS (FLWHA) is limited. There are very few studies or surveys carried out on FIDUs and FLWHA so far. Thus, as one of the major objectives of the project to collect, review, develop and disseminate IEC materials on FIDU, SS in coordination with UNODC, NCASC, HACB, networks of people who use drugs, people living with HIV & AIDS, female sex workers and with the consultative support from Recovering Nepal SS have develop simple and well-designed print materials on FIDU & FLWHA with the objective to reinforce the main points the project want to make including the actions leaders can take. Leaders need easy and accessible information therefore effective materials have been developed with the key points in bullet form with easily understood graphics. Main key points include:

- Female injecting drug users in Nepal
- Why FIDUs are more vulnerable to HIV
- High risk sexual and injecting behaviors

- HIV and AIDS epidemic in Nepal
- Drug use in Nepal (Social, economical and demographic information of drug users)
- Women vulnerable to HIV such as; female drug injectors, female prisoners, sex workers and pregnant women
- Injecting drug use and HIV (Global, regional and national scenario)
- Female living with HIV & AIDS (Treatment, care and support/ Women empowerment)

Radio Program

Media have a large role in shaping public opinions and mass awareness. Thus as a part of the media advocacy strategy of the project SS in partnership with Jasket Media have produce a 32-episode of radio drama called “Bhumari” based on the story of female injecting drug user and PSAs related to FIDU, Female living with HIV & AIDS and Female Prisoners.

This strategy is intended to be used to create effective in broadening political and social leadership support in issues affecting female injecting drug users, female living with HIV and female in prison settings.

Projects & Partnership 2009/2010

3. Partnership with VSO-Nepal

General Information

Partnership Agreement: Short-term partnership (1st April 2010-31st January 2011)

VSO Support:

- Volunteer placement for Management Development.
- Small Grant Support and
- Other Capacity Building & Technical supports.

Partnership Summary:

S.S consider that it lacks many technical, strategic and professional skills in its members, secretariat and within its organizational structure to effectively implement and evaluate projects, measure its impacts and develop clear strategic directions for the organization to achieve its objectives & goal and so on.

Thus, SS requested a partnership and volunteer support from VSO-Nepal an international development organization that works through volunteers for management development support

for an organization, capacity building of human resources and other technical supports. Since 1st April 2010, SS and VSO-Nepal officially signed the partnership agreement for 1 year.

Specific activities under partnership

Strategic Planning workshop

Strategic Planning was the first priority needs of SS based on the SWOT analysis done by VSO volunteer with board, management and staff of SS. With the financial support from VSO, SS conducted the 3-days “Strategic Planning workshop” on 28th, 29th & 30th of June 2010 at The Oasis Café. There were 18 participants including general members, executive board members, senior management and mid-level staffs of SS along with the VSO Volunteers as facilitators.



The outputs of the S.P workshop are as follows:

- Organization had a revised policy, strategy and structure understandable and owned by its members and staffs.
- Draft Strategic Plan of the organization has been developed.
- Furthermore, it provided a clear strategic direction for organization to achieve its vision, missions and goal.

6. Coordination & Linkages

S.N	To Whom	For What
1.	a. NCASC, HSCB b. Central Laboratory-Teku, Intrepid Nepal-Tripureswor	a. HIV & AIDS national data and information, O.I medicines, National level coordination, reference etc b. CD4 count, Viral Load & other pathological tests
2	DACC Kathmandu	District level coordination and collaboration on HIV & AIDS issues
3	Drug Control Program (MoHA)	Policy and program level coordination on the issues of Drugs, IEC materials
4	Networks & Associations (National Association of People living with HIV/AIDS, Recovering Nepal etc.)	Networking, coordination and partnership in advocacy, awareness, lobbying & campaigns on the issues of Drugs and HIV & AIDS
5	Local wards, Police stations, Youth Clubs	Community level coordination, awareness, create enabling environment for harm reduction program
6	Richmond Fellowship, Youth Vision, Aavash Samuha, Recovering Group, Prarambha, Aarambha, Re-Unity Drug Treatment etc	Residential Drug Treatment services & Post Rehabilitation Care (PRC)
7	a. SAARATHI Nepal, AAVASH Samuha & b. Youth Vision M2M	a. Methadone Maintenance Therapy b. Buprenorphine Substitution Therapy
8	RECHPEC, SACTS, YV VCT, Sparsha Nepal	HIV and STI Blood test
9	Punrbal Plus, Friends of Needy Children, Keta-Keti Ashram & SHARAN Home	Education, care and support services for children infected and affected by HIV/AIDS
10	Sukraraj Tropical Infectious Hospital-Teku, Tribhuvan University of Teaching Hospital (TUTH) Bir hospital	Hospital-based treatment, ART, O.I and other health services
11	AIDS Health Care Foundation (AHF)-Teku	Major treatment support, cost sharing (for PLHAs)
12	Jasket Media	Media programs
13	Bajra Barahi Health Clinic	Acupuncture Treatment Service for IDUs & PLHAs

7. Monitoring and Evaluation System

It is essential that a Monitoring and Evaluation system is put in place to measure and track all the performances of the organization. SS therefore holds a mirror to itself in assessing the progress of its each and every program. The organization analyzes periodically to what extent the intended outcomes have been achieved. Monthly and quarterly reports are generated for monitoring purposes. It is further envisaged that those reports along with yearly reports generated will go along in ensuring that activities are carried out as planned. Monitoring and evaluation will assist in verifying the achievements of outcomes and as a way of learning and improving organizational interventions. This will involve engaging in monitoring outputs and analyzing whether they contributed the outcomes, planned or emerging.

SS also intends to use participatory monitoring and evaluation of projects' impact, involving our primary beneficiaries of our intervention –PWUDs, PLHAs and other vulnerable populations. Information obtained is used to improve our interventions focused towards our target groups.

8. Partners & Funding Agencies

I. Recovering Nepal (National Network of Drug Service Organizations)

II. National Association of People Living with HIV & AIDS-Nepal (NAP+N)

III. Save the Children-Nepal/Global Fund round-7 HIV & AIDS program

IV. United Nations Office on Drugs & Crime (UNODC)

V. Voluntary Service Overseas (VSO-Nepal)

VI. Jasket Media House

VII. Bajra Barahi Health Clinic

9. Organizational Structure

