

SS Annual Progress Report 2010/2011

SATHI SAMUHA

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1. LIST OF ACRONYMS AND ABBREVIATIONS

ART– Anti-retroviral Therapy

BCC- Behavior change communication

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

HR- Harm Reduction

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.

UNODC – United Nations Office on Drugs and Crime

UNDP- United Nations Development Programme

VCT –Voluntary Counseling and Testing

VSON – Voluntary Service Overseas-Nepal

2. General Information

Name of the Organization

SATHI SAMUHA (Friends Group)

Projects & Partnership of the Fiscal Year 2010/2011

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-Phase II Year I (*Save the Children*)
2. HIV Prevention, Care and Treatment for Female Drug Users in Kathmandu (*UNODC*)
3. VSO Partnership (*VSO-Nepal*)

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Designation

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Type of Report (Quarter/Final/Annual Progress)

Annual Progress report

Report Period

16th July 2010- 15th July 2011

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 is 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, mission statement and objectives of the organization were revised during the Strategic Planning meeting to encompass the new wider community which is also the target of SS.

Our vision is: ***'To contribute to a society where PLWHAs and those who use drugs have equal rights and access to quality health care and are able to live in a environment free from stigma & discrimination'.***

Mission

'We are a Non-Governmental Organization which exists to ensure that all PLWHAs & PWUDs have access to health care and live a dignified life. We do this through prevention, referral for treatment, care & support; harm reduction, awareness and advocacy'.

4. Projects & Partnership 2010/2011

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

General Information & Summarized Project Outcomes

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

Project Duration: 16th November 2010- 15th November 2011 (Phase II Year I)

District & Project Area: Kathmandu district

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

Cumulative Target-IDU: **1660 IDUs** (1st February 2009-15th November 2011)

Cumulative Achievements-IDU: **1580 IDUs** (1st February 2009- 15th July 2011)

Annual Target-IDU: 400 (16th November 2010-15th November 2011)

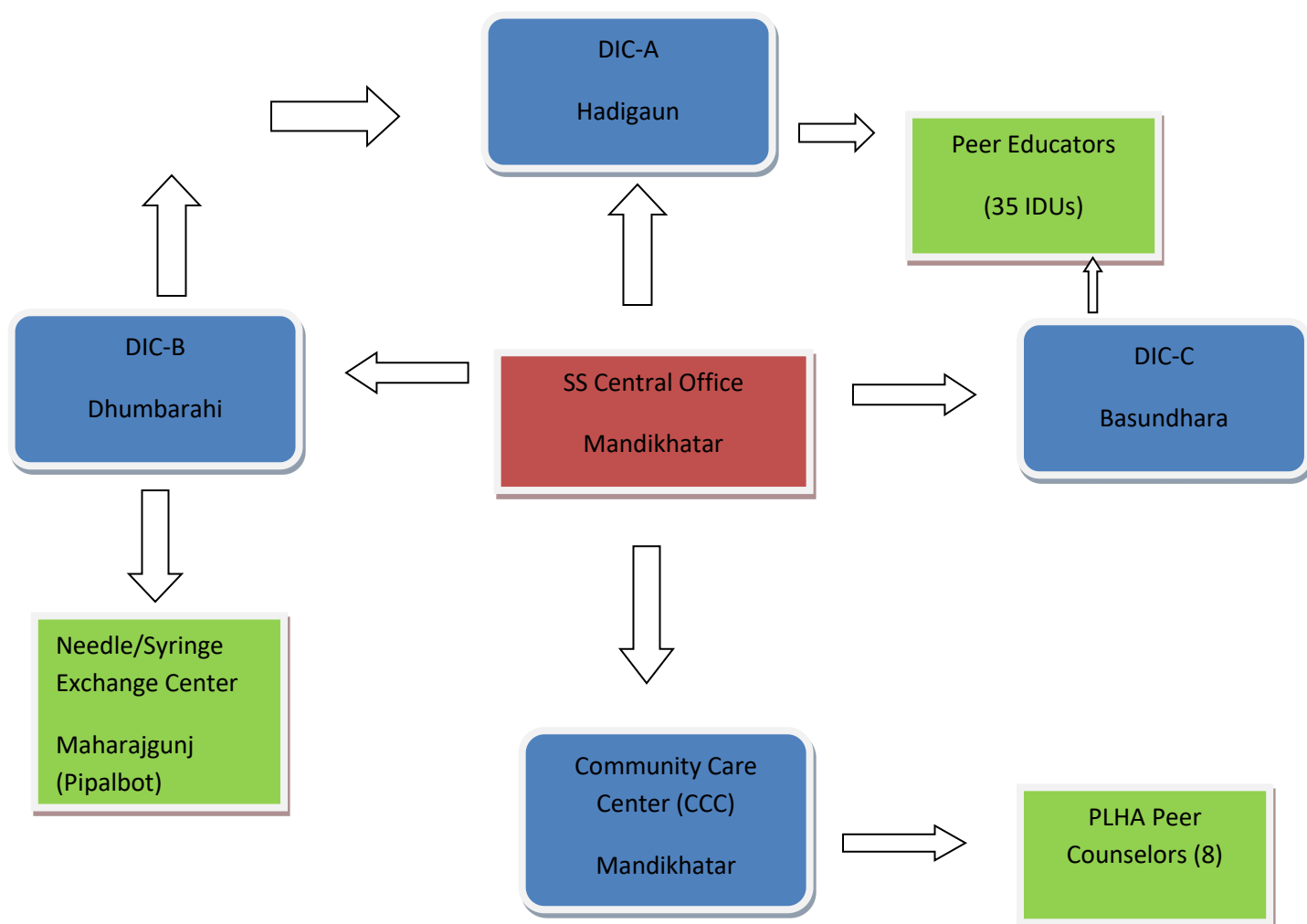
Annual Achievement-IDU: 295 (16th November 2010-15th July 2011)

Cumulative Achievements-CCC Client Enrollment: **205** PLHAs (1st Feb.2009-15th July 2011)

Total PLWHA started ARV Treatment (CCC): 96

Organ-o-gram

Save the Children/GF Round-7 Project



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 a third year, SS is continuing the same project from 16th November 2010-15th November 2011 in focus to reduce HIV prevalence among IDUs and to provide treatment, care and support service for PLHAs. SS is operating through its 5 service centers i.e. 3 drop-in-centers for IDUs in different location of

Maharajgunj belt, 1 NSEP Exchange Center which was added this year 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 has 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



Planned-group-discussion with IDU at DIC

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 & FGD/PGD etc
- Day-care facility
- Referral service (VCT*/STI*/OST/Rehabilitation treatment, HIV related services etc)

Exchange Center:

In order to expand HR service coverage and retain identified clients in the NSEP program SS have established 1 NSEP Exchange Center under Global Fund Phase II Year I program. The main purpose of this Exchange Center is to provide needle/syringe exchange service with other harm reduction services to IDUs more accessibly. It also compliments the services of DIC where there is a need. The center is located at Pipalbot-Maharajgunj.

Outreach Program: Regular outreach service with targeted HIV intervention including NSEP, BCC education, condom distribution, and IEC material distribution etc for IDU is an evidence-based scientifically proven intervention for reducing HIV and other blood borne infections among IDUs all over the world. SS is conducting outreach program for IDUs across its project area since the beginning of the project.

5 outreach workers and 2 community outreach workers through 3 DICs 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 in Nepal. However it still remains a challenge to reach the most marginalized, socially excluded and hidden population; injecting drug user in order to deliver harm reduction services to them where and as they are.** 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.

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 while on treatment. Till the third year of its establishment, CCC of SS has been able to provide various treatment, care and support services to 205 PLHAs across the country and 96 PLHAs has started ARV treatment with the assistance of SS.



CCC Dormitory

The key services provided by CCC are:

- Residential service (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)
- Primary health care service
- Minor treatment support (Pathological tests/CD4 count/Viral load test etc)
- Extensive information & education on HIV, ART, Treatment Preparedness/literacy, OIs, Positive living, Reproductive health etc through regular sessions/class.
- Referral and follow-up service

Clients having informal discussions

Some pictures under GFATM project



Interaction Meeting with Police Personnel

ORWs collecting old syringes from shooting-spots



Marking an International Drugs Day-2011

PE Referesher Training

Projects & Partnership 2010/2011

2. UNODC-FIDU Project

General Information

Project name: HIV Prevention, Care and Treatment for Female Drug Users in Kathmandu.

Project Duration: 15th April 2011-31st December 2011

District & Project Area: Kathmandu district, Massage Centre/Dance Bar/Restaurants and other IDU hotspots

Final Beneficiaries: Female Injecting/Drug Users

FIDU Reached with HR services: 45

FDIU Referred for rehab: 5

FIDU Referred for HIV treatment & Care: 5

Health Camps Organized: 2

Focus Group Discussions conducted: 2

Coordination Meeting with Stakeholders conducted: 1

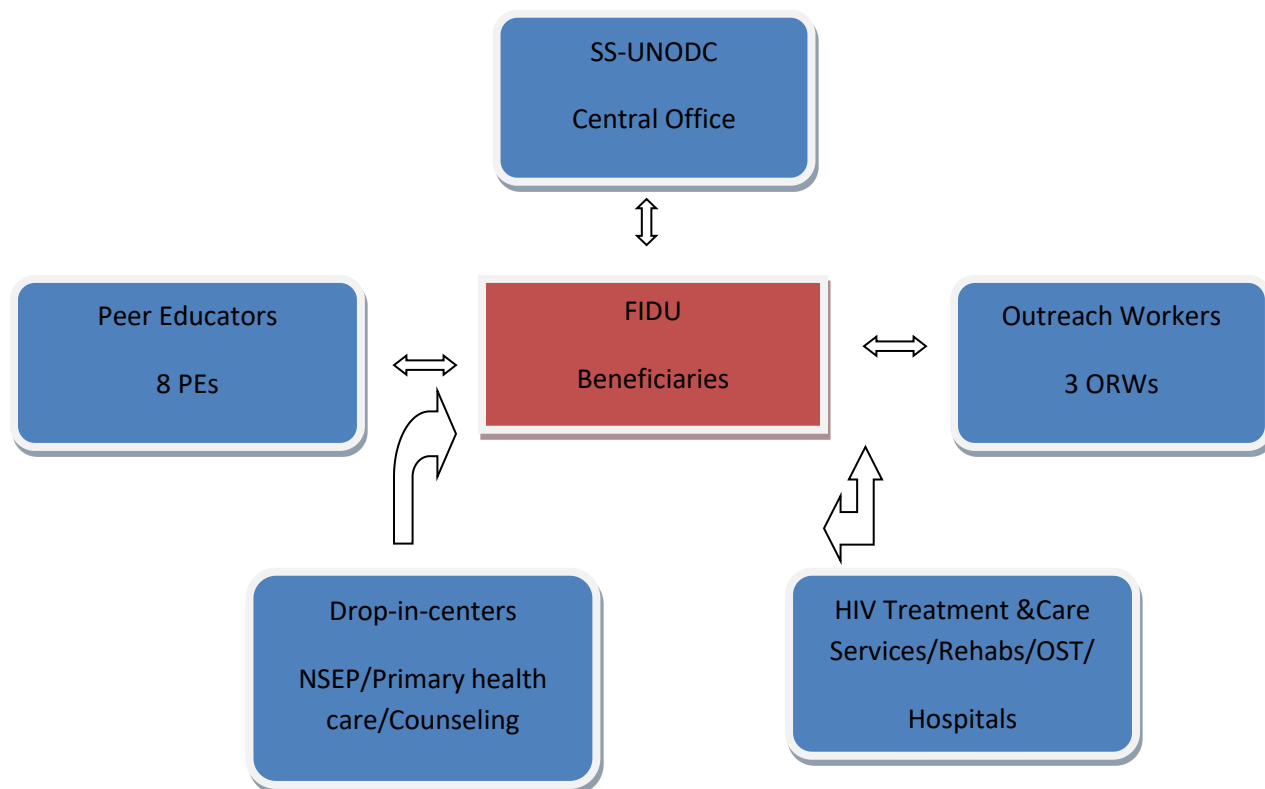
Interaction Meeting with Law enforcement held: 1

Target for VCT referral (HIV testing) – 80 (15th April 2011-31st December 2011)

Achievement for VCT: 30 (15th April 2011-15th July 2011)

Organ-o-gram

UNODC-FIDU Project



Project Summary:

Under the long-term-agreement (LTA) with UNODC, SS started the “HIV Prevention, Care and Treatment for Female Drug Users” project in Kathmandu district. The main aim of this project is to reduce HIV transmission among female drug users who works in Message, Dance Bar and Restaurants. The project delivers harm reduction services to FIDUs such as NSEP, Outreach service, condom distribution along with a radio program for media advocacy in partnership with Jasket Media.

Specific activities undertaken:

- ❖ Regular Outreach program with targeted HIV intervention (NSEP, Condom distribution etc)
- ❖ Focal Group Discussion with FIDUs
- ❖ Primary health care services (abscess/wound management)
- ❖ Health Camps
- ❖ Interaction meeting with Law enforcement agencies
- ❖ Coordination meetings with Stakeholders

- ❖ Referral services to VCT/STI centers along with drug treatment, OST, HIV treatment & care services.

Some pictures of the activities undertaken:



Interaction meeting with Law enforcement



FGD with the clients at DIC



Health Camp in coordination with SPARSHA



Coordination Meeting with Stakeholders

Projects & Partnership 2010/2011

3. Partnership with VSO-Nepal

General Information

Partnership Period: Long-term partnership agreement since 1st October 2010 till 31st December 2012

Location: Kathmandu (Central Office)

Technical support: Program Development support through volunteer placement

Volunteer details:

Name: Ms. Gladys Osimbo

Country: Kenya.

Partnership Summary:

S.S consider that it lacks many technical, strategic and professional skills in its members, secretariat and even within its executive members to implement and monitor programs effectively, measure its impacts and develop a clear strategic direction for organization to achieve its objectives & goal. Therefore S.S requested a partnership support from VSO-Nepal to address and deal with the above mentioned issues.

In the 1st year of partnership, S.S received the management development support through volunteer placement and a number of small grant supports for the capacity buildings trainings of its staffs.

In the 2nd year (2011) of partnership, SS proposed a slight change in a support from VSO-Nepal based on the needs of the organization and its past experience. Thus, VSO-Nepal provided a Program Development support to SS through the volunteer placement (Program Development Advisor).

Specific activities undertaken in this year:

- ❖ “Advanced level training on HIV and Harm Reduction”-30th Sep-1st October 2010.
- ❖ Participated in the “Strategic Proposal Development Workshop”-29th -30th September 2010

- ❖ Participated in the 2nd part of “Leadership Course” organized by VSO-Nepal-March 2011
- ❖ Review & finalization of the 3-year Strategic Plan-April 2011
- ❖ Board & Trustee Management and Development Training-4th May 2011
- ❖ Leadership Training-June 2011
- ❖ Staff Orientation- August 2011
- ❖ HIV/AIDS Mainstreaming Training- September 2011
- ❖ Drafted Organizational M&E Plan- Sep.-October 2011
- ❖ Drafted “HIV Workplace Policy”- November-December 2011
- ❖ Revision of organizational policies (Human resource & Finance Policy)-Ongoing

Some pictures of the programs undertaken this year:



HIV & Harm Reduction Training (Capacity Building for staffs)



Staff Orientation Session
VSO-Trekkers Group visit at DIC

5. 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 Treatment)
12	Jasket Media	Media programs

13	Bajra Barahi Health Clinic	Acupuncture Treatment Service for IDUs & PLHAs
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6. 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.

7. National & International Partners, Networks & 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
- IV. United Nations Office on Drugs & Crime (UNODC)
- V. United Nations Development Programme (UNDP)
- VI. Voluntary Service Overseas (VSO-Nepal)
- VII. Jasket Media House
- VIII. Bajra Barahi Health Clinic
- IX. Asian Network of People who use Drugs (ANPUD)
- X. International Network of People who use Drugs (INPUD)
- XI. Global Network of People living with HIV & AIDS (GNP+)

8. Principles of SATHI SAMUHA

