



**NEPAL**

**DHAPP**

DEPARTMENT OF DEFENSE HIV/AIDS  
PREVENTION PROGRAM

REDUCING THE INCIDENCE OF HIV/AIDS  
AMONG UNIFORMED PERSONNEL IN  
SELECTED AFRICAN NATIONS AND BEYOND

## **WINNING BATTLES IN THE WAR AGAINST HIV/AIDS**

### **BACKGROUND**

#### **Country Statistics**

The population of Nepal is estimated to be 28.3 million people, with an average life expectancy of 60.2 years. Nepali is the official language of Nepal, which has an estimated literacy rate of 48.6%, unevenly distributed between men and women. Agriculture is the mainstay of the economy, providing a livelihood for three fourths of the population and accounting for 38% of the gross domestic product (GDP). Industrial activity mainly involves the processing of agricultural produce including jute, sugarcane, tobacco, and grain. Security concerns relating to the Maoist conflict have led to a decrease in tourism, a key source of foreign exchange. The GDP per capita is \$1,400, with 31% of the population living below the poverty line.

#### **HIV/AIDS Statistics**

The HIV prevalence rate in the general population of Nepal is estimated at 0.5%, with approximately 75,000 individuals living with HIV/AIDS. Estimates in most at-risk populations consistently exceed 5 % in one or more high-risk groups, which include female sex workers, intravenous drug users, men who have sex with men, mobile populations, and young people.

#### **Military Statistics**

The Royal Nepalese Army (RNA) is estimated at approximately 100,000 members. In the past two decades, the RNA has contributed more than 45,000 peacekeepers to 28 United Nations-sponsored peacekeeping operations. Nepali expends 1.5% of its GDP for military purposes. While no seroprevalence data are available for the RNA as a whole (forcewide testing has not been implemented), pre- and post-tests among RNA personnel on UN peacekeeping missions indicate a rate of 0.11%.

### **PROGRAM RESPONSE**

#### **In-Country Ongoing Assistance**

International efforts in Nepal to address the issues of HIV/AIDS in the RNA have been implemented by Family Health International (FHI) and the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) since 2002. To date, FHI has provided technical assistance (but no financial assistance) to the RNA, and GFATM funds have been sporadic and short term. As a result of the limited resources, progress in the RNA to establish a robust HIV/AIDS program has been slow. As of September 2006, through GFATM funds, an RNA task force and an office for the task force had been established at Birendra Military Hospital. At this site GFATM funds have also been used to renovate the structure of a counseling and testing

(CT) center, which the US Pacific Command (USPACOM) and implementing agent the Center of Excellence (COE) will outfit and refurbish in 2007, providing such items as rapid test kits, furniture, and consumables. Other funds from GFATM have been used toward mass peer education workshops, which aside from the standing CT center; have been the extent of program results in Nepal.

### Proposed Future Activities

DHAPP received two proposals of behalf of the RNA for fiscal year 2007 activities. The first, from USPACOM/COE, emphasized the following objectives: to prevent the transmission of HIV within the Nepalese military sector; to prevent the RNA from being a vector that spreads HIV to the Nepali civilian population; to enhance the skills and capacity of the RNA in advocacy, prevention, treatment, care, and research for sustained HIV/AIDS prevention activities; and to promote and enhance working RNA partnerships with civilian agencies, donors, and community groups in HIV/AIDS prevention.

The second proposal, from FHI, stressed the following objectives, with a targeted audience of active-duty military personnel and their spouses: reduce risk behaviors of military personnel and their spouses through strategies; establish comprehensive prevention-to-care services in 5 divisional army hospitals and develop referral linkages to other quality services; strengthen capacity for sexually transmitted infection, CT, care, and laboratory service delivery; and strengthen systems and build capacity of the RNA to design, implement, and manage strategic information and quality assurance of the HIV/AIDS program.

Both proposals were reviewed by a scientific panel and will be submitted to the DHAPP Board of Directors.

### OUTCOMES & IMPACT

DHAPP has continued its collaborative interaction with USPACOM and COE, as well as FHI, as implementing partners for future activities in the RNA. Due to instability in the area, no programmatic activities have taken place in the RNA during the current fiscal year. DHAPP looks forward to future collaboration with Nepal.

