

# THE LINK - NEPAL

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Special Issue on Programming  
for Transgender People

## Programming for Transgender People in LINKAGES and the Global Context

Globally, transgender people have limited access to health and HIV services due to a wide range of issues including gender-based violence (GBV), policy and legal barriers, and stigma and discrimination (S&D). Transgender people, especially transgender women, are **13 times** more likely to be living with HIV than adults in the general population. To tackle these issues, some efforts are currently in place to recognize the needs of transgender people. Recently, the [International Statistical Classification of Diseases \(ICD-11\)](#) released by the World Health Organization (WHO) recognized transgender health issues and included a new category of “gender incongruence,” thus declaring that being transgender is not a mental disorder.

[Linkages across the Continuum of HIV Services for Key Populations Affected by HIV \(LINKAGES\)](#) envisions a world in which every member of a key population (KP)—men who have sex with men (MSM), sex workers (male, female, and transgender people), people who inject drugs (PWID), and transgender people—can exercise their right to live healthy and productive lives. In this vision, a hostile and unsupportive sociocultural and legal environment for KPs remains a persistent challenge in providing HIV services, causing inequality, stigma, discrimination, and violence. Therefore, LINKAGES project recognizes the importance and priority of programming for KPs, through which actions are made both globally and within each country where it is underway. LINKAGES has developed several guiding tools and strategies that highlight, recommend, and prioritize diversified programmatic needs for KPs, to

address and mitigate hostile environments and harmful gender norms and inequalities that heighten the risk of their exposure to HIV and their access to prevention, care, and treatment services.

Gender integration in HIV programming for KPs is crucial for the LINKAGES project, especially in understanding how gender norms and inequalities affect them, particularly MSM and transgender people, who are often conflated with each other and are rarely the focus of gender-integrated programming. The [Key Population Program Implementation Guide](#), developed by LINKAGES, highlights the index of program areas and elements for MSM and transgender people, and the [gender strategy](#) provides guidance on and priorities and tools for gender integration, including targeted programming for transgender people. On the other hand the [Gender Analysis Toolkit for Key Population HIV Prevention, Care, and Treatment Programs](#) outlines considerations and steps for conducting a gender analysis that will increase the effectiveness of HIV services by identifying ways to work around or transform gender-related barriers and leverage gender-related opportunities. In addition, LINKAGES has developed the [Safety and Security Toolkit: Strengthening the Implementation of HIV Programs for and with Key Populations](#) that helps program implementers, particularly community-based organizations (CBOs) and others working in direct service delivery, to more effectively address safety and security challenges, particularly in hostile sociocultural, political, and legal environments.

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**LINKAGES**  
Across the Continuum of HIV  
Services for Key Populations

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# Programming, Approaches, and Interventions for and among Transgender People in LINKAGES Nepal

Transgender people are one of the KP groups in Nepal, as guided by the National HIV Strategic Plan 2016–2021. MSM and Transgender people account for 9 percent of total estimated HIV infections in the country. While national HIV prevalence among the adult population (15–49 years) in Nepal stands at 0.15 percent, HIV prevalence among transgender people is 8.5 percent in Kathmandu Valley (2017), 4.9 percent in Pokhara (2017), and 11.5 percent in Terai highway districts (2018).

## BOX 1

### LEGAL AND POLICY ENVIRONMENT FOR TRANSGENDER PEOPLE IN NEPAL

Transgender people are legally recognized as third gender in Nepal. The Supreme Court of Nepal verdict of 2007 recognized third gender identity of transgender people, making Nepal a progressive country in the global south for acknowledging the rights of transgender people. Since then, several milestones have been achieved ensuring the rights and inclusion of transgender people such as having a third gender category in the citizenship document, issuing passports with third gender identity, and initial inclusion of transgender people in the national census 2011.

The major milestones came with inclusion of transgender people and other sexual and gender minorities in the Constitution of Nepal 2015 that embraces provision of having a right to choose one's preferred gender identity under Article 12, right to equality under Article 18, and right to participate in state mechanisms and public services under Article 42. With this provision, Nepal joins few countries such as South Africa and Ecuador in having the rights of sexual and gender minorities enshrined in the constitution.

LINKAGES Nepal provides the continuum of HIV prevention, care, and treatment services (CoPCT) to transgender people to identify, reach, and test them early; to enroll those living with HIV in treatment as early as possible; and follow up with them in the community to provide support for adherence and retention. LINKAGES Nepal mobilizes transgender women as outreach staff to provide tailored messages on HIV and sexually transmitted infection (STI) prevention and the importance of HIV testing, promote and distribute free condoms and lubricants, and refer individuals for HIV and STI testing services using both online and off-line strategies and approaches.

LINKAGES Nepal has a team dedicated to transgender people but co-located at the service sites for other KPs to provide transgender-competent HIV testing, counseling, care, and support services. All clinical and nonclinical staff at the LINKAGES Nepal's clinics are well-trained on gender integration to address harmful gender norms and provide transgender-friendly and gender-affirming services. In addition, LINKAGES Nepal supports its implementing partners (IPs) in addressing S&D, violence, and other structural and programmatic barriers to create an enabling environment for transgender people in the project districts.

"It is always confusing when we talk about gender, we hardly realize how gender norms and biases harm our KPs and how it affects their access to services. I am glad that I attended session on providing gender friendly services. . Gender integration should be a compulsory component with detailed approaches and referral mechanism in all HIV programs working with key populations, especially FSWs and transgender people."

-Clinical staff member,  
LINKAGES Nepal-supported clinic in Chitwan district

LINKAGES Nepal also partners with the Federation of Sexual and Gender Minorities Nepal (FSGMN)—a national network of lesbian, gay, bisexual, transgender, and intersex (LGBTI) people—to provide national and community-level support for program implementation, policy advocacy, capacity building, and network strengthening.

"LINKAGES Nepal-supported community-based supporters have helped me to disclose my status and share my issues confidently."

-A transgender person;  
beneficiary of Sudur Paschim Samaj, Kailali district

LINKAGES Nepal promotes gender-integrated HIV programming for all KPs, including transgender people who are marginalized because of their gender identity, tailors programs to meet the unique gender-related needs of KPs, and addresses all forms of discrimination and violence including GBV against KPs. LINKAGES Nepal adopts global guidelines and tools to make the services and approaches KP friendly and inclusive.

LINKAGES Nepal uses U.S. President's Emergency Plan for AIDS Relief (PEPFAR)-recommended two-step questions to ask about gender identity and sex assigned at birth with every beneficiary to create a space in which transgender people feel welcomed as program beneficiaries. Most of the outreach workers, peer navigators, project coordinators, and other staff members, such as management information system (MIS) officers serving transgender people, are self-identified transgender people in LINKAGES Nepal project districts. Moreover, all the IPs providing services to transgender people are trans led and KP focused, with more than 10 years of experience working with the transgender people community in the districts.

Every fiscal year LINKAGES Nepal conducts a rapid community assessment (RCA) in all project districts for size estimation and mapping of transgender people (both sex workers and non-sex workers) with physical hot spot areas in the districts. Results show that many transgender people travel to India and other Nepali cities for labor work, sex work, and dance during festivals, weddings, and other family celebrations. Therefore, LINKAGES Nepal has developed an annual seasonal calendar to track and provide timely services to highly mobile transgender people. In addition, regular planned group discussions and creative events are conducted to engage and understand the changing needs of and suggestions from transgender people. A service quality monitoring system via short message

service (SMS<sup>2</sup>) was recently initiated to assess the quality of clinical services from beneficiaries' and service providers' perspectives.

LINKAGES Nepal has designed and developed transgender people-inclusive social and behavior change communication (SBCC) strategy and materials, and oriented the clinical team on trans-competent services to make beneficiaries feel more welcome and comfortable.

## BOX 2

### NATIONAL CONTRIBUTION BY LINKAGES NEPAL

Out of 21 districts with HIV prevention, care, and treatment services among transgender people in the country, LINKAGES Nepal is working in five (Banke, Chitawan, Kailali, Kaski, and Lalitpur). These five districts have an estimated 5,761 transgender people (29 percent of the total estimated for the country).

In 2017, LINKAGES Nepal reached 17,165 MSM, male sex worker (MSWs), and transgender people through its prevention program, contributing 23 percent to the national data on prevention reach. Similarly, LINKAGES Nepal tested 9,093 MSM, MSWs, and transgender people, which is 24 percent of the national data on HIV testing.

Gender-related harmful social norms, stigma and taboo associated with HIV, same-sex behavior, and nonconforming gender identity still hinder transgender people's access to services. Therefore, LINKAGES Nepal supports and collaborates with FSGMN to create enabling environments for transgender people. FSGMN conducted a national consultation meeting with MSM, MSWs, and transgender people, and MSM, MSWs, and transgender people living with HIV from across the country to consolidate issues on HIV prevention, testing, treatment, adherence and retention, and overarching barriers related to human rights, GBV, psychosocial support, and to leverage livelihood services.

"This consultation meeting has been fruitful in gathering community representatives from across Nepal to discuss issues related to MSM, MSWs, and transgender people. It was a great opportunity where community people from all states gathered and listed all the pertinent issues related to HIV programming and crosscutting areas. Now we all can advocate for these issues in our respective areas to make HIV services friendly and competent for MSM, MSWs, and transgender people."

-Manisha Dhakal, President, FSGMN

In addition, to reduce social- and self-stigma, gender-based stigma, discrimination, and violence surrounding trans-identity, and to increase social awareness, LINKAGES Nepal supported its partners to conduct S&D reduction training in the community and health care setting, and to create an enabling environment by commemorating special days and events such as [International Day Against Homophobia and Transphobia \(IDAHOT\)](#), [LGBTI Pride month](#) in June, Gai Jatra festival, Mr. Gay handsome and Ms. Pink events, 16 Days of Activism Against Gender-Based Violence,

[International Transgender Day of Visibility](#), [Transgender Day of Remembrance](#), and [Zero Discrimination Day](#).

LINKAGES Nepal provides capacity-building support through regular on-site coaching, supportive supervision, trainings, and south-to-south mentoring. In addition, IPs were supported to assess, plan, and strengthen their programmatic performance, technical competencies, and organizational system through the organizational performance index (OPI) tool.

## BOX 3

### NEW INITIATIVES

In line with the National HIV Strategic Plan (2016–2021), LINKAGES Nepal initiated an HIV self-testing (HIVST) pilot study among MSM, MSWs, and transgender people in Lalitpur district in June 2018. Additionally, LINKAGES Nepal is planning to initiate piloting of pre-exposure prophylaxis (PrEP) among MSM, MSWs, transgender people, and FSWs in Lalitpur district. Both studies, taking place in Nepal for the first time, will provide evidence to government and stakeholders on the acceptability and feasibility of these initiatives among KPs in Nepal.

**Use of information and communications technology (ICT):** Based on the ICT assessment findings, LINKAGES Nepal developed an ICT strategy and operational plan. The program uses online platforms such as social media (Facebook), mobile phone apps (Messenger, Viber, Imo), and dating applications (Grindr, Planet Romeo) to disseminate messages on HIV prevention and to promote HIV testing among transgender people and other KPs, and to sensitize the general population on diverse sexual orientation and gender identity. LINKAGES Nepal is expanding the use of online platforms for HIV risk assessment and appointment booking for HIV testing services.

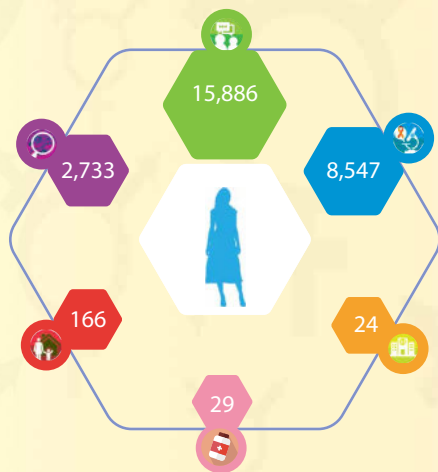
LINKAGES Nepal works with the Government of Nepal and other stakeholders to ensure HIV interventions, strategic plans, training manuals and materials, and approaches are transgender people inclusive and competent. Additionally, LINKAGES Nepal has a robust recording, reporting, and monitoring system and tools to capture separate program information and data on MSM, MSWs, and transgender people to create trans-specific evidence and inform government and stakeholders.



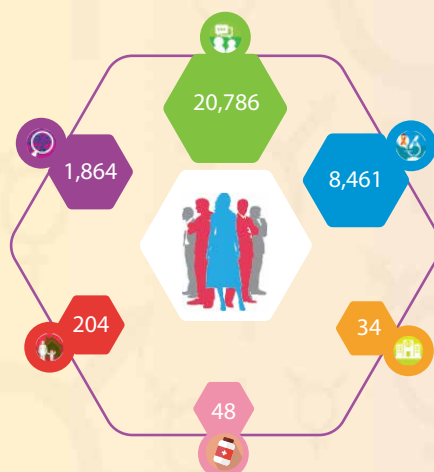
# LINKAGES Nepal Project Achievements (April–June 2018)



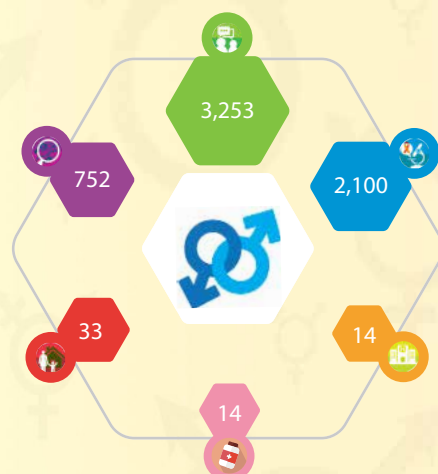
Across the Continuum of HIV Services for Key Populations



FSWs



Clients of FSWs



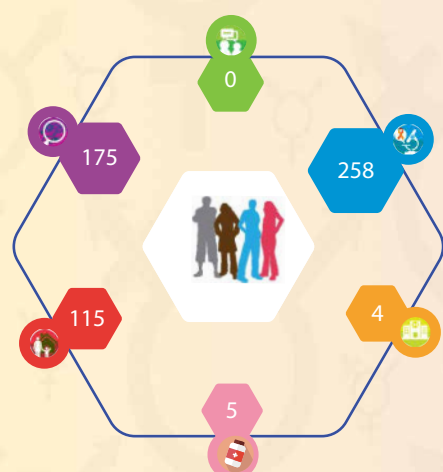
MSM



MSWs



Transgender People



Others

## TOTAL



## Condoms Distributed



Total: 1.07 Million



Male  
467,163



Female  
565,024



Transgender People  
35,667

## Lubricants Distributed



Total: 123,944



Male  
96,102



Female  
0



Transgender People  
27,842



# LINKAGES Nepal's Achievements in Transgender Programming

(October 2016–June 2018)



Across the Continuum of HIV Services for Key Populations

## Transgender People Participation

29%

N = 75

District Level Staff Oriented to Provide MSM, MSWs, and Transgender-Competent and Friendly Services

4%

N = 4,423

Stigma and Discrimination Reduction Training

25%

N = 24

Transgender People who are Board Members for LINKAGES Nepal IPs

## Staff Members of Implementing Partner Agencies who are Transgender People

Management Staff

25%

N = 20

Program Staff

16%

N = 44

Outreach/Drop-in Center Staff

16%

N = 142

15%

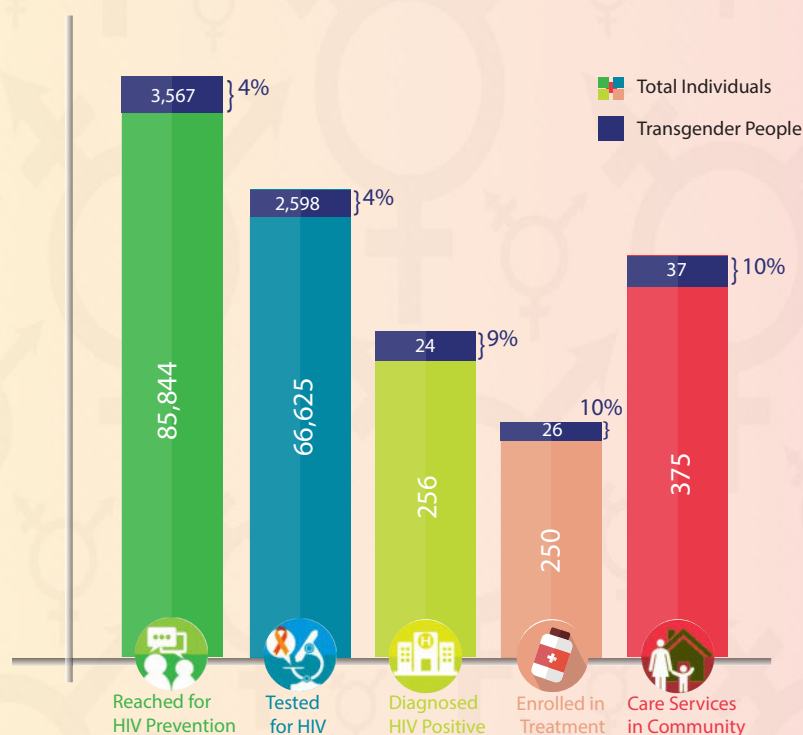
N = 19,275

In Rapid Community Assessment Size Estimation of MSM, MSWs, and Transgender People in Five LINKAGES Nepal Project Districts

12%

N = 660

Participated in Various Capacity-Building Activities



# Rising Recognition of Transgender People in Nepal

## Interview with Staff Member

Prerana Magar (preferred name), 29, works as an MIS officer at Parichaya Samaj, Lalitpur district, for LINKAGES Nepal project. Self-identified as a transgender woman and a finalist of Miss Pink 2010, Magar has been working with transgender people for more than 10 years.



### 1. How is the current situation of LGBTI people, especially transgender people, different from 10 years ago?

Transgender people are legally recognized and can now have a citizenship card and passport with their preferred gender identity. Even in the education sector, some of my transgender people friends have been successfully enrolled in university-level education. Things have changed a lot in the last several years. Trans people have started coming out at an early age. Some of our trans friends are married as well. This is a huge leap forward for trans people. However, trans people are still looked down upon. The societal perception hasn't changed much. They are always scared of the abuse and bullying they might face if they open up. In addition, lately, we have seen a rise in suicide cases among LGBTI people. Last month, I know about a trans woman and gay man committing suicide—the reason being relationship issues.

### 2. What are the key challenges in providing HIV services (reach, test, and treatment enrollment) to transgender people in Nepal?

The stigma of HIV surrounds the trans population. Even with our outreach staff, it takes time for trans people to trust them. They fear HIV testing because they're scared the result might come back positive. Besides this, the possibility of being recognized and outed as a trans person is another reason for them to stay closeted and not use HIV services. With HIV-positive trans people, the main issue is they are highly mobile and often forget to carry/take medicines on time. Sometimes they fear the side effect of the medicine, especially because of the myths that it will make them age rapidly, and it will alter the effect of gender-affirming hormones they take.

*"The 'you help, I help' attitude between the outreach staff and trans friends has made it easier to carry out HIV intervention and awareness programs, ultimately pushing our effort to reach 90-90-90 goal."*

### 3. What do you think are the biggest gaps in HIV intervention for transgender people in Nepal?

The HIV program is mostly focused on reach, test, and treatment enrollment. It does not have enough scope and priority for social-network-building events and activities for transgender people. Events like street drama, cultural shows, basic HIV orientation/risk sensitization and stigma and discrimination reduction sessions, together with mass media and awareness programs are important to reach out to new and young trans people in urban and rural areas. Such programs reduce self-stigma and improve self-respect and acceptance among trans people. In addition, skill-building training such as beautician, driving, cafeteria, bakery, chef, etc. can provide various income-generating opportunities for trans people.

### 4. How can we address such challenges and gaps to improve HIV service coverage among transgender people? What are the good practices in HIV response among transgender people in Nepal?

Apart from the activities I've already mentioned, events such as Miss Pink, Gai Jatra, Teej, and other festival celebrations provide opportunities for more visibility of trans people. Such events make it easier for them to open up to family members and educate them about HIV and being trans. These events also make it easier to meet other trans people and build friendship and trust. In return, this will help us to reach more trans people with HIV programming and help them promote safe sex practices and the importance of timely HIV testing. In addition, new initiatives such as HIVST, which we are currently piloting, seem to be very effective among trans people, as they do not have to open up with other people and visit the clinic. The 'you help, I help' attitude between the outreach staff and trans friends has made it easier to carry out HIV intervention and awareness programs, ultimately pushing our effort to reach 90-90-90 goal.

### 5. Any other ideas or thoughts you would like to share?

We provide trans-specific services under LINKAGES Nepal project. And it gives me immense satisfaction working with our trans community, as this work has brought me closer with them, and made me feel a sense of responsibility toward the community. I will try my best to support our friends and solve any problems that come their way, either personal or professional.

## Interview with Beneficiary

Gopi Sapkota (preferred name), 40, is a transgender woman who has been receiving services from Parichaya Samaj, one of the LINKAGES Nepal implementing partners for HIV prevention, care, and treatment services among MSM, MSWs, and transgender people, for more than five years. She is an occasional make-up artist as well. She is open about her gender identity to other transgender people friends in Kathmandu, but not to her family members, including wife and a son in the village.



### 1. What are the most important issues of transgender people in Nepal? What are the things that society needs to know about transgender people?

There are a lot of things that transgender people like us face every day. Coming out with our gender identity and opening up with close family members and friends is still a huge challenge. Besides, constant staring, bullying, and being called derogatory names and inhumane words such as “chakka” and “hijada” have become a part of our daily life.

Society needs to understand that transgender people are as normal as other Nepali citizens. They should also get the same rights as any other Nepali citizen. People should try to understand from our perspective and should be tolerant to the idea of non-binary gender identity. Just because I have long hair, and I put on makeup does not and should not make me different than anyone else.

### 2. What can we do to reduce stigma, discrimination, and violence against transgender people in Nepal? Who are the important actors?

We must fight our own battles. In this regard, it is essential to increase our self-esteem and self-respect. We must reduce self-stigma by being comfortable with our gender identity, because we have no choice but to accept this fact. The media should give a positive representation of the trans community and help reduce transphobia in society. In addition, government must properly implement and monitor the provisions and policies that acknowledge the rights and inclusion of trans people.

### 3. How can we improve HIV testing and treatment enrollment among transgender people in Nepal?

First, we should address the stigma attached with

HIV and transgender identity to improve uptake of HIV services among trans people. Trans people are always scared of testing due to fear and other myths related to HIV testing and treatment. They are too anxious to disclose their gender identity and sexual behavior. Therefore, it is necessary to improve their self-esteem, teach them about the importance of HIV testing, and the true facts on treatment. Positive portrayal of a trans role model might motivate them to take up services.

### 4. What HIV, sexual health, and other kind of services are necessary for transgender people in Nepal?

Besides HIV services, hospitals must provide easy, convenient, and need-based treatment for all other health conditions and not show any discrimination and pre-judgment while treating trans people. There must be proper counseling services for hormone treatment. Many trans people use hormones of all kinds without proper counseling and prescriptions. Training on proper hormone use within the trans community is very much needed. A closed care and support network of HIV positive trans people is very crucial now, as they are highly stigmatized not only by the society, but within the trans community as well.

*“Trans people are always scared of testing due to fear and other myths related to HIV testing and treatment. They are too anxious to disclose their gender identity and sexual behavior. Therefore, it is necessary to improve their self-esteem, teach them about the importance of HIV testing and the true facts on treatment. Positive portrayal of a trans role model might motivate them to take up services.”*

### 5. What are the good practices in HIV response among transgender people in Nepal?

We get free condoms and lubes, and free HIV testing and STI check-up services from Parichaya Samaj where they always encourage safe sexual behavior. They even call me every now and then to check if I am doing well or need anything. Some of the staff members are trans themselves, so it is easier for me to share everything with them. I do not feel shy or uncomfortable with Parichaya Samaj staff when receiving HIV-related information and services.

### 6. Any other ideas or thoughts you would like to share?

I am happy that Nepal is a much better country to live in as a transgender person, but we still need acceptance and support from family and friends. I am thankful that organizations like Parichaya Samaj and Blue Diamond Society have done a lot for us. I just hope these organizations could provide other services for trans people, such as creating job opportunities, skill-building training, and a family support program.





## Important Activities and Events (April–June 2018)

### Supported Training on Community-Led Testing for HIV in Nepal

LINKAGES Nepal supported Save the Children/Global Fund, National Centre for AIDS and STD Control (NCASC), and National Public Health Laboratory (NPHL) in conducting a training of trainers (ToT) of community-led testing (CLT) by planning and facilitating sessions. Topics included the basics of training and qualities of a good trainer, key components of the national guidelines on CLT in Nepal, and key competencies required during rollout of CLT in the field. Participants also prepared plans for rollout of CLT in their respective states. LINKAGES Nepal staff participants will also roll out CLT training to field staff.

### Initiated Pilot Study of HIV Self-Testing Using OraQuick Test Kit

LINKAGES Nepal, in collaboration with NPHL and NCASC, initiated a pilot study of HIVST using OraQuick test kit in Lalitpur district on June 13 to explore the acceptability and feasibility of HIVST among MSM, MSWs, and transgender people. The self-test is done using oral fluid. LINKAGES Nepal is using supervised and unsupervised self-testing. Study participants may test themselves and interpret results under the supervision of community-based supporters, or they may test in private on their own. A three-day training was conducted in collaboration with NCASC and NPHL to orient and build the capacity of personnel who would be involved.



### Held Training on Stigma and Discrimination Reduction in Health Care Settings

LINKAGES Nepal, in collaboration with NCASC, conducted a training on S&D reduction in health care settings in Kathmandu for ART counselors from 26 ART centers operating in project districts to sensitize them to provide stigma-free and KP-friendly services to PLHIV. The Health4All training manual, developed by LINKAGES, included approaches for KP-friendly services not included in the national training package. Participants found it useful since many HIV-positive clients of ART centers are KP members.

### Conducted Training on Program and Financial Management

LINKAGES Nepal conducted training on program and financial management with project coordinators and administrative and finance officers from 24 IPs. Topics included the framework, process, and life cycle of project management; concept, principles, and process of supportive supervision; role of project coordinators

for management of LINKAGES Nepal prevention, care, and support services; and role of project coordinators in collaboration and crosscutting areas related to LINKAGES Nepal.



### Conducted Virtual Size Estimation and Density Mapping

LINKAGES Nepal conducted size estimation and density mapping of MSM, MSWs, and transgender people in web-based mobile dating applications in Kathmandu valley including Bhaktapur, Kathmandu, and Lalitpur districts. Five major geolocations (Baluwatar, Patan, Swoyambhu, Tinkune, and Thimi) were selected using a “fake GPS” application with a proximity of 2 km radius. A nonsystematic assessment was carried out for a week for three different time slots (8 a.m., 2 p.m., and 7 p.m.) in three popular gay-dating applications: Grindr, Planet Romeo, and Blued. The maximum number of KP members were active on these apps during evenings (7 p.m.) on Friday, Saturday, and Sunday.



#### Key findings:

- ▶ In Grindr, maximum number of KPs ranges from 13 in Thimi (Tuesday, 8 a.m.) to 92 in Baluwatar (Saturday, 7 p.m.).
- ▶ In Planet Romeo, maximum number of KPs ranges from 15 in Thimi (Wednesday, 8 a.m.) to 96 in Baluwatar (Friday, 7 p.m.).
- ▶ In Blued, maximum number of KPs ranges from 11 in Thimi (Tuesday, 7 p.m.) to 68 in Baluwatar (Thursday, 8 a.m.).

The first of its kind in Nepal, this assessment will provide insight and evidence on virtually active MSM, MSWs, and transgender people in Kathmandu valley to NCASC and other stakeholders working on HIV in Nepal. The data will be used to orient IPs on online outreach for MSM, MSWs, and transgender people during peak hours and days.



## Held Meeting with Social Media Influencers

LINKAGES Nepal conducted a meeting with social media influencers in coordination with FSGMN. The objective was to engage and mobilize social media influencers for the project's social media initiatives. Influencers included YouTubers users, radio personnel, media personnel, activists, and artists.



## Completed Pilot of Service Quality Monitoring System via Short Message Service

The SMS<sup>2</sup> is a quality assurance tool designed to monitor facility-based KP individuals regarding S&D and overall client satisfaction with health services on a continuous basis. In total, 132 KP individuals who visited the clinic, 17 with failed referral, and 38 health care workers participated in the pilot held from February to June in Bhaktapur, Kathmandu, and Lalitpur districts.

### Key findings:

#### For KP members who visited:

- ▶ among 102 respondents, 34 percent were satisfied or very satisfied with services
- ▶ about 86 percent (out of 88) said the clinic hours were convenient

#### For KP members with failed referrals:

- ▶ among 14 respondents, 43 percent predicted they will be satisfied or very satisfied with services
- ▶ 25 percent (out of 12) said they expect the clinic will not be open when they want to visit

#### For health workers:

- ▶ among 26 respondents, 77 percent were health staff and 23 percent were non-health staff
- ▶ 92 percent (out of 26) perceived high-or very high-quality services to FSWs

The project will share key findings and impressions from the pilot with stakeholders in the next quarter.



## Commemorated Special Days and Events

IPs, including national networks, commemorated special days and events in their social media outlets to mark Nepali New Year, International AIDS Candlelight Memorial Day, IDAHOT, LGBTI June Pride Month. LINKAGES Nepal IPs and network partners working with MSM, MSWs, and transgender people commemorated IDAHOT with a week of national and district-level events and activities. With the global theme, "Alliance for Solidarity," the goal was to raise awareness on LGBTI rights violations and stimulate interest in LGBTI rights work.

In addition, LINKAGES Nepal and FSGMN were panelists in a virtual interaction—LGBTI Youth and Livelihood Discrimination—organized by the U.S. Embassy Nepal during LGBTI Pride month. The U.S.

Embassy Nepal and USAID Nepal also featured Simran Sherchan, national project coordinator of FSGMN, in social media. LINKAGES Nepal and IPs used social media posts to mark these events. The IPs also posted key messages on HIV, KPs, and PLHIV. A total of 457 posts, primarily on Facebook, garnered 3,661 likes, 72 shares, 97 comments, and reached 25,941 hits/reach.



## Participations and Presentations

LINKAGES Nepal staff participated in the four-day workshop "Treat and Test: PLHIV Network Testing for Accelerated Epidemic Control"

organized by LINKAGES in Bangkok. Participants also prepared action plans for implementation of partner testing in their countries.



LINKAGES Nepal participated and presented a paper in the International SBCC Summit in Nusa Dua, Indonesia.

The paper focused on key findings from SBCC activities conducted by LINKAGES Nepal.



## Visitors Log

Leah Kaplan, director, Democracy, Rights, and Governance Office, USAID Washington, D.C., along with democracy and governance specialist of USAID Nepal and legal and policy advisor, Civil Society: Mutual Accountability Project (CS: MAP) Nepal, visited LINKAGES Nepal IP Western Star Nepal (WSN) office in Banke district. The visiting team discussed human rights, HIV, S&D issues related to LGBTI community with WSN president, WSN project coordinator, and Naulo Srijana Nepal (a lesbian-led organization) board members.

Ann Yang, program analyst, USAID, Washington, D.C., and Ivana Lohar, team leader, Family Planning, HIV and Social Marketing, Health Office, USAID Nepal, visited Kaski district where they were updated on the LINKAGES Nepal project and HIV cascade of the district. LINKAGES Nepal facilitated the visit. The team also observed an outreach session and a static clinic, and interacted with clinical staff members.



The chiefs and HIV focal persons of District Public Health Office (DPHO), representatives from local government bodies including health coordinators, District AIDS Coordination Committee, and antiretroviral therapy (ART) centers in seven districts observed prevention activities and mobile and static clinics run by LINKAGES Nepal IPs in these districts. They observed HIV testing and counseling and STI clinic setup including project specific and government recording and reporting system, and interacted with staff on HIV testing, case management, and STI services.



Board member for Social Welfare Council (SWC) visited LINKAGES Nepal IP in Sunsari district to observe services provided to beneficiaries as part of annual monitoring for work approval. The team suggested, apart from the HIV program, to conduct an awareness program for school children and adolescents in the future.



Lauren Bader, regional program manager, FHI 360, visited LINKAGES IP STD/AIDS Counseling and Training Services (SACTS) to learn about the introduction and scale-up of early infant diagnosis (EID). She conducted in-depth interviews with program and clinic staff members and observed the clinic. She also interacted with NCASC, NPHL and Save the Children/Global Fund team.

### Editorial Team

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