

Date: 19 November 2020

Winnie Byanyima
Executive Director
Joint United Nations Programme on HIV/AIDS (UNAIDS)
Geneva, Switzerland

URGENT CALL FROM NEPAL TO: CONTINUE _____, START _____, STOP _____ for the next UNAIDS strategy beyond 2021

Dear Ms. Byanyima,

We, the community networks in the Asia Pacific, through APCOM, extend our sincere congratulations for your appointment as UNAIDS Executive Director. We trust that your extensive experience and expertise will continue to shape and scale up the response to HIV in Asia and the Pacific region. We also believe that your ongoing efforts will lead to build effective advocacy strategies to end the HIV/AIDS epidemic by 2030.

As per the [UNAIDS 2019 report](#) – in 2018, more than half of all new infections were among key populations – gay men and other men who have sex with men, transgender people, sex workers, prisoners, and their partners.

Key populations make up a small proportion of the general population, but they are at extremely high risk of HIV infection. Available data suggest that the risk of HIV acquisition among gay men and other men who have sex with men was 22 times higher in 2018 than it was among all adult men. Similarly, the risk of acquiring HIV for people who inject drugs was 22 times higher than for people who do not inject drugs, 21 times higher for sex workers than adults aged 15–49 years, and 12 times higher for transgender people than adults aged 15–49 years. These sets of information point to the severity of the problems in addressing HIV and AIDS in different countries. There is an urgent requirement of big investment or significant support in the region to end the HIV epidemic amongst the key populations.

Since there is a growing trend of the HIV/AIDS epidemic amongst the region's key population, there is an urgent and ongoing focus needed to end the HIV/AIDS epidemic by 2030. We strongly urge that communities' voices are heard, and their strategic inputs should be considered to be included in the UNAIDS strategy.

Nepal country context

HIV epidemic situation

[Nepal](#) is a South Asian country with a concentrated HIV epidemic among men who have sex with men (MSM), transgender people, people who inject drugs (PWID), male sex workers (MSW), female sex workers (FSW), and male labor migrants and their spouses. Recent integrated biobehavioral surveillance (IBBS) study in 2017, found an 8.2% HIV prevalence among MSM and transgender women (TGW) in Nepal, compared to the prevalence of 0.17% among the general population. Studies in Nepal combine MSM with TGW, but no study has estimated the prevalence of HIV among TGW alone. Aggregation of TGW with other populations likely under-estimates the effect of HIV on TGW in Nepal.

Legal environment

In terms of the legal environment, the Supreme Court ruling of 2007 is the most prominent political victory to date for the rights of Lesbian, Gay, Bisexual, Transgender, Queer and Intersex (LGBTQI) people in Nepal. In 2007, LGBTQI organizations were successful in a petition against the Government, resulting in a landmark verdict calling on the Government to scrap laws that discriminate based on SOGIE, recognize gender minorities as people legally, and establish a committee to explore the legalization of same-sex marriage. This verdict provided transgender people rights as citizens and has led the Nepal government to develop a policy on name change where citizens may rectify wrong information on their ID as per self-determination. In 2015, Nepal became one of the few countries to address discrimination against LGBTQI people in its constitution. The Ministry of Women, Children, and Senior Citizens (MOWCSC) have carried out several sensitization sessions on the unique issues of LGBTQI people. The Government has carried out consultations with the LGBTQI community to develop a 5-year Human Rights Action Plan. The most recent Reproductive Health Act 2018 calls for non-discrimination based on sexual and gender identity in healthcare services provision.

COVID -19 impact on LGBTQI community

To protect the [Blue Diamond Society](#) (BDS) staff safety and health, BDS has developed a "work from home policy" to guide our staff from COVID-19. Our ground-level work and our campaign activities are interrupted as a result of the COVID-19 crisis. Besides, COVID 19 also significantly affected the life of the LGBTQI community. Many community members are developing mental health issues—fourteen suicide cases during the lockdown period from the LGBTQI community.

We have been educating the LGBTQI community about COVID-19 related symptoms using online social applications (emails, social media, group chats, etc.). We are also coordinating for food supply for our community through the local ward office and some organizations.

Blue Diamond Society mentioned the below points for your consideration and to be included in the next UNAIDS strategy.

Continue:

- Continue providing support to Community Based Organization (CBO) to build capacity across all community-led activities and organizations to better address HIV responses in the country.
- Continue engaging with the MSM and transgender community and CBOs for feedback and suggestions for developing effective advocacy policies for the communities.

- Continue to play a broker between Government and CBOs to increase community network engagement, participation in the decision-making processes, or other country dialogue meetings.
- Continue hiring technical experts from the key population community to provide technical assistance support to CBOs and communities in the country.

Start:

- UNAIDS should start collecting data from countries about COVID-19 impact on LGBTQI communities.
- Start to produce/develop a simplified and focused document (For e.g. law and policy document) so that key community leaders, CBOs managers, and community members can push/advocate for the rights and targets achievement at the country level.
- Disseminate lessons learned from local and regional initiatives.
- Develop or ensure the protection of privacy and confidentiality of data of the communities from the country in particular where the same acts are decriminalized.
- HIV service along with transgender specific health service. Proper distribution of the resources and adequate investment as an investment among MSM and transgender is very low in Nepal.
- Start advocating for allocating emergency funds for the LGBTQI communities in an emergency situation like COVID-19 crisis.

Stop:

- Stop allocating larges funds for international technical assistance. Instead, focus on local/country technical assistance.
- Stop working alone. Involve key population communities at levels of meetings (as required).

Your sincerely,



Midnight Poonkasetwattana
Executive Director
APCOM



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About APCOM

[APCOM](#) is a Regional organization based in Bangkok, Thailand. It represents and works with a network of individuals and community-based organizations across 35 countries in Asia and the Pacific. It primarily focuses to improve the health and rights of gay men, other men who have sex with men, and SOGIESC people across Asia and the Pacific region. It also focuses on improving relevant human and legal rights across the region as discrimination, stigma, criminalization, and exclusion impact on the health outcomes of the communities we serve.

APCOM's current strategic framework revolves around three themes;

1. HIV is not over – Strengthening the HIV response for gay men and other men who have sex with men.
2. Our Rights – Protecting gay men, other men who have sex with men, and SOGIESC people.
3. Our Strength – Stronger interlinked communities and broader partner networks

Since APCOM's establishment, it has been providing technical assistance support and building the capacity of MSM and transgender communities and country partner organizations for effective HIV response at the country level.

With the funding support from several projects, including; [JumpStart](#), [Multi-Country South Asia Global Fund HIV Programme \(MSA\)](#), [Sustainability of HIV Services for Key Population in Asia \(SKPA\)](#), APCOM has been building the capacity of the communities and community networks to improve their rights, health and well-being in the region.

About Blue Diamond Society

[Blue Diamond Society](#) (BDS) is the first and leading community based non-government organization established in 2001. BDS is committed to creating a society in which sexual and gender minorities (SGM) can live with equal rights, freedom, dignity and a full range of opportunities by addressing human rights violation, inequality, stigma and discrimination, lack of access to education, employment and healthcare services including prevention of HIV and AIDS & STI, care and treatment for SGM people, including MSMs, MSWs and TGW.

Blue Diamond Society is working in the areas of human rights, constitution and legal campaign, media, advocacy, capacity building, income generation programs, HIV and AIDS prevention intervention amongst MSMs, MSWs and TGW and their partners. Treatment services including care and support services to those MSMs, MSWs and TGW living with HIV. BDS is a community based organization lead by LGBTQI community including people living with HIV and believes in inclusion as core value.