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In 2012, estimated 2.24 million persons are living with HIV (PLHIV) and approximately 582,000 persons are receiving antiretroviral treatments (ART) in SAARC region. Large-scale expansion of government sponsored ART programs exists in the region since 2004. Successful ART scale – up in resource – limited settings was realized using a public health approach, including the use of standard protocol and treatment options which are simplified and standardized. The treatment of millions of HIV infected patients will certainly be accompanied by the emergence and transmission of HIV drugs resistance (HIVDR), more over the use of ARV drugs for prevention has the potential to increase the prevalence of HIVDR. In high income countries, HIVDR testing of individual patients is used to tailor regimen selection and predict treatment response. However in SAARC region HIVDR testing is neither routinely available nor recommended for individual patient's management. Even with recent technological advancements, it is unlikely that HIVDR testing for patients care will be routinely available for millions of patients in near future.

The World Health Organization (WHO) recommends a minimum-resource strategy for prevention and assessment of HIVDR in resource-limited countries. The WHO’s Global Network HIVResNet provides standardized tools, training, technical assistance, laboratory quality assurance, analysis of results and recommendations for guidelines and public health action. National strategies focus on assessments to guide immediate public health action to improve ART programme effectiveness in minimizing HIVDR and to guide regimen selection. For the proper implementation and monitoring of surveys to assess acquired and transmitted HIVDR and development of an accredited HIVDR genotyping; laboratory network is necessary to be prioritized in this region. Some other issue also need to be addressed; Countries recognize importance and potential use of HIVDR early warning indicators (EWI) data and need to integrate to other routine ART data analyses - including appropriate assessment of adherence. Sustainability of survey implementation in rolling cycle including strengthening laboratory capacity and networking in region is necessary.

HIV Drug Resistance Surveillance and Monitoring in the SAARC Region will be essential to strengthen efforts with high level of commitment at the country level.
Message by
His Excellency the Secretary General of SAARC
on the occasion of World AIDS Day 2013

Message

World AIDS Day is marked on 1st December each year and is an opportunity for people worldwide to demonstrate international solidarity to raise awareness about HIV/AIDS.

The UN Millennium Development Goal to combat HIV/AIDS calls for halting by 2015 and beginning to reverse the spread of HIV/AIDS. HIV epidemic in the SAARC region is a collection of diverse epidemics which are different in countries, provinces and districts. HIV/AIDS continues to be a major public health problem in the region, even though all the eight SAARC Member States are designated as low prevalence countries. In spite of this low prevalence, this region is home to an estimated number of 2.24 million HIV-infected people with 0.15 million AIDS-related reported deaths at the end of 2012.

To this end, National Programmes of the SAARC Member States should work with all stakeholders to ensure maximum coverage with appropriate strategies to fight HIV/AIDS. This demands that Governments employ innovative partnerships with all, including the civil society and private sector. More importantly, National Programmes in collaboration with community-based organizations should ensure that all cases have sufficient access to treatment, care and support in order to prevent spread of the disease.

On a more positive note, all the SAARC Member States have developed their strategic plans for expansion of HIV/TB collaborative activities. In addition, Member States have also increased access to and coverage of life-saving treatment, reduced HIV-infection among the new-born babies by intensifying efforts in preventing parent to child transmission and accelerated efforts to eliminate risk for vulnerable populations.

Establishment of the SAARC TB & HIV/AIDS Centre (STAC) is one of the historic milestones to address all these challenges in South Asia. The Centre supports the efforts of National HIV/AIDS Control Programmes through evidence-based policy guidance, coordination and technical support. Its goal is to minimize the mortality and morbidity due to HIV/AIDS and to minimize the transmission of HIV-infections until HIV/AIDS ceases to be a major public health problem in the SAARC Region.

This year the theme “Getting to Zero – HIV and adolescents” has given a special emphasis on adolescents and young people as they continue to be vulnerable to HIV-infection. In addition, we need to continue our efforts on achieving the goal, “Getting to Zero! - Zero new HIV-infections, Zero discrimination, and Zero AIDS-related deaths.”

In commemorating this Day, I would like to call upon national authorities and international development partners to strengthen HIV/AIDS prevention and control initiatives in the region. On this Day, let us commit ourselves to build on and amplify the encouraging success of recent years to consign HIV/AIDS to the pages of history.

Secretary-General of SAARC
27 November 2013

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Message by
His Excellency the Secretary General of SAARC
on the occasion of SAARC Charter Day

On the auspicious occasion of the Twenty-ninth Charter Day of the South Asian Association for Regional Cooperation (SAARC), I am pleased to issue this message and to extend my warm felicitations to the people and Governments of Afghanistan, Bangladesh, Bhutan, India, the Maldives, Nepal, Pakistan and Sri Lanka.

Launched in December 1985, SAARC is the manifestation of the collective will of our Member States to promote regional cooperation and integration in order to promote the welfare of the peoples of South Asia and to improve their quality of life.

While it is true that SAARC commenced with a few areas of regional cooperation in its initial stage, the ambit of engagement among its members continued to grow by every passing year. SAARC today caters to many diverse areas of regional cooperation pursued through a number of inter-governmental mechanisms and institutions. Indeed, SAARC has served as a common platform to address the common issues facing our region, thereby building mutual trust and confidence among one another. In addition, through its diverse activities over the past twenty-eight years, SAARC has been able to create a distinct South Asian identity.

While the Association has made notable achievements in many areas, there is a growing realization that more needs to be done to strengthen SAARC's institutions to make the SAARC process more efficient, effective and result-oriented to realize the objectives of the Association. To this end, with the mandate from the Member States for the first time, the SAARC Secretariat has undertaken a comprehensive Study to streamline, rationalize, restructure and strengthen all the mechanisms and processes of SAARC, including the Secretariat, Regional Centers and SAARC Specialized Bodies (SSBs). With the implementation of several recommendations contained in the Study, I remain confident that the SAARC process will be revitalized for the common benefit of its membership.

The Seventeenth SAARC Summit was held in Addu City of the Maldives in November 2011. The Summit was devoted to the theme, Building Bridges. Since then, a number of initiatives have been underway to promote intra-regional connectivity. However, the non-convening of the meetings of the Charter Bodies of SAARC, namely, Standing Committee, Council of Ministers and Summit, has created a backlog of important decisions to be taken by the Association. Nevertheless, I am pleased that all the Member States have now confirmed their participation at the Inter-Summit Session of the SAARC Council of Ministers to be held in the Maldives from 17 to 20 February 2014. With the convening of this Session and the Eighteenth SAARC Summit, I remain confident that the SAARC process will be active as before.

As we mark the Twenty-ninth SAARC Charter Day today, let us recommit ourselves to strengthen SAARC in order to deliver tangible benefits to our peoples in the region.
Message by
Director, SAARC TB and HIV/AIDS Centre
on the occasion of World AIDS Day 2013

SAARC Tuberculosis and HIV/AIDS Centre
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WORLD AIDS DAY 2013
MESSAGE

World AIDS Day is a day for the expression of international solidarity with every person affected by HIV. A day on which, we gather to reaffirm our commitment to reaching the HIV and AIDS goals agreed by the global community. HIV/AIDS remains one of the world’s grave health challenges, tragically affecting families and weakening communities and societies. We must not relent in our efforts to achieve zero new HIV infections, zero discrimination and zero AIDS related deaths.

On this World AIDS Day, we can be encouraged that our efforts are producing results. We must build on these to bring the disease under control, by scaling up HIV programmes in SAARC Member States and making the most of powerful new tools to prevent people from becoming infected and from dying from AIDS-related causes. We are making headway.

Still the global HIV epidemic is a formidable challenge to public health, development and human rights. The SAARC Member States have varied epidemiological patterns of human immunodeficiency virus (HIV) infection and acquired immunodeficiency syndrome (AIDS). In spite of different predominant HIV risk behaviors in the region, it has extremely diverse capabilities to develop and support public health prevention and control programmes.

Overall HIV prevalence rate in the SAARC Member States remains low, but there are major public health concerns regarding the future growth potential of HIV epidemic within the region. The overall adult HIV prevalence in SAARC region remains below 1%. However, there are important variations existing between countries. Bangladesh, India, Nepal and Pakistan have reported concentrated epidemics among most at risk populations (MARPs).

SAARC Tuberculosis and HIV/AIDS Centre (STAC) is one of the Regional Centres of SAARC, located in Kathmandu, Nepal. The initial mandate of the centre was to work for prevention and control of TB & HIV/AIDS related TB in the Region. But later on its mandate has been extended to work for prevention & control of HIV/AIDS and TB/HIV co infection in the Region. Thus the Centre was renamed as SAARC TB & HIV/AIDS centre in November 2005. Since then the centre has been working for prevention and control of TB and HIV/AIDS in the Region by coordinating the efforts of the National AIDS Control Programs (NACPs) and National Tuberculosis Control Programs (NTPs) of the Member States.

SAARC Goodwill Ambassador Programmes have been very effective for generating Advocacy & Awareness relating to HIV/AIDS in the Region. Ms. Shabana Azmi, SAARC Goodwill Ambassador during her tenure did tremendous jobs on advocacy & awareness in Nepal & Bhutan.

This year, Ms. Runa Laila, Bangladesh, Shri Ajay Devgan, India, Ms. Sharmeen Obaid-Chinoy Pakistan have been selected as Goodwill Ambassadors for Advocacy & Awareness on HIV/AIDS in SAARC Member States. In this context, Ms Runa Laila, SAARC Goodwill Ambassador for HIV/AIDS made official visit to India from 31st July to 2nd August 2013, with the objective to extend support on the control of HIV/AIDS especially on the issues of Stigma and Discrimination related to People Living with HIV/AIDS (PLHIV).

On this occasion, we want HIV/AIDS-free society, rights and social justice for all, affected & infected by HIV/AIDS.

It is my honest commitment on behalf of STAC that we in close collaboration with SAARC Member States, civil society organizations, media, donors, UN partners, community people and people living with HIV to drive the national response to control HIV/AIDS in South Asia towards achieving our collective goal.

Finally, I would call for a massive social mobilization effort where professionals, social sectors, NGOs, media, community and the individual must work together to make accessible, acceptable and affordable care & support to all those who need it to make the SAARC region free from its curse.

Together, let us join to achieve “Zero new HIV infection, Zero discrimination and zero AIDS related deaths”.

Dr. Kashi Kant Jha
Director

STAC Newsletter Vol. XXIII No. 3
1. Twenty-third Meeting of the Governing Board of STAC

On the invitation of SAARC Secretariat and SAARC Tuberculosis and HIV/AIDS Centre (STAC), the Twenty-third Meeting of the Governing Board of STAC was held on 7th - 8th November, 2013 in Kathmandu, Nepal. The Governing Board Members from the Governments of Bangladesh, Bhutan, Nepal and Pakistan along with representatives of His Excellency, the Secretary General of SAARC and Ministry of Foreign Affairs, Government of Nepal participated in the Meeting.

In accordance with the SAARC practice, the Board Meeting was opened by Chairperson of the Governing Board of STAC. Director, STAC delivered welcome remarks in the opening and Director SAARC Secretariat gave his remarks and highlighted the issues related to strengthening of SAARC Regional Supra Reference Laboratory for TB and HIV/AIDS at STAC.

Dr. Ejaz Quadeer, National TB Manager, Ministry of National Health Services Regulation and Coordination, Government of Pakistan chaired the meeting.

The meeting was attended by Dr. Sydur Rahman, Programme Manager, National AIDS/STD Programme and Safe Blood Transfusion Programme, Government of Bangladesh, Dr. Dorji Wangchuk, Director General, Department of Public Health, Ministry of Health, Royal Government of Bhutan, Dr. Padam Bahadur Chand, Senior Public Health Administrator, Ministry of Health & Population, Government of Nepal and Mr. Mani Ratna Sharma, Under-Secretary, Ministry of Foreign Affairs, Government of Nepal. The meeting was also attended by Mr. Ibrahim Zuhuree, Director (Social Affairs), SAARC Secretariat, Kathmandu, Nepal and Dr. Kashi Kant Jha, Director, SAARC Tuberculosis and HIV/AIDS Centre.

The Board reviewed the status of the activities of 2013 and recommended the Activities and Budget of the Centre for the year 2014 for approval of Programming/Standing Committee of SAARC.

Recommended Programmes for the year 2014

Trainings

1. SAARC Regional Training on MDR and XDR TB on Clinical and Programmatic Management.
2. SAARC Regional Training for Microbiologist on culture, DST & Xpert.

Meetings and Workshop

1. The SAARC Regional Meeting of Programme Managers of National TB and HIV/AIDS Control Programmes.
2. SAARC Regional Meeting to finalize ‘advocacy packs on HIV/AIDS’ for countries and Goodwill Ambassadors.
3. SAARC Workshop on Experiences and Best Practices on paediatric TB/TB-Diabetes.

Research

STAC has identified the following areas to conduct research and monitoring the activities in this year.

1. Knowledge, Attitude and Practice (KAP) regarding household infection control practices among DR and X-DR patients in the SAARC Region, Bangladesh, Nepal and Pakistan.
4. Eleventh round proficiency testing of sputum smear microscopy for NRLs of SAARC Member States.

Programmes on Awareness & Advocacy

1. Programme for SAARC Goodwill Ambassadors for HIV/AIDS, (Ms. Runa Laila, Mr. Ajay Devgan and Ms. Sharmeen Obaid-Chinoy).
2. Conferment of SAARC Award on Tuberculosis.
3. Commemoration of World TB Day.

Publications

STAC publishes Newsletters, Journals, epidemiological reports, awareness material etc.

Strengthening of STAC library

Strengthening of STAC Library located at Thimi, Bhaktapur, Nepal by procuring more printed and audio/visual materials. All STAC publications are distributed through this library.

SAARC Supra-regional Reference Laboratory

STAC laboratory has been established and required activities such as purchasing of lab materials etc. for the year will be carried out.

Additional Activities

- Assessment of health planning and implementation to integrate mobile technology into health programming on TB and HIV/AIDS.
- Technical assistant support to NTPs/NACPs of SAARC Member States.
- Study and documentation on progress/achievements on MDGs indicators on TB and HIV/AIDS in the Region, compilation of information and statistics of MDR and XDR TB in SAARC Region and develop a Regional report.
- Documentation on implementation status of existing SAARC Regional Strategies (TB-HIV Co-infection and ACSM) in the Member States, collection & sharing of all existing guidelines and frameworks on HIV/AIDS those are relevant to the work of the Member States and identification and documentation & sharing of best practices in the Region in the field of TB and HIV/AIDS.
- Strengthening regional data base on TB, HIV/AIDS, and TB/HIV co-infection.
- Participation in the Review of activities NTPs and NACPs in the SAARC Member States and sharing the experiences with the people working for same purposes in the Region.
- Updating/refining of SAARC Regional Training Manuals for ART, Programme Management of Drug Resistance TB and Infection Control at Health Facilities, separately will be carried out.
- Presentation & dissemination of research findings on TB & HIV/AIDS through participation in international conferences and Regional conferences.
- Meetings with collaborative institutions for strengthening of networking- WHO/UNAIDS/UNFPA & other collaborative institutions.
- Development of advocacy packs on HIV/AIDS for SAARC Member States and broadcast through National television of SAARC Member States.
2. Commemoration of World AIDS Day 2013 at STAC

World AIDS Day is commemorated on 1st December every year to raise awareness about HIV & AIDS and to demonstrate international solidarity in the face of the epidemic. The day is an opportunity for public and private partners to disseminate information about the status of the epidemic and to encourage progress in HIV & AIDS prevention, treatment, care and support around the world, particularly in high prevalence countries.

World AIDS Day theme from 2011 to 2015 is “Getting to zero: zero new HIV infections, zero discrimination, zero AIDS related deaths”. And this year the theme “Getting to zero – HIV and adolescents” gives a special emphasis on HIV & adolescents.

SAARC TB & HIV/AIDS Centre (STAC) published the messages issued by His Excellency Secretary General of SAARC and Director of STAC on the occasion of World AIDS Day 2013 on its website (www.saarctb.org).

STAC organized an interaction programme to commemorate the World AIDS Day 2013 at Thimi, Bhaktapur, Nepal on 29th November 2013.

The interaction programme was held with two National Networks; the National Federation of Women Living with HIV/AIDS (NFWLHA) and Jagriti Mahila Maha Sang (JMMS). The SAARC Regional strategy on HIV guides us to convene and coordinate specific cross cutting initiatives amongst which one is to promote and strengthen regional networks. The interaction programme is a means to facilitate and provide technical support for the regional networks and partnerships. It will facilitate capacity building and include these networks in various consultation meetings. In this context this was one of the initial interactions with these networks to introduce them into regional networking. This was one of the main themes of the programme. In addition they were briefed on the efforts of STAC towards prevention and control of HIV/AIDS in the Region within the past ten years.

There were also presentations from the two networks NFWLHA and JMMS on sharing their initiatives across the country which showed a vast range of National networking and partnerships already in existence in HIV/AIDS area and also among the most at risk populations.

At the end Dr. Kashi Kant Jha, Director, STAC gave the closing remarks. In his remarks he thanked the participants for their cooperation in spreading the
messages related to HIV/AIDS specially to reduce the stigma and discrimination. He assured the participants about the support from STAC to carry out their activities in the community as partners.

The programme was attended by forty-four participants from different Networks. They were given resource materials, such as STAC publications related to HIV/AIDS. As resource persons from STAC, Dr. Kashi Kant Jha, Director, Dr. Ghanshyam Kumar Bhatta, Research Officer and Dr. Abdul Malik, Technical Officer (HIV/AIDS), facilitated the programme.

Commemoration of World AIDS Day in SAARC Member Countries

All the SAARC Member States commemorated World AIDS Day by highlighting the slogan of the day - “Getting to Zero" zero new HIV infection, zero discrimination and zero AIDS related deaths”. STAC published the Special Bulletin on its website by incorporating the photographs of the activities carried out by the governments/public sectors, of the SAARC Member States.

3. Celebration of SAARC Charter Day

Publication of Message

On the occasion of 29th SAARC Charter Day, STAC received the message issued by His Excellency, Secretary General of SAARC and published it on the website.

Welcome News

Familiarization Visit by Bhutanese Team

A team of three officials from the Royal Government of Bhutan, Mr. Gembo Tshering, Mr. Ugyen Dorji and Mr. Jigme Tshewang visited STAC under the programme “Familiarization visit of Officers from Department of SAARC and Regional Cooperation Ministry of Foreign Affairs Royal Government of Bhutan” on 26th December 2013. The team was welcomed by all staff of STAC. A meeting was organized to inform the team about the STAC. A presentation on “Introduction of SAARC Tuberculosis and

Discussion among Bhutanese Team Members and STAC Officials
HIV/AIDS Centre and Status of TB and HIV/AIDS in the SAARC Region" was presented by the Director of STAC Dr. K. K. Jha. Recent publications and resource materials published by the Centre were provided to the team.

Team members delivered their feedback and committed to do much better in their endeavour after returning from the visit. In addition they also explained that advocacy covered in media should be focused to vulnerable group involved in industry, CSWs, transport etc. up to grassroots level. If needed, a new strategy should be developed in this regards.

In reply, the Director, STAC assured that the revised strategy certainly cover the issues to reach the grassroots level, remote hospitals, MDR-TB patients, CSW (MARP), PLHIV, transmission of HIV to spouse etc. Advocacy at higher level and advocacy at lower level has also been taken into consideration.

The Bhutanese team and STAC officials discussion about the formal education on HIV/AIDS which is strictly needed to inform the general people.

The team thanked the STAC for this comprehensive information and observed the functioning of the Centre along with its physical infrastructure.

Appointment of Professional Staff at STAC

SAARC TB and HIV/AIDS Centre is pleased to welcome Dr. Abdul Malik and Dr. Gajananda Prakash Bhandari as professional staff in the Centre.

Dr. Abdul Malik (Maldives)

MBBS

Dr. Abdul Malik joined the SAARC Tuberculosis and HIV/AIDS Centre (STAC) as a Professional Staff for the post of Technical Officer (HIV/AIDS) on 7th November 2013.

He obtained his medical graduation from Pakistan at University of Karachi, Sindh Medical College in 2002. He worked as a Senior Medical Officer at Indira Gandhi Memorial Hospital (IGMH); the main tertiary hospital in the Maldives for more than six years. Concurrently he had worked with UNFPA as a consultant doctor for the Adolescent Sexual and Reproductive Health and HIV & STI prevention and awareness programmes for the youth. He worked as a consultant (lecturer/trainer) for the American Red Cross (Maldives) in the special Psychosocial Support Programme for the Tsunami recovery project in 2005 in Maldives. In 2007 he moved to Kuala Lumpur, Malaysia where he worked at the University Malaya Medical Centre (UMMC, University Hospital) as a Resident Medical Officer for Psychiatry and gained specific knowledge in addiction studies for the treatment and care for people who use drugs. Upon his return to the Maldives he joined the United Nations Office on Drugs and Crime (UNODC, Maldives) as the Technical Officer for HIV & Drugs from 2010. During his time with UNODC he represented the agency at the UN Joint Team on AIDS (UNJTA) and was the country representative for UN Cares (UN HIV & AIDS workplace programme) at the UN Asia Pacific Regional Centre in Bangkok.

In addition to this he actively volunteers and provides his technical expertise to health related and other National and International NGO’s. He is a Founder Member of the Cancer Society of Maldives and the Secretary General and Board Member for the Diabetes Society of Maldives. He is a Member of the Maldivian Medical Association and held the post of Health Promotion Coordinator as an Executive Committee Member for two consecutive terms.
Dr. Gajananda Prakash Bhandari (Nepal)
MBBS, MD, MPH

Dr. Gajananda Prakash Bhandari took his position as an Epidemiologist at SAARC TB and HIV/AIDS Centre (STAC) on 2nd January 2014.

He completed his medical graduation from Daghestan State Medical Academy, Russian Federation in 1998 and then worked as a Medical Officer in Bir Hospital (currently National Academy of Medical Sciences), and Kathmandu Medical College Teaching Hospital, Kathmandu, Nepal. He completed MD in Community Medicine & Tropical Diseases from B. P. Koirala Institute of Health Sciences, Dharan, Nepal in 2005 and worked as an Assistant Professor in the same Medical University till 2009. However, while working as a faculty, he upgraded himself by completing MPH in disease control and epidemiology from Prince Leopold Institute of Tropical Medicine, Antwerp, Belgium in 2008 under the scholarship of Belgian Development Cooperation. In February 2009, he serves as a Senior Epidemiologist at Nepal Health Research Council for two and half years and conducted numerous scientific researches. In June 2011, he joined Nepal Public Health Foundation as a Programme Director and organized various National and international level meetings & workshops and conducted numerous researches to support National policy and programmes.

Dr. Bhandari has numerous scientific publications in National and international journals and acting as a peer-reviewer to many scientific journals.

New Publications of the Centre

1. SAARC Journal of Tuberculosis, Lung Diseases and HIV/AIDS

The second issue of the SAARC Journal of Tuberculosis, Lung Diseases and HIV/AIDS has been published. This Vol. X, No. 2, 2013 contains nine articles, among them seven are original and two are case study. It can be downloaded from STAC website www.saarctb.org. The printed copies are freely available from STAC library, Thimi, Bhaktapur, Nepal during office hours. Articles can be submitted through online submission system using STAC website or directly through e-mail at saarctb@mos.com.np. Articles should follow the guidelines available on the STAC website as instructions to the authors (http://saarctb.org/journalonline/about-the-journal.html)

2. STAC at a Glance, revised 2013

STAC has published STAC at a Glance, revised version 2013, printed copy of which can be obtained from STAC library, Thimi, Bhaktapur, Nepal.

3. Special Publication for World AIDS Day 2013

A special publication has been published on the occasion of World AIDS Day 2013 as an awareness material for the prevention of HIV/AIDS to the general population.

4. HIV & AIDS update 2013 – SAARC Region

SAARC Epidemiological information on HIV/AIDS update 2013 has been published.