

**Integrating Young People's Voices into the International AIDS  
Conference in Bangkok 2004**

**Report of the National Youth Consultation in Nepal**  
May 2004

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## **Part I: Introduction**

### **1. HIV/AIDS Situation in Nepal**

Nepal's first cases of HIV/AIDS were reported in 1988. At the end of 2003 it was estimated that 62,000 people were living with HIV/AIDS. The epidemic assessments reveal a low prevalence among the general population and that so far HIV/AIDS is still concentrated among certain groups like Female Sex Workers (FSW), Intravenous Drug Users (IDUs) and labor migrants. However as shown by global experience and specific studies conducted in Nepal the young people remain highly vulnerable to the disease.

In an effort to strengthen its national response to HIV/AIDS, Nepal established a National Center for AIDS and STD Control (NCASC) and a National AIDS Council that in October 2002 endorsed the National HIV/AIDS strategy. Prevention of new infections among young people is one of the 5 key priority areas identified in the strategy and therefore young people shall receive greater attention in future HIV/AIDS-related programming.

### **2. Methodology and Process of the Youth Consultation**

The consultation process in Nepal was designed in a way to ensure that a broad spectrum of voices from young people could be brought together.

Seven local NGO partners of the UNFPA/EU Reproductive Health Initiative for Youth in Asia (RHIYA) program in Nepal conducted consultation sessions in the districts where they are working (19 districts in total) through their existing structures and networks as well as those of other local partners. This ensured a broad participation and coverage of young people at the local level coming from a diverse geographical socio-economical and ethnical background. The concerns, ideas and issues addressed during the district consultations were documented in short reports which have been incorporated in this document. Throughout the consultations conducted at local level 20 young people were selected, based upon criteria developed prior to the consultation exercise, to participate in a National Youth Consultation Workshop.

Further inputs to the National Consultation were sought through UNICEF's program "Chatting with my best friend". This radio program with a nation-wide coverage invited young listeners to write letters expressing their views and concerns on the matter of HIV/AIDS so that they could be considered during the discussions to take place in Kathmandu. Due to logistics constraints (related to the very long tomes of post delivery in Nepal) it was not possible to receive a significant amount of letters in time. However, through this part of the process young people were encouraged to express their views and raise their voices. Likewise through "Chatting with my best friend" engagement it was possible to ensure that a large proportion of young people were informed about the upcoming event and it will be possible to keep them informed about the discussions, outcomes and results of the National Consultation workshop as well as the International AIDS conference.

Finally 30 young people between the ages of 15 and 24 participated in a National Youth Consultation Workshop in Kathmandu on 7<sup>th</sup> -9<sup>th</sup> May 2004. This workshop was organized and conducted by UNFPA in collaboration with other UN agencies (UNICEF, ILO, UNESCO, UNAIDS). For two days these group of young people, comprised of 21 participants from UNFPA/RHIYA, 4 from UNESCO, 3 from UNICEF, 1 from ILO and 1 from

UNFPA/GYP, discussed issues on HIV/AIDS, expressed their opinions on what the problems they are facing regarding HIV/AIDS are and came up with suggestions on what needs to be done according to their views.

## **Part II: Consultation Section**

### **3. National Consultation Workshop in Kathmandu**

#### ***3.1 Overview of preparatory district consultations***

Through the district consultation process above described it was possible to involve young people in 19 districts of Nepal for a total of 504 youth and adolescents participants.

Prior to the district consultations a joint meeting with all the RHIYA NGO partners was held in Kathmandu to familiarize the NGOs with the objective and expected outcome of the consultation process. A joint reporting format was developed which served as a guiding tool for the NGOs and ensured that in all the different locations the focus of the consultation was similar.

Following in-depth analysis of the district consultations reports, it can be safely said that the issues raised at the local level were largely corresponding to those discussed in Kathmandu. No major differences were detected in the reports as a result of the geographical location of the consultations.

#### ***3.2 Overview of the National Consultation workshop***

##### Day 1

During the opening session of the National Consultations **Mr. Agudelo, UNFPA Representative a.i.** described UNFPA's activities, commended His Majesty's Government commitment to involving young people in HIV/AIDS and encouraged young people to actively participate in the workshop and make the most of this opportunity.

**Ms. Jacqueline Bryld, UNAIDS**, underlined the importance of youth in identifying issues which require attention and suggesting measures to address these issues. Ms. Bryld expressed the view that getting correct and consistent knowledge about HIV/AIDS prevention is crucial to young people as they are also part of high risk groups. However she also pointed out to a clear gap between knowledge and behavior among young people and related this to the need for improved skills and services.

**Mr Sharad Ranjit, UNICEF**, familiarized the participants with the Convention on the Rights of the Child with particular emphasis on the fundamental rights enshrined in the convention and its guiding principles of non discrimination, best interest of the child and participation.

**Ms Smriti Aryal from UNICEF** stressed the importance of meaningful participation of young people at all levels since they know best what they really need and conducted an exercise to develop a common understanding of meaningful participation.

## Day 2

The second day started with exercises to identify the expectations of the participants, to collect the participants opinions on HIV/AIDS risk factors specific to young. The participants were also asked about what they do not know about HIV/AIDS and what they would like to learn.

### **Results of the group discussion (selection and resume of answers)**

#### What do you expect as outcome of this workshop ?

Knowledge and information:

- Detailed knowledge of HIV/AIDS
- Ways to prevent HIV/AIDS
- Understanding of the gaps between knowledge, information and services in order to teach in rural areas/villages
- Understanding of gaps between knowledge and needs
- Sharing of experiences, ideas, concepts

Skills:

- Capacity to implement the learnt knowledge on HIV/AIDS
- Capacity to teach in rural/village areas
- Identification of personal weaknesses
- Identification of solutions to identified issues – what should and/or could be done
- Increased knowledge of life-skills

Overall impact of the initiative:

- Nepal is an HIV/AIDS-free zone
- The social negative attitude on HIV/AIDS is addressed
- Youths become more aware
- Youths are protected from HIV/AIDS
- The identified problems are overcome
- Youth problems and concerns are addressed in the up coming International AIDS Conference in Bangkok

#### Why are youths at risk of getting HIV/AIDS?

Information and guidance

- Lack of knowledge and appropriate information on HIV/AIDS
- Lack of social support, security and respect to youths, no proper guidance and facilitation
- Lack of sex education to the youths, no open discussion on risky behavior including sexual behavior and shyness to talk on HIV/AIDS (social taboo)
- Generation gap – parents do not listen to their children. Youth sentiments are not respected which creates frustration among youths.
- Poverty, ignorance and lack of knowledge on their rights

Behavioural factors

- Experiencing nature of youths: i.e. youths are sexually active, testing drugs, sexual nature without any idea, imitating behavior (from western societies)
- Youths are under peer pressure, easily to influence and over trust peers
- Lack of life-skills and skills on independency. Hesitancy in using condoms
- Lack of self/appropriate decision making skills and/or authority

Services and overall support

- Gap between knowledge and access/services
- Lack of HIV/AIDS prevention programs in rural areas

- Available youth related laws and rights are limited only up to the paper
- No proper place available for receiving counseling and consultations
- Negative social attitude o HIV/AIDS and STIs

#### What don't you know about HIV/AIDS?

##### Transmission

- I don't know about HIV/AIDS prevention measures
- I want to learn to prevent HIV from an individual who is in window period
- Unsafe sex and its consequences
- One person is keeping sexual contact with many girls. I don't know if he uses condoms. Condoms are not 100% safe. What can I advice to him ?
- What sort of information should be given to people with multiple sexual partners ?
- Safe sex is necessary to be prevented from HIV but how this concept can be developed among youths ?
- What happens if HIV infected semen is eaten ?
- Does HIV transmit through spit and saliva ?
- Are there any means (of HIV prevention) for bi-sexual and homosexual ?
- Can we eat JUTHO of a PLWHA ?
- Can the blood in blood bank be HIV infected ?
- How HIV/AIDS is not transmitted through mosquitoes ?
- Does HIV/AIDS transmit through sharing food ?
- What is the 100% safe way of preventing AIDS ?

##### PLWHA, care and treatment

- What happens to a person living with HIV/AIDS ?
- Do people die once they are infected with HIV/AIDS ?
- Is there any medicine for HIV positive people ?
- What can PLWHAs do for living ?
- I want to learn I detail on HIV/AIDS medicine (ARV)
- How can capacity of PLWHAs be developed ?

##### Socio-economic dimension of HIV/AIDS

- What can be done the people in the society who pretend 'doesn't know anything'
- We have many drug users in Chitwan. How can this problem be solved?
- How can drug users be convinced for meaningful life and prevention from AIDS ?
- Can HIV/AIDS be prevented through generating employment ?
- How can community people be made participate in the HIV/AIDS prevention programs ?
- South Africa is the most HIV/AIDS infected country in the world. What is the reason behind it ?

##### Testing

- What do you test on blood when you test HIV/AIDS ?
- HIV can not be detected within 4 months of infection. How can it be identified ?

##### Programmes for young people

- What sorts of programs can be done to identify gaps among youths ?
- What sorts of programs are being planned by the health institutions/organizations for keeping youths free from HIV/AIDS ?
- How can well to do and educated youths with risk behavior be prevented from HIV/AIDS ?

#### What do you want to learn on HIV/AIDS?

##### Transmission

- Is HIV only a STD ? What to say if it transmits through some other ways ?
- Ways of HIV/AIDS prevention
- What happens if HIV infected blood is swallowed ?
- What are the chances of HIV infections to a new-borne ?

- How can HIV be detected during window period ? How can people be prevented during this period ?

#### PLWHA, care and treatment

- What are the signs and symptoms of HIV/AIDS ?
- How does the HIV virus affect the body after transmission?
- How to identify PLWHA?
- Why HIV positive and people living with AIDS differentiated ?
- PLWHA rights and issues
- Life-skills for PLWHAs
- How can social support be generated for PLWHAs ?
- Effectiveness of the ARV treatment
- Is ART vaccine available everywhere in the country ?

#### Programmes

- Availability of rehabilitation centers for brothel returnees with HIV/AIDS
- Youth friendly services
- How to involve youths in the HIV/AIDS prevention programs ?

#### Other

- Origin of HIV/AIDS and how it transmitted to human beings ?
- History of HIV/AIDS
- What are the effective means of communication for generation gap education ?
- I could not convince some of my drug using and risky peers/friends How can I convince them ?
- Somebody wants to leave drug using behavior. Drug detoxification centers are very expensive. How can I support him ?

The remaining of day 2 and day 3 were devoted to assess the limitations faced by young people in their access to HIV/AIDS information, skills and services. The result of the discussion on these points is summarised in the tables presented in the following pages. The final recommendations of the forum to the Bangkok International HIV/AIDS conference are also presented.

### ***3.3 Access to Information, Skills and Services***

3 working group of 10 young people were asked to discuss and identify:

1. key gaps and issues in information/education
2. key gaps and issues in life skills
3. key gaps and issues in services for young people.
4. three overall priority on the issues identified
5. gaps in addressing the three identified priorities in Nepal

Below are synopses of their presentations.

**Group 1:**

<p><b>Issues in information</b> Information and education:</p> <ul style="list-style-type: none"> <li>- Language barrier</li> <li>- Hesitation in asking</li> <li>- Lack of education information and communication materials</li> <li>- Media not accessible</li> <li>- Lack of sex education in schools</li> <li>- Lack of awareness raising activities</li> <li>- Lack of clear messages</li> <li>- Lack of youth information centers (YICs)</li> <li>- Communication gap among family members on HIV/AIDS and lack of information in families</li> </ul>	<p><b>Issues in Skills</b></p> <ul style="list-style-type: none"> <li>- Ignorance</li> <li>- Lack of life-skills based trainings</li> <li>- Lack of self-independency</li> <li>- Lack of decision making skills</li> <li>- Limited feeling</li> <li>- Lack of self-confidence</li> <li>- Lack of effective communication skills</li> <li>- Negative attitude of the society</li> <li>- Can't identify the issues</li> </ul>	<p><b>Issues in Services</b></p> <ul style="list-style-type: none"> <li>- Lack of lab facilities – HIV testing</li> <li>- Lack of youth counselors</li> <li>- Lack of youth friendly services</li> <li>- Lack of health facilities in rural areas</li> <li>- Negligence by the service providers</li> <li>- Service providers are not trained</li> <li>- Lack of friendly behavior</li> <li>- Lack of care and support to the HIV positive people</li> </ul>
<p><b>Three priorities on information and education:</b></p> <ol style="list-style-type: none"> <li>1<sup>st</sup> Lack of information on sex education</li> <li>2<sup>nd</sup> Lack of clear messages on HIV/AIDS</li> <li>3<sup>rd</sup> Lack of youth information centers</li> </ol>	<p><b>Three priorities in life skills:</b></p> <ol style="list-style-type: none"> <li>1<sup>st</sup> Lack of life-skill information</li> <li>2<sup>nd</sup> Unability to make self decision</li> <li>3<sup>rd</sup> Lack of effective communication skills</li> </ol>	<p><b>Three priorities on gaps and issues in services:</b></p> <ol style="list-style-type: none"> <li>1<sup>st</sup> Lack youth friendly behavior of the service providers</li> <li>2<sup>nd</sup> Lack of health services in rural areas</li> <li>3<sup>rd</sup> Lack of care and support</li> </ol>

**Group 2:**

<p><b>Three priorities on information and education</b></p> <ol style="list-style-type: none"> <li>1<sup>st</sup> Service providing agencies/ institutions are far from actual needy people (in- accessibility of services)</li> <li>2<sup>nd</sup> Lack of HIV/AIDS curriculum in educational institutions – mass media does not give appropriate messages – vulgar messages are given in the media</li> <li>3<sup>rd</sup> Attitude of parents are negative on HIV/AIDS due to unaware of parents on HIV/AIDS. They do not encourage their children to learn on HIV/AIDS</li> </ol>	<p><b>Three Priorities in life skills:</b></p> <ul style="list-style-type: none"> <li>- Need of like-skill development programs</li> <li>- Counselors are not trained</li> <li>- Lack of skilled human resources in service providing agencies</li> </ul>	<p><b>Three priorities on gaps and issues in services</b></p> <ul style="list-style-type: none"> <li>- Lack of confidentiality practices</li> <li>- Lack of enough supports in service providing agencies</li> <li>- Un-affordability – very expensive</li> </ul>
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<b>Overall three priorities:</b> <ul style="list-style-type: none"> <li>- Awareness and life-skills education</li> <li>- YICs</li> <li>- Care and support</li> </ul>		
<b>Gaps in the 3 priority issues in Nepal</b> <ul style="list-style-type: none"> <li>1<sup>st</sup> lack of curriculum of HIV/AIDS in formal education</li> <li>2<sup>nd</sup> Lack of skilled human resources in service providing agencies</li> <li>3<sup>rd</sup> un-affordability</li> </ul>		
<b>Others</b> Lack of involvement of PLWHAs in the programs Lack of community focused special programs		

**Group 3:**

<b>Issues in information</b>	<b>Issues in Skills</b>	<b>Issues in Services</b>
<ul style="list-style-type: none"> <li>- Lack of awareness and targeted information oriented programs</li> <li>- Unclear communication/information</li> <li>- Lack of IEC materials in local language</li> <li>- Lack of coordination in families – unclear communication in families</li> <li>- Lack of peace and security</li> <li>- No detailed curriculum on sex education and HIV/AIDS</li> <li>- Teachers do not fulfill their responsibility – no appropriate teaching methods used</li> <li>- Geographical remoteness</li> <li>- Lack of skilled human resources in the remote areas</li> <li>- There is a KAP gap due un-accessibility of services</li> </ul>	<ul style="list-style-type: none"> <li>- Not able to identify personal qualities</li> <li>- Lack of confidence</li> <li>- Feeling of hesitance</li> <li>- Lack of decision making skills</li> <li>- Lack of self awareness – self-creativity</li> <li>- Lack of institutions for life-skills – centralized services/programs/training programs – no decentralization</li> <li>- No talking on sex and sexuality – kept hidden</li> <li>- Not identified target people’s needs</li> <li>- Lack of target people’s participation</li> <li>- Donor dependent programs</li> <li>- Gender and racial discrimination</li> <li>- Lack of appropriate implementation methodology</li> <li>- Lack of practical training</li> <li>- Lack of vocational training/activities and other opportunities</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of appropriate means for HIV/AIDS education eg, YIC, YFS,</li> <li>- Lack of skilled human resources</li> <li>- Lack of youth friendly services</li> <li>- Lack of friendliness of service providers</li> <li>- Lack of sustainability</li> <li>- Expensive labs</li> <li>- Lack of support materials/facilities in service centers such as BCC materials</li> <li>- Lack of quality counseling facilities including safe space</li> <li>- No access to condoms</li> <li>- Low quality service</li> <li>- No testing and treatment centers for HIV/AIDS for vulnerable groups</li> <li>- Lack of high quality services</li> </ul>

		- Lack of treatment centers for identified problems
<b>Three priorities on information and education:</b> <ul style="list-style-type: none"> <li>- Lack of awareness focused and informative education programs - lack of informative programs such as street dramas - not implementation of available programs – difficult in expressions –</li> <li>- No curriculum of sex education</li> <li>- Geographical remoteness and delay in reaching messages</li> </ul>	<b>Three Priorities in life skills:</b> <ul style="list-style-type: none"> <li>- No institutions providing life-skills trainings</li> <li>- Lack of participation of youths in the program from the very beginning of the program</li> <li>- Lack of service oriented organizations in rural areas</li> </ul>	<b>Three priorities on gaps and issues in services:</b> <ul style="list-style-type: none"> <li>- Lack of quality counseling centers</li> <li>- Lack of lab tests</li> <li>- Lack of rehabilitation centers - available services are very expensive</li> </ul>
<b>Gaps in the 3 overall priority issues in Nepal</b> <ul style="list-style-type: none"> <li>- Lack of awareness oriented and information oriented programs</li> <li>- Need of training programs for on life-skills</li> <li>- Lack of service centers</li> </ul>		

## Plenary Discussion

### 3 Overall priorities:

- No 1 Lack of sex education and role of parents/teachers in sex education
- No 2 Need of institutions providing life-skill trainings and lack of participation of targeted people: PLWHA, youths, etc.
- No 3 Need of counseling and youth friendly services in service centers

### Recommendations of the three groups on the identified overall priorities:

	Group 1	Group 2	Group 3
No 1 - Lack of sex education and role of parents/ teachers in sex education	<ul style="list-style-type: none"> <li>- Sex education in schools</li> <li>- Street drama</li> <li>- Peer education</li> <li>- Use messages on bags, dairy milk packets, etc.</li> <li>- Coordination between govt. and non-govt. agencies</li> </ul>	<ul style="list-style-type: none"> <li>- Parent education</li> <li>- HIV/AIDS education should be there in the school curriculum</li> </ul>	<ul style="list-style-type: none"> <li>- Sex education in rural areas/grassroots level</li> <li>- Compulsory inclusion of sex education school curriculum</li> <li>- More IEC production</li> </ul>
No 2 - Need of institutions providing life-skill trainings and lack of participation of targeted people (PLWHAs), youths, etc.	<ul style="list-style-type: none"> <li>- Training facilities in life-skills for youths (including parents and teachers)</li> <li>- Support from parents should be provided to their children</li> </ul>	<ul style="list-style-type: none"> <li>- Govt and NGOs need to give attention on peer education</li> <li>- Skilled human resources should be managed also in rural areas</li> </ul>	<ul style="list-style-type: none"> <li>- Mobile services</li> <li>- Rehab</li> <li>- Quality of services</li> </ul>

No 3 - Need of counseling and youth friendly services in service centers	<ul style="list-style-type: none"> <li>- Expansion of service centers reaching grassroots level communities</li> <li>- One lab facility in each district for</li> <li>- Encourage the PLWHAs and mobilizing in programs</li> </ul>	<ul style="list-style-type: none"> <li>- Confidentiality should be maintained</li> <li>- Low cost services</li> </ul>	
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#### **4. Key Messages for the Global AIDS Conference**

##### ***4.1 Declaration of the Participants from the National Youth Consultation***

To emphasize the importance young people gave to the consultation and - at the same time - the expectation of a strong commitment from young people themselves as well as the supporting partners, the participants came up with a declaration containing the messages they would like to convey with respect to the issue of HIV/AIDS and young people. The text of the declaration is attached as an annex to this report.

**Table 1 – District Consultations conducted by RHIYA Partners**

SPN:	Chitwan, Jhapa, Parsa, Banke: in total 151 young people participated.
AMK:	Rupendehi: 25 participants Syangja: 13 participants (in form of a debate competition) and in collaboration with Red Cross Society Nepal Morang: 24 participants
FPAN:	Kailali, Kanchanpur, Kavre, Dang and Dhanusa: in total 127 participants
BPMHF:	Nawalparasi and Kathmandu: in total 30 participants
Phect:	Dholakha: 38 participants
EHDAG:	Pokhara Municipality: 41participants Dharan district: 48 participants
Samjhauta:	Two consultations in Bara district and one in Mahottari: total number of 48 participants

**Bakhundeole, Lalitpur, Declaration****Date: 9<sup>th</sup> May 2004**

We the youth gathered from 20 districts of Nepal through the process of district and national consultations here at Bakhundeole, Lalitpur, on 9<sup>th</sup> May 2004 agree and declare the following on HIV/AIDS issues in context of the Nepalese situation:

First of all, we would like to convey to all concerned stakeholders, civil society, young people and general population of Nepal to realize the vulnerability of young people for contracting HIV/AIDS which is increasingly becoming a greater risk for Nepalese young people.

We would like to voice from this consultation that the following three areas be given high priority by all concerns while developing and implementing any HIV/AIDS programme in the country:

- We would like to recommend that the sex education is made compulsory in schools and in curriculum and teachers are adequately trained on communication techniques in issues of sex education. We would also like to persuade parents to let their children participate in SRH related programme and to have open discussion on SRH education
- Easy access to life skills education and meaningful involvement and participation of young people and youth to youth network building.
- We have the rights to the access of services and we would strongly like to recommend that all services facilities must take account of affordable quality youth friendly services and information.

In line with above apriority we would like to bring the attention for the following:

1. Highest priority of the programme should be given to inaccessible hard to reach areas.
2. Intensification of IEC awareness campaign should be conducted with involvement of teachers, parents, youths, and media in all corner of the country with appropriate IEC materials in local languages.



**National Youth Consultation on  
HIV/AIDS programming for young people in Nepal  
Kathmandu  
7-9 May 2004**

Organised by UNFPA Nepal in partnership with , UNICEF, UNAIDS, UNESCO and ILO Nepal.

**Agenda**

<b>Time</b>	<b>Sessions</b>	<b>Resource Person(s)</b>
<b>Friday 7 May 2004</b>		
<b>3 p.m.</b>	Arrival at <b>Hotel Greenwich Village</b> (Bakundole) and Registration	Distribution of consultation background materials to each participant
	<b>Tea /Coffee</b>	
<b>4.00-4.10</b>	<b>Session I. Welcome session</b>  Remarks of Welcome: Dr. Hernando Agudelo UNFPA Representative a.i.	<b>Rapporteur Day I;</b> Ms Sudha Pant, UNFPA
<b>4.10-4.20</b>	Key HIV issues in Nepal: Ms Jacqueline Bryld, UNAIDS	
<b>4.20-4.30</b>	Meaningful participation of young people: Ms Smriti Aryal, UNICEF	
<b>4.30 - 4.40</b>	Role of young people in HIV prevention: Avash K.C., Global Youth Forum representative	
<b>4.40 - 5.10</b>	<b>Session II. Warm up and Introductions</b>  Game for introduction of participants	<b>Facilitator:</b> Ms Biplabi Shrestha
<b>5.10.- 5.30</b>	Participants expectations, setting ground rules	
<b>5.30-6.30</b>	Rights of young people	<b>Mr Sharat Ranjit, UNICEF</b>

<b>6.30-6.45</b>	Consultation objectives, expected outcomes and agenda. Suggestions from young people on the agenda and adaptation	<b>Facilitator:</b> Ms Biplabi Shrestha
<b>6.45 – 7.30</b>	Video film on HIV and young people Titled “Kathmandu – Untold Stories”	
<b>7.30 pm</b>	Group photo of participants and dinner	

<b>Saturday, 8 May 2004</b>		
	Session III: HIV PREVENTION AMONG YOUNG PEOPLE	<b>Facilitator:</b> Ms Biplabi Shrestha <b>Rapporteur Day II:</b> K.P. Bista, RHIYA /UPSU
<b>7.30-8.00</b>	Breakfast	
<b>8.00-8.15</b>	Icebreaker /warm up exercise	<b>Avash K.C.</b>
<b>8.15 - 9.00</b>	<b>Situation of HIV in Nepal with focus on young people</b> Questions and answers	NSASC representative
<b>9.00 - 9.45</b>	<b>Why young people are vulnerable to HIV/AIDS</b>	Ms Biplabi Shrestha
<b>9.45-10.00</b>	Coffee Break	
	<b>SESSION IV: Identifying Issues pertaining to HIV and young people in Nepal</b>	
<b>10.00 -10.15</b>	<b>VIPP Card exercise on key issues from young people</b>	Ms Biplabi Shrestha
<b>10.15– 12.15</b>	<b>Group Work: Orientation on Group Work and distribution of guide questions to groups related to Information, Life skills and Services for young people.</b>	Each group of about 10 participants works with one facilitator each Group Facilitators: Group I.: AMK Group II.: BP Group III.: plect
<b>12.15-12.45</b>	<b>Group Work Plenary: Each Group makes a 10 minute presentation summarizing the discussion on key issues</b>	Young leaders from each group.
<b>12.45-1.30</b>	<b>LUNCH</b>	
<b>1.30-3.30</b>	<b>Orientation on Group Work and distribution of guide questions to groups related to Gaps and recommendations</b> Preparation of presentation for plenary	Each group of about 10 participants works with one facilitator each Group Facilitators: Group I.: SPN Group II.: Samjhauta Group III.: FPAN
<b>3.30-3.45</b>	Break	

3.45-4.15	<b>Group Work Plenary: Each Group makes a 10 minute presentation summarizing the discussion on key issues</b>	Young leaders from each group.
4.15-6.15	<b>Life skills</b>	Ms Biplabi Shrestha
7.00	<p><b>Dinner</b></p> <p><b>Party (music/ Role Play by participants )</b></p> <p>In the evening rapporteurs and facilitators of each group, together with a youth representative from the groups will meet to draft a statement about key messages which will be presented to and discussed by the plenary the next day</p> <p><b>Responsible:</b> EHDAG and K.P. Bista, UPSU/RHIYA</p>	

<b>Sunday 9 May 2004</b>		
<b>7.30-8.00</b>	Breakfast	
	<b>Session VI: WAY FORWARD</b>	
<b>8.00-8.15</b>	Warm up exercise/Ice breaker	Avash K.C./ Biplabi
	<b>Reflection on previous day</b>	
<b>8.15-9.00</b>	Cont. Life skills/pending issues to discuss	Biplabi Shrestha
<b>9.00-10.00</b>	Presentation of the draft summary recommendations statement from the workshop and discussion in plenary –  Summary and finalisation of the recommendations for the Bangkok HIV International Conference	<b>Facilitator:</b> K.P. Bista
<b>10.00-10.30</b>	Completion of workshop questionnaire/Evaluation Form	participants
<b>10.30-11.00</b>	<b>What can youth do after this workshop?</b> Discussion: Networking and Partnership	Facilitator: Mr. K.P. Bista
<b>11.00-11.30</b>	<b>Session VII : Closing Session</b>  Farewell. Parting thoughts  Follow up  Vote of thanks	Young person  UNFPA/RHIYA  Facilitator

**List of participants at Youth Consultation Meeting in Kathmandu, 7<sup>th</sup> – 9<sup>th</sup> May 2004**

	<b>Name</b>	<b>Age</b>	<b>Sex</b>	<b>District</b>	<b>Organization</b>
1	Radha Rijal	21	Female	Morang	AMK
2	Santosh Giiri	15	Male	Syangja	AMK
3	Laxmi Thapa	21	Female	Rupandehi	AMK
4	Kapil Kandel	15	Male	Nawalparasi	BPMHF
5	Sushma Thapa	17	Female	Kathmandu	BPMHF
6	Bisal Lannichhane	15	Male	Chitwan	SPN
7	Rita Shrestha	21	Female	Chitwan	SPN
8	Arjun Regmi	20	Male	Banke	SPN
9	Shone Lama	16	Female	Banke	SPN
10	Prakash Manandhar	22	Male	Kavre	FPAN
11	Nabin Bahadur Sing	24	Male	Dhanusa	FPAN
12	Nabin Ghimire	20	Male	Dang	FPAN
13	Kurnal Neupane	22	Male	Kailali	FPAN
14	Gopi Raj Ghimire	24	Male	Kanchanpur	FPAN
15	Sita Dhakal	22	Female	Bara	Samjhauta
16	Alka Jha	21	Female	Mahottari	Samjhauta
17	Ram Prabodh Yadav	17	Male	Dhanusa	Samjhauta
18	Ajaya Pradhan	17	Male	Dholakha	phect
19	Sandhya Basnet	19	Female	Dholakha	phect
20	Pramila Tamrakar	21	Female	Pokhara	EHDAG
21	Navraj Rai	20	Male	Dharan	EHDAG
22	Sushila K.C.		Female	Kathmandu	UNICEF
23	Bikram Maharjan		Male	Kirtipur	UNICEF
24	Shyam	16	Male	Kathmandu	ILO
25	Utsav Shakya	22	Male	Bungamati	UNESCO
26	Purnashova Karmacharya	19	Female	Tamsipakha	UNESCO
27	Bana Devi Maharjan	20	Female	Tamsipakha	UNESCO
28	Radhika Thayamali	22	Female	Bhaktapur	UNESCO
29	Avash K.C.	16	Male	Kathmandu	UNFPA/GYP
30	Rita Shrestha	17	Female	Chitwan	UNICEF
	Ms Biplabi Shrestha			Kathmandu	Facilitator/ ORDF