

HIGHLIGHT OF THIS ISSUE

Bringing Severe Non-Communicable Disease Care to District-Level Hospitals in Nepal: PEN-Plus Experience and Regional Policy Implications

Introduction:

Nepal's most severe NCDs i.e. Type 1 diabetes, sickle cell disease, thalassaemia, congenital heart conditions have long required patients to travel to overcrowded tertiary hospitals. The PEN-Plus initiative tests whether district hospitals, properly supported, can shoulder this burden instead.

Key Message:

As of May 2025, six PEN-Plus hospitals are caring for 3,278 severe NCD patients across Nepal, nearly one in five of them under 19. District-level decentralisation works — and this paper makes the case for scaling it regionally.

Methodology:

Launched in 2021 through a Ministry of Health and Population partnership with KIOCH and the NCDI Poverty Network, the programme tracked implementation and patient outcomes across six hospitals through May 2025.



Making non-communicable diseases a national priority

NCD - RESEARCH ROUNDUP

VOLUME: VII | ISSUE: IV

Online Access at: <https://nepalhealthfrontiers.org/ncd-watch-nepal>

Suggested Citation:

NCD Watch Nepal: Non-communicable Diseases in Nepal-Research Roundup April 2026. Adhikari TB, Paudel K, Bhusal S, Thapa M, Poudel M, Sharma N. vol. VII, issue IV, Kathmandu Nepal: 2026: 6.1.

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Roundup Summary

In April 2026, our search on non-communicable diseases and mental health-related literature in Nepal yielded nineteen published articles covering mental health, diabetes, respiratory diseases, hypertension, non-communicable disease care delivery, HIV/AIDS-related stigma, and health policy.

Prevalence and Correlates of Anxiety and Depression Among LGBT Individuals in Nepal: A Cross-Sectional Study

DOI: <https://doi.org/10.1136/bmjopen-2025-105946>

Context: LGBT people face disproportionately higher rates of mental health problems globally, yet this population remains understudied in low-income and middle-income countries like Nepal. This study assessed the prevalence and associated factors of anxiety and depressive symptoms among gay, bisexual, and other men who have sex with men (GBMSM) in Nepal.

Methodology: A nationwide cross-sectional online survey was conducted among 842 GBMSM in Nepal between March and May 2024. The Generalized Anxiety Disorder-7 (GAD-7) and Patient Health Questionnaire-9 (PHQ-9) were used to measure anxiety and depressive symptoms respectively. Bivariate and multivariable logistic regression analyses examined associations with the outcomes.

Key message: A concerning prevalence of both anxiety and depressive symptoms was found among GBMSM in Nepal. Engagement in transactional sex and substance use were linked to higher rates of anxiety and depression. Those who had engaged in chemsex were more likely to report depressive symptoms, while being single was associated with lower odds of depression. Targeted mental health programmes for LGBT communities are urgently needed in Nepal.

Identifying Learner Profiles Through Universal Screening: Academic Anxiety and Depression in Nepalese University Students

DOI: <https://doi.org/10.3390/bs16040557>

Context: University students in Nepal face significant academic pressure, often leading to anxiety and depression. Despite the growing burden, systematic screening approaches to identify students in need.

Methodology: A total of 547 Nepalese college students completed the Academic Anxiety Scale (AAS) and the University Student Depression Inventory (USDI). Confirmatory factor analysis (CFA) was conducted to evaluate the validity of the Nepalese versions of both tools. Comparative analyses were also conducted using an archival dataset to examine learner profiles.

Key message: Patterns of anxiety and depression among Nepalese students were found to be consistent with those seen in other countries. Universal screening identified distinct learner need profiles, enabling targeted support and intervention. Routine early mental health screening in Nepali universities can help identify at-risk students before their difficulties worsen.

Parental Migration for Work and Psychosocial Problems among Left-Behind Adolescents in Nepal

DOI: <https://doi.org/10.1007/s10903-025-01799-3>

Context: Nepal is a major labour-exporting country, leaving thousands of adolescents behind in the care of one parent or extended family. While migration brings economic benefits through remittances, its psychological effect on left-behind children has been poorly studied in Nepal. This study examined the psychosocial wellbeing of adolescents whose parents had migrated for work.

Methodology: A cross-sectional study was conducted in Nawalparasi district, one of Nepal's highest migrant-sending districts, involving 370 left-behind adolescents and 388 non-left-behind adolescents. Psychosocial wellbeing was measured using the Nepali version of the Youth Paediatric Symptom Checklist (Y-PSC) and the Strengths and Difficulties Questionnaire (SDQ).

Key message: Left-behind adolescents showed higher rates of psychological problems (20%) and psychological dysfunction (21%) than those whose parents did not migrate (13% and 14%). Girls were more affected than boys. Strong relationships with migrant parents, regular communication, visit frequency, and mobile phone access were all linked to better psychosocial health. Maintaining parent-child connections is essential for protecting the mental health of adolescents left behind.

Depression Beyond the 6-Month Postpartum Period: A Mixed-Method Study Among Women in Nepal

DOI: <https://doi.org/10.1111/jan.70601>

Context: Postpartum depression (PPD) is the most common mental health condition affecting new mothers worldwide and a leading cause of maternal morbidity. In Nepal, approximately 20% of childbearing women experience PPD. Most research focuses only on the first six months after birth, leaving the extended postpartum period poorly understood.

Methodology: This mixed-method study in Nepal examined social and clinical factors contributing to postpartum depression among women beyond six months after giving birth. Both quantitative and qualitative approaches were used, including in-depth interviews with women. Key findings were presented to stakeholders to validate the interpretation.

Key message: Depression was found to continue beyond the six-month postpartum window and could also begin after that period. Key contributing factors included having a female child, an unplanned pregnancy, childbirth complications, low birth weight, lack of family support, lack of spousal support, and cultural pressure. Mental health checks for mothers need to continue well past six months postpartum, and services must address the cultural and social pressures Nepali women face.

Depression and Quality of Life (QoL) Among Older Adults in Sudurpashchim Province, Nepal: Findings from a Cross-Sectional Community Survey

DOI: <https://link.springer.com/article/10.1186/s12877-026-07478-8>

Context: The global rise in the older adult population is linked to a higher burden of depression, which significantly reduces quality of life. In Nepal, geriatric depression is not adequately studied in most regions, particularly in the Far-Western (Sudurpashchim) Province. This study examined the prevalence of depression and its association with quality of life in this underserved area.

Methodology: A cross-sectional household survey was conducted among randomly selected hill and Tarai populations of Sudurpashchim Province between October and December 2021. Of 956 selected older adult participants, 945 took part (98.8% participation rate). Depression and quality of life were assessed using validated geriatric tools.

Key message: The prevalence of geriatric depression was 43.9%. Most participants had no formal education (65.5%), were not employed (97.9%), and earned below NPR 20,000 per month (87.1%). Depression was more common among those aged 75 and above, those living in hilly areas, and those with a lower quality of life. Urgent mental health programmes are needed for older adults, especially those who are oldest, poorest, and most isolated.

Mental Health Status of Mothers with Children with and without Disability: A Comparative Study of Women in Nepal

DOI: <http://jionnepal.edu.np/index.php/jionnepal/article/view/1424>

Context: Childhood disabilities pose a significant risk to maternal mental health. Raising a child with autism spectrum disorder (ASD) or developmental delay (DD) can be physically and emotionally demanding, yet the mental health of these mothers remains understudied in Nepal. This study compared stress, anxiety, and depression among mothers of children with ASD, DD, and neurotypical (NT) children.

Methodology: A cross-sectional survey was conducted among mothers attending the Pediatric Outpatient Department of Tribhuvan University Teaching Hospital in Kathmandu, conducted

immediately post-pandemic. The Hopkins Symptom Checklist-25 (HSCL-25) was used to measure stress, anxiety, and depression. A total of 150 mothers participated: 34 mothers of children with ASD, 32 of children with DD, and 84 of neurotypical children.

Key message: More than half of mothers of children with ASD and DD reported stress including anxiety and depression, compared to only 9.5% of mothers of neurotypical children. Mothers of children with ASD had significantly higher odds of stress (OR 15.7), and mothers of children with DD also showed markedly elevated odds of stress (OR 11). Mothers with lower education levels were at even greater risk. These findings highlight the urgent need for mental health support programmes specifically designed for caregivers of children with disabilities.

Evaluation of Diabetes Self-Care Activities and Glycemic Control Profiles in People With Type 2 Diabetes Mellitus

DOI: <https://doi.org/10.1002/hsr2.72230>

Context: Diabetes mellitus is a chronic condition requiring long-term management. In addition to medication, appropriate self-care activities including healthy eating, physical activity, blood glucose monitoring, and foot care are crucial for achieving good glycemic control. Evidence on the relationship between self-care and glycemic outcomes from Eastern Nepal was lacking.

Methodology: An institution-based cross-sectional study was conducted at the internal medicine outpatient clinic of Purbanchal University Hospital between January and March 2024. The validated Diabetes Self-Management Questionnaire (DSMQ) assessed self-care activities. Glycemic control was measured using HbA_{1c}, fasting plasma glucose, and post-prandial blood glucose levels.

Key message: More than half of the participants had poor glycemic control despite being on medication. Limited engagement in self-care practices was the main reason for this. Better diabetes education and practical support are needed, especially for people with low literacy and high tobacco use, to help patients incorporate self-care into their daily routines.

Knowledge, Attitude, and Practice of Diabetes Mellitus Management in the Age Group Above 40 Years Patients Attending the Medical Outpatient Department of the Tertiary Care Center, Nepal: A Cross-Sectional Study

DOI: <https://doi.org/10.1002/hsr2.72326>

Context: Diabetes mellitus is a growing public health problem in Nepal. Effective management depends

not only on medical treatment but also on patients' knowledge, attitudes, and practices (KAP). Data on KAP among older patients attending tertiary care in Nepal is limited.

Methodology: An institutional cross-sectional study was conducted among 407 diabetic patients aged above 40 years at the Medicine Outpatient Department (MOPD) of Bir Hospital, Kathmandu, from November 2022 to February 2023. Patients were selected by simple random sampling. KAP was assessed using a validated structured questionnaire and data were analysed using chi-square tests.

Key message: Significant gaps were found in knowledge, attitude, and practice of diabetes management. Most participants were female (63.6%) and literate (84%), with a median age of 65 years. Despite a reasonable level of awareness, many patients were not effectively applying their knowledge in daily life. Practical, hands-on diabetes education is needed to help patients move from knowing what to do to actually doing it.

Clinical Profile of Diabetes Mellitus in Young Patients Admitted at BP Koirala Institute of Health Sciences: A Cross-Sectional Study

DOI: <https://doi.org/10.1002/hsr2.72206>

Context: Diabetes is increasingly being diagnosed in younger people worldwide, creating a significant economic burden, particularly in developing countries like Nepal. There is limited data on the sociodemographic distribution, clinical features, and treatment approaches for young adults with diabetes in Nepal.

Methodology: A cross-sectional observational study was conducted at BP Koirala Institute of Health Sciences (BPKIHS), including all young patients aged 20 to 39 years diagnosed with diabetes admitted to the Internal Medicine department and outpatient ward over one year. A structured questionnaire collected sociodemographic, clinical, laboratory, and treatment data under ethical approval.

Key message: The study documented the clinical profile of young adults with diabetes at one of Nepal's leading tertiary hospitals. Diabetes is rising among younger age groups, placing a heavy burden on patients and the health system. Understanding how this age group presents and is managed is essential for developing better prevention strategies and early detection programmes.

Depression, Anxiety and Stress among Patients with Type 2 Diabetes Mellitus Visiting a Tertiary Care Center of Nepal: A Cross-Sectional Study

DOI: <https://cmj.org.np/cmj/index.php/cmj/article/view/95>

Context: People living with Type 2 diabetes mellitus are at increased risk of mental health conditions including depression, anxiety, and stress. These conditions, when present alongside diabetes, can worsen glycemic control and reduce quality of life. Data on the combined burden of depression, anxiety, and stress among diabetes patients in Nepali tertiary care settings is scarce.

Methodology: A cross-sectional study was conducted among patients with Type 2 diabetes mellitus visiting a tertiary care centre in Nepal. The Depression Anxiety Stress Scale (DASS) was used to measure all three mental health outcomes. Sociodemographic and clinical variables were collected to identify associated factors.

Key message: A substantial proportion of Type 2 diabetes patients in this study experienced depression, anxiety, and stress. These findings point to the importance of routinely screening for mental health conditions in diabetes care settings. Integrating psychological support into diabetes management can help improve both mental and physical health outcomes for patients.

Estimation Of Direct Medical Cost among Patients with Chronic Obstructive Pulmonary Disease attending Birat Medical College Teaching Hospital, Nepal: An Observational Study

DOI: <https://bjhs.com.np/bjhs/index.php/bjhs/article/view/746>

Context: Chronic obstructive pulmonary disease (COPD) is a major cause of illness and death worldwide, and its economic burden continues to grow. In Nepal, where out-of-pocket health spending is high, COPD patients face significant financial pressure to access and sustain treatment. Local data on the direct medical costs of COPD management is limited.

Methodology: An observational study was conducted among COPD patients attending Birat Medical College Teaching Hospital in Biratnagar, Nepal. Data on the costs of consultations, diagnostics, medications, hospitalisation, and other direct medical expenses were collected from patients. The study aimed to quantify the direct financial burden on patients receiving care for COPD.

Key message: The study documented the direct medical costs borne by COPD patients at a tertiary centre in Eastern Nepal. Medication costs formed a major part of the overall expenditure. Hospital admissions added significantly to costs, particularly for patients with more frequent exacerbations. The findings highlight the financial burden COPD places on patients and point to the need for health financing policies that protect patients from catastrophic out-of-pocket spending.

Risk Factors of Acute Exacerbation in COPD Patients visiting Emergency Ward: A Cross-Sectional Study

DOI: <https://doi.org/10.56974/pmjn.953>

Context: Chronic obstructive pulmonary disease (COPD) is a leading cause of morbidity and mortality worldwide. In Nepal, chronic respiratory diseases are the second highest cause of death among non-communicable diseases. Acute exacerbations of COPD lead to emergency presentations, hospitalisations, and rapid decline in lung function. Understanding the risk factors for exacerbations is essential to prevent them.

Methodology: A descriptive cross-sectional study was carried out at the emergency department of Bir Hospital, Kathmandu, following approval from the National Academy of Medical Sciences Institutional Review Board. Using a structured data collection form, 265 COPD patients were evaluated for risk factors associated with acute exacerbation. Data were entered and analysed using standard methods.

Key message: Among the 265 participants, 63% were female and most were elderly, with 48% aged above 70 years. Active smoking was present in 11% and alcohol use in 15% of participants. History of previous hospital admission was reported by 43% of patients. Nearly 40% were non-adherent to previously prescribed medications. These findings show that non-adherence to medications and a history of prior admissions are important contributors to acute exacerbation. Patient counselling, behaviour modification, and a holistic management plan are needed to reduce the frequency of exacerbations in COPD patients.

Bringing Severe Non-Communicable Disease Care to District-Level Hospitals in Nepal: PEN-Plus Experience and Regional Policy Implications

DOI: <https://doi.org/10.1136/bmjgh-2025-020872>

Context: Severe non-communicable diseases such as Type 1 diabetes, sickle cell disease, thalassaemia, and congenital heart conditions are prevalent in low-resource settings but have traditionally required patients to travel to overcrowded tertiary hospitals. The PEN-Plus initiative was designed to decentralise care for these conditions to district-level hospitals in Nepal.

Methodology: The PEN-Plus programme was introduced in Nepal in 2021 through a partnership between the Ministry of Health and Population (MoHP) and the Kathmandu Institute of Child Health (KIOCH), with financial support from the NCDI Poverty Network. This paper describes programme implementation experience, patient outcomes, and regional policy implications based on data collected through May 2025 across six PEN-Plus hospitals.

Key message: As of May 2025, six hospitals in Nepal are functioning as PEN-Plus centres, providing care to 3,278 patients with severe NCDs. Nearly 1 in 5 of these patients (18.4%) are under 19 years old. District-level hospitals can provide quality care for complex conditions when given proper training and support. PEN-Plus offers a replicable model for reducing the burden on patients and large city hospitals across the region.

Equity in the Continuum of Hypertension Care: Evidence from a Nationally Representative Survey in Nepal

DOI: <https://doi.org/10.1186/s12889-026-27211-9>

Context: Hypertension is a leading risk factor for cardiovascular disease in Nepal, affecting approximately one in four adults. Despite the scale of the problem, many people with hypertension remain undiagnosed, untreated, or uncontrolled. Equity gaps across the full care pathway from detection to control are poorly understood in Nepal.

Methodology: Secondary data from the 2022 Nepal Demographic and Health Survey (NDHS) were analysed. The study focused on women and men with hypertension (systolic BP at or above 140 mmHg or diastolic BP at or above 90 mmHg, or those on treatment). A cascade-of-care approach was used to track equity across awareness, treatment, and control stages, with stratification by sociodemographic factors and province.

Key message: The national prevalence of hypertension was 20%. Large gaps were found at every stage of the care cascade, from diagnosis through treatment to blood pressure control. The burden was greatest among people of lower socioeconomic status, and notable variation was observed across provinces. These findings point to where targeted efforts are most needed to improve hypertension care across Nepal.

Prevalence of Congenital Heart Disease in School-Aged Children and Its Association with Socioeconomic and Health Service Capacity Factors: A Comparative Study of Nepal and China

DOI: <https://doi.org/10.1186/s12887-026-06897-1>

Context: Congenital heart disease (CHD) is the most common major congenital anomaly in Nepal, with a reported prevalence of 0.7%. Delayed diagnosis and limited paediatric cardiology services in many regions contribute to higher illness rates. This study compared CHD prevalence and its associations with socioeconomic conditions and health service capacity among school-age children in Nepal and two Chinese provinces.

Methodology: Cross-sectional screening studies were conducted in Nepal and two provinces of China (Yunnan Province and Xinjiang Uygur Autonomous Region) from June 2024 to May 2025. CHD screening consisted of cardiac auscultation followed by echocardiography for suspected or previously diagnosed cases. A total of 429,204 school-age children were screened. Ridge regression at the district and county level examined associations between socioeconomic and health service factors and CHD prevalence.

Key message: A total of 1,771 children were identified with CHD. Nepal had the highest CHD prevalence at 5.99 per 1,000 children, followed by Xinjiang (4.51 per 1,000) and Yunnan (3.42 per 1,000). Hospital bed density was significantly negatively correlated with CHD prevalence, suggesting that greater access to health services is associated with lower population-level CHD burden. Strengthening health service capacity in Nepal, particularly in under-resourced areas, is important for earlier detection and management of congenital heart disease.

Prevalence and Associated Risk Factors of Hypertension Among Adults in a Rural Community

DOI: <https://onlinelibrary.wiley.com/doi/full/10.1155/hsc/9954784>

Context: Hypertension is a major non-communicable disease risk factor, and its burden is rising in rural communities across Nepal. Rural populations often face limited access to screening and treatment services, making early identification of hypertension and its risk factors particularly important for planning community health responses.

Methodology: A cross-sectional study was conducted among adults in a rural community in Nepal. Blood pressure measurements and sociodemographic, lifestyle, and health data were collected through structured interviews and clinical assessments. Logistic regression analyses were used to identify factors independently associated with hypertension.

Key message: The study found a notable prevalence of hypertension in the rural community. Older age, male sex, alcohol consumption, higher body mass index, and physical inactivity were among the key factors associated with hypertension. These findings support the need for community-based blood pressure screening, lifestyle education, and early referral pathways in rural Nepal to reduce the burden of undetected and uncontrolled hypertension.

Understanding the Formulation of Non-Communicable Disease Policies in Nepal: A Qualitative Study

DOI: <https://doi.org/10.1093/heapol/czago48>

Context: Few policies in low-income and middle-income countries have focused specifically on the growing burden of non-communicable diseases. Health policy formulation plays a vital role in allocating resources for effective interventions. The process through which NCD policies were formulated in Nepal has been poorly documented.

Methodology: A qualitative case study approach was applied using Kingdon's multiple streams framework to explore how NCDs were recognised and prioritised, how policy alternatives were decided, and which contextual factors shaped the process. Semi-structured interviews were conducted with 12 key stakeholders, and relevant policy documents were analysed using framework analysis.

Key message: NCDs were gradually recognised and prioritised through a convergence of global and local evidence, sustained advocacy, and international commitments. Policymakers faced competing health priorities, donor preferences for communicable diseases, financial constraints, and the complex multi-sectoral nature of NCDs. The Package of Essential NCD Interventions (PEN) was adopted as a policy alternative, guided by global evidence and World Health Organization recommendations. Coordinated action by stakeholders helped bring problems, policies, and political will together, though addressing structural and financial barriers remains an ongoing challenge.

Effect of Body Mass Index on Health Related Quality of Life Among Adolescents in Government School of Pokhara

DOI: <https://doi.org/10.1186/s12982-026-01881-7>

Context: Underweight, overweight, and obesity are growing public health concerns among adolescents globally and in Nepal. Body mass index (BMI) can affect multiple aspects of health and wellbeing, including emotional, social, and school functioning. This study examined the effect of BMI on health-related quality of life among adolescents in secondary-level government schools in Pokhara.

Methodology: A total of 380 adolescents were selected from government secondary schools in Pokhara using multistage cluster sampling. Sociodemographic data were collected via a self-administered questionnaire. Health-related quality of life was measured using the Pediatric Quality of Life Generic Score Scale 4.0. BMI was calculated from anthropometric measurements of height and weight.

Key message: Most adolescents were of normal weight (83.4%), with 10% underweight and 6.6% overweight or obese. Emotional functioning was the subscale most affected in relation to quality of life. BMI was negatively and weakly correlated with school functioning, and this was statistically significant. Female adolescents, those with illiterate mothers, and those from single-parent households had significantly lower health-related quality of life. Schools and health programmes should pay particular attention to these groups when designing adolescent wellbeing interventions.

Perceived Stigma and Its Associated Factors Among People Living with HIV/AIDS in Bharatpur ART Center, Chitwan District, Nepal

DOI: <https://link.springer.com/article/10.1186/s12889-026-27535-6>

Context: HIV-related stigma is an attitude and belief that negatively affects people living with HIV. Stigma and discrimination harm the emotional wellbeing and mental health of people living with HIV/AIDS (PLHIV) and act as a significant barrier to HIV prevention, treatment, care, support, and social integration. Evidence on perceived stigma levels and associated factors from Nepal's Terai region is limited.

Methodology: A descriptive cross-sectional study was conducted among 348 people attending the Bharatpur ART Centre, Chitwan District, Nepal, using systematic sampling. Face-to-face interviews were conducted using a semi-structured tool for independent variables and the Bunn standard HIV Stigma Scale to measure perceived stigma across four domains: Public Attitudes Concern (PAC), Disclosure Concern (DC), Negative Self-Image (NSI), and Enacted Stigma (ES).

Key message: Overall, 58.9% of participants reported high perceived stigma. Negative self-image was the most prevalent domain (65.2%), followed by disclosure concern (56.9%), public attitude concern (53.7%), and enacted stigma (49.7%). Age, place of residence, ethnicity, education level, reason for HIV testing, experiences of exclusion, feelings of hopelessness, and depression were all significantly associated with higher perceived stigma. Stigma-reduction programmes and integration of mental health support within HIV care services are urgently needed.

We thank you all for joining our initiative to promote evidence-informed policymaking and promote public awareness of the non-communicable disease (NCDs) and related issues in Nepal- we are committed to staying up to date with the latest NCD research in Nepal.

This issue covers a summary of scientific publications on NCDs in Nepal for the month of April 2026.

Should you have colleagues who'd like to receive these updates via email (ncdwatchnepal@gmail.com)

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Publications



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