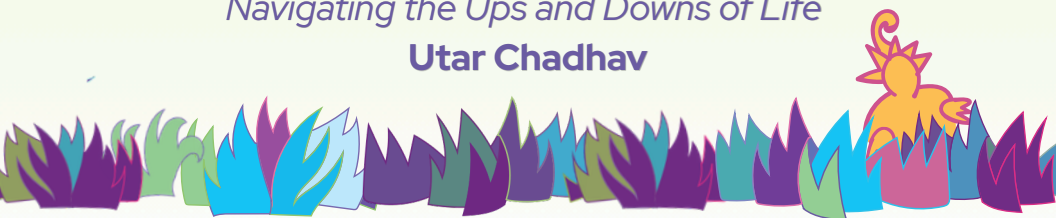


सगँ-सगैः HARM REDUCTION AS A CARE PRACTICE

HARM REDUCTION · SUBSTANCE USE · COMMUNITY CARE

Navigating the Ups and Downs of Life

Utar Chadhav



Utar Chadhav, 2026

Gathered, Written, and Edited by: raji, sj

Design & Production: sj

Foreword: Gauri Nepali

Utar Chadhav's Original Art

Sober Curious Zine by: manantuna

Utar Chadhav's Logo & Enchanted Forest Art by: Supriya

Manandhar

Supported by: Urgent Action Fund Asia and Pacific, Resourcing
Resilience Grants

All rights reserved by Utar Chadhav.

www.utarchadhav.com

ACKNOWLEDGEMENT

We would like to begin this book by remembering the Black, Latinx, Muslim, Indigenous and Queer communities that started HIV/AIDS groups for structurally vulnerable people at risk for HIV and harms of substance use and the earliest efforts for harm reduction efforts done in the Netherlands, both started in the 1980s. It would not have been possible to work around harm reduction without the guidance of those that have worked on these practices in their own context all over the world. This body of work has been built on the work and labour of queer people, community organizers and leaders, and health practitioners that came before us. We are grateful for all those that have lovingly built on the praxis of harm reduction.

We also want to thank Utar Chadhav's core team for building on this work together. Our warmest appreciation to Aaja cafe for hosting Utar Chadhav and the wonderful staff there who help us manage the space and cook amazing food. This chapbook was built on a survey conducted by Utar Chadhav and the in-depth interviews that followed. We would like to express our heartfelt gratitude to all those who have accompanied us in this journey by helping to shape the survey, by spreading the word in their circles, and especially to those that have filled out the survey, and those who opened up and shared their stories

with us in the interviews. We are eternally grateful to
your contributions.

This work wouldn't have been possible without the
thriving and vibrant queer people of Kathmandu. We
see you, we love you and we feel a tremendous
amount of privilege and honor to co-exist in our
queer journeys together.

A special thank you to Urgent Action Fund Asia and
Pacific, Resourcing Resilience Grants for helping us
continue this important work.

Utar Chadhav,
Trucks of love



GROUNDING

Dear friend,

As we deep dive into this chapbook, we would like to invite you to Slow Your Breathing. We will guide you through the process. Breathing can help us ground when things are not as we expect them to be.

Let's start by focusing on our nose. We will be taking a moment to slow our breath. Slowly, we will try breathing deeply into the abdomen (belly), not just the chest. Inhale slowly for a count of 4 seconds, then exhale for 8 seconds, making the exhale longer than the inhale. Please continue this breathing pattern for 1-2 minutes. The longer exhale helps activate your body's natural relaxation response, promoting a sense of calm and soothing your nervous system.

Let us now take a moment to imagine an expansive view of what community means. In a comfortable position, imagine the faces of beings around you. As we move through the world, we brush past many, while walking, while on a local bus, on a ride share. Everyone's life is influenced by each other and influenced by the practices we participate in. As we

evoke harm reduction to be a queer praxis, that very much means that it includes all of us. Because we all deserve to live a dignified life.

The chapbook that you are unfolding is also a process of self discovery so please go slow, do it with people, debrief, and if something feels difficult, please pause.

Please refer back to this page whenever/if it feels overwhelming going through the pages.

Please remember to breathe.

Your loving friend.





मलाई अझै सम्झना छ, बाल्यकालमा छिमेकी काकीले 'धाराको पानीको भाँडा नछोउ' भनेको क्षण, जसले मलाई आफू कथित 'अछूत' भएको सामाजिक यथार्थसँग परिचित गरायो । 'छोरी मान्छे भएर केटाहरुसँग खेलन जानुहुन्न' भन्ने जस्ता वाक्यले 'महिला' हुनुको अर्को परिचय थाह गरायो । अलि ठूलो भएपछि अन्तरजातीय विवाह गरेको एक युवा जोडीलाई जुताको माला लगाएर गाँउबाट बहिष्कार गरेको दृश्यबाट त्रसित मेरो मनलाई आफ्नै प्रेमाकर्षणको स्वतन्त्रताबारे नसोच्न दबाब बनायो । समाजले बनाएका यस्ता थुप्रै नियमहरु अनि देखाएका तस्वीरहरु जसले मेरो दलित क्वेयरको जीवन भोगाईहरुलाई आकार दिएको छ । जसले मेरो शरीरमात्र होइन, मेरो मनमाथि पनि कब्जा गरेको छ र समाजलाई 'स्वीकारयोग्य व्यवहार' गर्न दिनरात दबावमा राखेको छ ।

आफ्नै किशोरावस्थालाई फर्केर हेर्दा लाग्छ, यस्तो 'त्रासमय समय'मा आफ्ना डरहरुलाई खुलेर अभिव्यक्त गर्ने कुनै समुह वा engage हुने कुनै वातावरण तथा स्थान वा 'सगैँसगैँ: Harm Reduction as a care practice' जस्तै Chapbook भएको भए ती डरहरुबाट हुने हानी धेरै कम हुन सक्थ्यो । मेरा धेरै समकालीन क्वेयर साथीहरु विभिन्न प्रकारका तनाव, मानसिक दबाव, असुरक्षा र जोखिमपूर्ण व्यवहारसँग जुधिरहेका छन् । यस्तो अवस्थामा यो Chapbook ले उनीहरुलाई दोषबोध थप्ने नभई, राहत दिने विश्वास मैले राखेको छु । यसले क्वेयर व्यक्तिहरुलाई आफुलाई बुझ्ने, आफ्ना सम्बन्धहरुलाई नियाल्ने, आफ्ना सीमाहरु पहिचान गर्ने र आफू तथा अरुप्रति हेरचाहका अभ्यासहरु विकास गर्ने अवसर प्रदान गर्छ ।

नेपाल र दक्षिण एसिया (आजको सन्दर्भमा सारा विश्वमा नै) को सन्दर्भमा जातजाती, लैंगिक भूमिका तथा अवस्था, धर्म सम्प्रदाय, समुदाय, परिवार, शारीरिक अवस्था, आर्थिक अवस्था आदि जस्ता संरचनाले कुनै एक व्यक्तिको सामाजिक हैसियत निर्माण गर्दछ । यी संरचनाले केही व्यक्ति, समुदायलाई सुरक्षा र विशेषाधिकार प्रदान गर्छ भने अरुलाई बहिष्कार, नियन्त्रण, हिंसा र किनाराकृत लगाउने काम गर्छ । यसरी संरचनागत विभेदमा परेका मानिसहरु हिंसाको उच्च जोखिममा रहेका हुन्छन् ।



नेपालको हकमा क्वेयर, ट्रान्स, महिला, दलित, अपांगता भएका व्यक्ति, आदिवासी जनजाती, तथा अन्य सीमान्तकृत समुदायहरु यस्तै विविध संरचनागत भेदभावको सिकार भईरहेको समुह हुन् । सन् २०२२ मा UN Women Nepal को सहयोगमा Blue Diamond Society (BDS) र अन्य संस्थाको सहकार्यमा नेपालको सातै प्रदेशमा गरेको एक अध्ययनको सर्वेक्षणले ११८१ LGBTQIAP+ व्यक्तिहरुमध्ये ८१ प्रतिशतले आफ्नो जीवनकालमा एकपटक SOGIESC आधारित हिंसाको अनुभव गरेको थिए जसमा भावनात्मक हिंसा सबैभन्दा बढी ७१ प्रतिशत, यौन हिंसा ४९ प्रतिशत र आर्थिक हिंसा ४० प्रतिशत रहेको थियो । अध्ययनले जोखिम सबैका लागि समान नभएको र जात-जातीयता, अपांगता, न्युन आय तथा शैक्षिक स्थितीले हिंसाको जोखिमलाई बढाएको निचोड निकालेको छ ।

हामी यस्तो संसारमा छौं, जहाँ सीमान्तकृत समुदायका व्यक्तिहरुका शरीर, चाहना, पहिचान, सम्बन्ध र आवाजहरु निरन्तर रूपले नियन्त्रण, निगरानी र हिंसाका घेरामा राखिन्छन् । यस्तो अवस्थामा हामीले हरेक दिन हाम्रो आफ्नो अस्तित्वलाई अस्वीकार गर्ने, किनारामा धकेल्ने संरचनाहरूसँग जुध्नु परिरहेको हुन्छ । यो संघर्षमा तनाव, आघात, शोक, थकान वा बर्नआउट स्वभावतः हुनजान्छ र यसको प्रभावलाई कम गर्न मानिसले विभिन्न उपाय खोज्नु थाल्दछन् । तनाव व्यवस्थापन तथा भावनात्मक राहतका लागि मदिरा तथा लागुपदार्थ प्रयोग गर्ने, असुरक्षित यौनसम्बन्ध बनाउने, आत्मक्षतिका कार्य गर्ने आदि जस्ता जोखिमपूर्ण व्यवहारमा संलग्न हुन पुग्दछन् ।

क्षति दुर्घटनावश आउने कुरा होइन, यो त हाम्रो समाजको उत्पीडनकारी संरचनाले निर्माण गर्ने कुरा हो । जातीय, लैंगिक तथा यौनिक तहगत प्रणालीहरु, पितृसत्ता, विपरितलैंगिकतामा आधारित सामाजिक मान्यता, वर्गीय असमानता तथा सक्षमवादी संरचनाहरुले सीमान्तकृत व्यक्तिहरुका लागि हिंसाको विउ रोपेका छन् । जसले निरन्तर समाजमा यी समुहहरुले अस्वीकार्यता, बहिष्करण र अपमानको सामना गर्नुपरेको छ । यस किताबले जोखिमपूर्ण व्यवहारमा संलग्न हुनु र यसले नकारात्मक प्रभाव पार्नुलाई प्रणालीगत सामाजिक संरचनाले सिर्जना गरेको व्यवहारको रूपमा हेरेको छ । जुन यस किताबको सबैभन्दा सुन्दर पक्ष हो ।



यस Chapbook ले सामाजिक न्यायको दृष्टिकोणमा विपरितलिंगवादमा आधारित सामाजिक भाष्यहरुलाई चुनौती दिएको छ । यसले हामीलाई सम्झाउँछ कि हानी न्यूनीकरण स्वास्थ्यको अवधारणा मात्र नभएर सामाजिक न्यायको अभ्यास पनि हो । यसले मानिसहरुलाई उनीहरु जहाँ छन् त्यहीँबाट बुझ्ने, उनीहरुको गरिमाको सम्मान गर्ने र सजाय वा न्यायअन्यायको निर्णयको सट्टा सुरक्षा, आनन्द, सहयोग तथा हेरचाह उपलब्ध गराउने विधिलाई प्रस्तुत गरेको छ ।

हाम्रो समाजले अक्सर जोखिमपूर्ण व्यवहार वा लतमा परेका व्यक्तिहरुलाई नैतिक पाठ ज्यादा बाड्ने र यसको क्षतिबारे उसलाई डर, नियन्त्रण वा बन्धनमा राखी त्यस्ता व्यवहार जबर्जस्ती छुटाउने प्रयास गरिन्छ । तर यस पुस्तिकाले जोखिमपूर्ण व्यवहारलाई व्यक्तिगत कमजोरी, नैतिक असफलता वा अनुशासनहीनताको रूपमा नहेरी सामाजिक बहिष्करणले मानिसको व्यवहारलाई कसरी प्रभावित गर्छ भन्ने कुरालाई गम्भीरतापूर्वक विचार गरेको छ । 'कसैले लागू पदार्थ किन प्रयोग गर्यो?' भन्ने प्रश्नमा मात्र होइन 'कस्ता सामाजिक राजनीतिक र आर्थिक अवस्थाहरुले मानिसहरुलाई विशेष प्रकारका सामना गर्ने उपायहरु रोज्न बाध्य पार्छन्?' 'किन केही समुदायहरु निरन्तर रूपमा बढी थकित, बढी एकलिकेका र जोखिममा परिरहेको हुन्छन्?' र 'किन हेरचाह तथा सहयोगका संरचनाहरु सबैका लागि समान रूपमा उपलब्ध छैनन्?' भन्ने जस्ता प्रश्नप्रति पनि सचेततापूर्वक सोच (Thinking Intentionally) र संवाद गर्न प्रेरित गर्दछ । यस किताबले हानी हुनुअघि सुरक्षाका जानकारी मात्र दिदैन, मानसिक स्वास्थ्य चुनौतीहरु, मदिरा तथा पदार्थ प्रयोगसँग सम्बन्धित समस्याहरुलाई सकारात्मक सामनाको अभ्यासका लागि संवाद गर्दछ ।

त्यसैले सामुहिक रूपमा हानी न्यूनीकरणका लागि हेरचाह पुस्तिका (Chapbook) नेपालमा क्वेयर (अन्य सीमान्तकृत समुदायका व्यक्तिका लागि पनि) समुदायका लागि अत्यन्त महत्वपूर्ण र विशिष्ट दस्तावेज हो । यसले मानिसलाई के गर्ने, के नगर्ने भनेर निर्देशन दिंदैन । यसले कुनै व्यक्तिको व्यवहारलाई नैतिक रूपमा सही वा गलत भनेर निर्णय पनि गर्दैन । बरु, यसले हामीलाई आफ्नो बानी, व्यवहार, आत्मसम्मान सम्बन्ध, ईच्छाचाहना, जोखिम र भावनाहरुलाई ध्यानपूर्वक अवलोकन गर्न, महसुस गर्न, समीक्षा गर्न र चर्माभित्त आत्मन्तर्ण गर्दछ । यस Chapbook उत्तरभन्दा बढी प्रश्नहरुको माध्यमबाट आत्मचिन्तनको ढोका खोल्ने प्रयास हो ।

सगैँ-सगैँ:

HARM REDUCTION
AS
A CARE PRACTICE



यस पुस्तकको केन्द्रमा हानी न्यूनीकरण र हेरचाह दुई विषयलाई पुरकको रूपमा मुख्य केन्द्रमा राखिएको छ । मादक पदार्थ तथा लागुपदार्थ प्रयोग, यौनसम्बन्धहरु, यौनजन्य संक्रमणहरु, आनन्द, आदि जस्ता विषयलाई कसरी हेरचाह गरी हानी कम गर्न सकिन्छ भनेर जोखिम सामना गर्ने हेरचाह विधिहरुमाथि पुस्तिकाको सरल तर गम्भिर चर्चा रहेको छ । यस किताबमा विषयवस्तु मात्र नभएर मित्रता छ, समुदाय छ, निको हुने प्रकृया छ, र मानिसलाई सुरक्षित रूपमा बाँच्नका लागि चाहिने सामुहिक जिम्मेवारी रहेको छ ।

यस पुस्तकका लेखकद्वय राजी र एसजेले निकै सोचपूर्ण तरिकाले यो किताब तयार पार्नुभएको छ । उहाँहरुले यस किताबमार्फत समुदायसँग निरन्तर संवाद गर्नुभएको छ । हानी न्यूनीकरणका गफगाफहरुको आयोजना गर्नुभएको छ, अडियो तथा भिजुअल सामग्रीहरु निर्माण गर्नुभएको छ, अनुसन्धान गर्नुभएको छ, र समुदायको अनुभव तथा आवश्यकतालाई केन्द्रमा राख्दै ज्ञान उत्पादन गर्नुभएको छ । यहि सामुहिक सिकाई, अनुसन्धान र संवादको यात्राबाट यो पुस्तिका जन्मिएको हो । अतः यो समुदायको अनुभव, प्रश्न, संघर्ष र आशाको साझा अभिव्यक्ति पनि हो ।

यस पुस्तिकालाई अर्थपूर्ण बनाउने कुरा भनेको यो स्वयंम क्वेयर व्यक्तिहरुको आवाज र अनुभवबाट जन्मिएको छ । सर्वेक्षण, अन्तर्वार्ता तथा गहन संवादहरुमा सहभागी भएका क्वेयर व्यक्तिहरुका साझा अनुभव, आत्मचिन्तन र अन्तर्दृष्टिहरुमा आधारित यस पुस्तकले समुदायमित्र ज्ञान र अनुभवलाई पनि अभिलेखीकरण गरेको छ । यसले जीवनको अनिश्चितताबीच पनि क्वेयर व्यक्तिहरु कसरी एकअर्काको हेरचाह गर्नसक्छन्, खुशी सिर्जना गर्न सक्छन् र स्वास्थ्य जीवनका नयाँ संभावनाहरुलाई कल्पना गर्न सक्छन् भन्ने कुरालाई विमर्शमा ल्याएको छ ।

म तपाईंहरुलाई यो पुस्तक व्यक्तिगत रूपमा मात्र नभई सामुहिक रूपमा पनि पढ्न अनुरोध गर्दछु । यी पानाहरु जिज्ञासा, सहानुभूति र खुल्लापनका साथ साथीहरुसँग पढ्नुहोस्, सहयात्रीहरुसँग सेयर गर्नुहोस्, प्रियजनहरुसँग छलफल गर्नुहोस् र समुदायका सदस्यहरुसँग अभ्यास गर्नुहोस् । र संभवतः यहि प्रकृत्यामार्फत् नै हानी न्यूनीकरण र सामुहिक हेरचाहतर्फको पुस्तिकाको उद्देश्य पुरा गर्ने सबैभन्दा महत्वपूर्ण र पहिलो संवादको कदम हुनेछ ।

सगैँ-सगैँ:

HARM REDUCTION
AS
A CARE PRACTICE

गौरी नेपाली
जुन २३, २०२६



HOW TO USE THIS CHAPBOOK?

Hi friend,

We consider harm reduction as a journey, therefore this chapbook is intended as a “tour guide” and “map” in your and your community’s journey.

A map that will be there with you creating different spaces to loiter through various harm reduction practices. This is intended for activists and community members, new and seasoned, who are looking to make collective spaces to come together and take that collective sigh together. If or whenever possible, invite friends and groups to read this chapbook together. Feel free to use this as a resource to start conversations.

You don’t have to read this workbook linearly. If you feel like you are struggling to get through the book, come back to the content section and pick something that stands out to you or interests you further. As you explore the chapbook more, our hope is that you will take on some of the practices that resonated with you and give it space into your daily practices as you see fit. Sit with what the information brings in you; a thought, feeling, or a sensation. Explore what it means for you to include harm reduction in different aspects of your life.

Make these practices your own. Our intention is that with the help of the chapbook we create resonance and connection. We resoundingly want to say that you are not alone.

At any time you feel you need some support or pocket/s
of pause, please go to the slow breathing at the
beginning to engage with the practice of grounding.
This chapbook exists as a gentle reminder and nudge,
not to judge you or tell you what to do or shame you for
what you're not doing.

Also, go at your own pace. It is very common to feel
discomfort with certain information in this chapbook. If
you are coming across harm reduction as a practice for
the first time, some portions might feel uncomfortable
to sit with. That's alright, we understand how that might
feel. For example, asking someone to safely use drugs
might feel like we are encouraging usage of drugs. What
we are attempting to do is not to prescribe actions as
good or bad, but instead keep people as safe as possible
at all times. At the core of our work, we operate with
wanting people to stay alive, regardless of what it takes
for them to stay longer. Contradictory and complex
information and ideas like these may sit uncomfortably
with us, but take your time and approach it with
curiosity. Notice what that feels like in your body. It's
okay to take breaks and check in with yourself.

As you move through this chapbook and come across
interesting things, share it widely. And come together to
practice. There can be so much joy in learning and self
discovery!

WHAT IS THIS CHAPBOOK ABOUT?

This book is for everyone to read because it is all of our responsibility to be invested in the safety of queer individuals, who are at the greatest risk of violence, originating both offline and online and affecting all aspects of their lives. Individuals from marginalized communities (esp. in terms of their sex characteristics, sexual and romantic orientation, gender identity and expression, ability status, caste, class, religion, ethnicity, etc.) living through various forms of violence may be singled out and further risk may fall upon them affecting their overall wellbeing.

Researches regarding young and queer peoples has consistently documented that these populations experience a high burden of mental disorders, substance use disorders, and suicidal behaviors. If and when you feel unsafe or seem to struggle, it is because the social systems and structures around us are made to prioritize mono-cis-hetero-amato-normative and compulsory able-bodiedness. It feels like we are in a constant struggle for our rights and feel constantly overwhelmed as we live our lives because we are up against a very organized anti-rights movement. This causes our bodies and psyche to undergo constant disorientation. However, the ways in which we then turn to for coping are then labeled as immoral, deviant, unhealthy, harmful, disorderly, so on and so forth without any regards to why and how our lives take such turns.



In this socio-political state of the world, to take care of our bodies and our communities then is itself an act of resistance. However, you are not alone. You do not have to go through this on your own.



This chapbook is meant to be a beginning of this journey of harm reduction or a continuation depending on where you are, and where your community and loved ones are. It came to be through an extensive survey filled by 30+ queer people and its information was further supported by the many in-depth interviews we conducted. This chapbook explicitly names the conversations many of us needed earlier in our lives and hopes to bring about the practice of having stigma free, open conversations with one another. We are writing to you, as we would to a friend who we deeply care for, because we care and astutely believe that we are capable of creating safer ways of being ourselves in this world. We are writing this to you in all of our honesty, vulnerability and are coming from a place of love and care.



If you are reading this alone, think of individuals who you would like to be a part of this journey to mitigate harm and center our lived experiences. We recommend you engage with this book as a collective.



Made for queer people, by queer people.



CONTENT

Credits	i
Acknowledgment	ii
Grounding	iv
Foreword	vi
How to Use This Chapbook	x
What is this book about?	xii
Abbreviations	1
What even is harm reduction?	2
Why Queer people, why Kathmandu?	4
Let's talk about Substances	6
Some questions to sit with	8
Sober Curiosity	9
Safer sex is SEXY	11
Protection Basics	13
HIV Prevention + Treatment	14
All about HPV	16
Vaccines	18
Testing + Knowing your status	19
Chemsex + Intimacy	20
Talking About Consent	22
Pleasure is not the problem	24
Accountability as a love language	25
Intervention	26
Who is my community?	28
Findings	31
We're here, we're queer, we'll never disappear	34
Thinking Intentionally	36
Gentle Reminders	37
What are you already doing?	40
Way Forward	41
Resources	43

ABBREVIATIONS

LGBTQIAP+ - Lesbian, Gay, Transgender, Queer, Intersex, Aromantic, Asexual and Agender, Panromantic/Pansexual and the "+" representing all other identities; also synonymously used as queer in this Chapbook

SOGIESC - Sexual (and Romantic)Orientation, Gender Identity, Gender Expression, and Sex Characteristics

U=U - Undetectable = Untransmittable

HIV - Human Immunodeficiency Virus

AIDS - Acquired Immune Deficiency Syndrome

HPV - Human Papilloma Virus





WHAT EVEN IS HARM REDUCTION?

Harm reduction begins with a simple idea: people have engaged in high risk behaviours (such as using tobacco, alcohol or other substances, engaging in sexual behaviour, intentional self harm, disordered eating patterns, etc.), people have always done so and will continue to do so, and they deserve to be safer while doing so; without judgment, without shame, without conditions.

Harm reduction usually refers to a range of intentional practices that aims to reduce the harm or negative impact of harm prone behaviour by centering the experiences of the persons engaging in them. It has been and is used to encourage healthier behaviors that can decrease the negative consequences that come with engaging in behaviours that are harmful and may be both legal and illegal. Harm reduction believes that people can be safe without being required to practice abstinence, that people can make positive changes to protect and care for themselves.

- # IT IS NOT ABOUT TELLING ONE TO STOP. IT IS NOT ABOUT WILLPOWER.
- # IT IS NOT ABOUT "GOOD CHOICES" AND "BAD CHOICES."
- # IT IS NOT ABOUT JUDGING THE DECISIONS PEOPLE MAKE.
- # IT SHOULD BE A DISCUSSION, AND NEVER A DIRECTIVE.

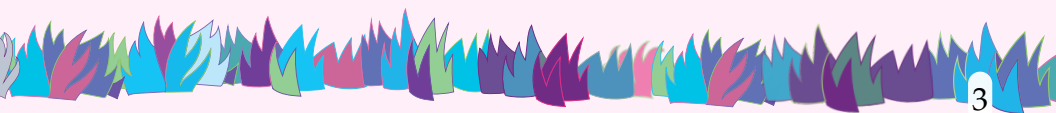
Harm reduction starts with observing, listening, and talking.

The first step can look like acknowledging your know-hows of how to keep yourself safe.

It also asks a harder question: why are some people more at risk than others? The answer is never just about individual choices. It is about who has housing, who has healthcare, who has community, and who gets policed, pathologized, and punished.

BEYOND MORALISM - BEYOND ABSTINENCE

#COMMUNITYFIRST



WHY QUEER PEOPLE. WHY KATHMANDU?

The simplest answer is: because this is where we are.

We are queer people writing to other queer people. We are not approaching this work as distant observers, researchers looking in from the outside, or institutions trying to prescribe solutions. We are people whose lives have also been shaped by the same questions, contradictions, risks, pleasures, losses, and possibilities that move through queer communities.

We know what it feels like to search for belonging. We know what it feels like to negotiate safety in public and private spaces, to assess risk before holding a partner's hand, to lose community and find it again, to build chosen families, to navigate burnout, loneliness, joy, desire, heartbreak, uncertainty, and hope.

Many of the conversations in this chapbook are conversations we wished someone had with us earlier. This work is not neutral. It is rooted in lived experience.

We also begin with queer people because harm is not distributed equally.

Queer people often live at the intersections of multiple forms of marginalization. Alongside queerphobia and transphobia, many of us navigate caste oppression, ableism, sexism, xenophobia, islamophobia, religious discrimination, class inequality, anti-sex worker stigma, HIV stigma, migration, displacement, and the growing impacts of climate crises.

The consequences of these systems are not abstract. They shape who has access to housing, healthcare, employment, education, family support, legal protection, and community. They shape who feels safe leaving the house, who can be visibly themselves, and who must constantly negotiate visibility and survival.

When people live under sustained stress, exclusion, violence, and uncertainty, they develop ways of coping. Some of those coping mechanisms are celebrated. Some are pathologized. Some are criminalized.

Harm reduction asks us to move beyond judging the coping mechanism and instead ask what conditions made it necessary in the first place. Our varying ways of coping are rational responses to structural inequalities. It is not a failure of character. And it deserves a rational, compassionate response and not punishment, ostracization, guilt tripping.

~

Kathmandu occupies a unique place in queer life in Nepal.

For many queer people across the country, Kathmandu represents possibility. People arrive here for work, education, transition-related care, organizing, community, anonymity, survival, freedom, and sometimes simply the chance to breathe a little easier. For some, it is the first place where they meet another queer person as well as it is where a chosen family becomes possible.

The city has become a gathering point for activists, artists, students, workers, migrants, organizers, and dreamers. It is where many queer movements have grown, where friendships are formed, where relationships begin, where community events happen, and where people come looking for versions of life that may not yet be available elsewhere.

Yet Kathmandu is not a queer utopia. The city is expensive. The pace is fast. Housing is precarious. Work is unstable. Burnout is common. Community spaces are limited. Safety is never guaranteed. Many queer people arrive carrying histories of rejection, violence, isolation, and loss. Even after finding community, the pressures of survival do not disappear.

This chapbook is also rooted in Kathmandu because knowledge emerges from this place. The realities of queer life in Nepal are shaped by our languages, our cultures, our caste systems, our family structures, our migration patterns, our economies, and our political histories. Many harm reduction resources available online are produced in Europe or North America. While they offer valuable information, they cannot fully account for what it means to navigate substances, intimacy, healthcare, policing, housing, community care, or queer existence in Kathmandu.

Kathmandu also holds an important place in Nepal's queer history. Many of the country's queer movements, legal advocacy efforts, HIV responses, community organizations, and spaces for gathering have grown from here. For many of us, Kathmandu was where we first found language for our experiences, met other queer people, accessed support, or imagined a future that felt possible. While queer life exists everywhere across Nepal, Kathmandu has become a place where many of our stories intersect.

We know that Kathmandu does not represent all queer experiences. This chapbook begins here because this is where we are, where our conversations took place, and where much of the community knowledge that shaped these pages comes from. Starting here is not about limiting the conversation, but about beginning from a place we know and love.

We wanted something that spoke from here.
Something that understood local realities while also

acknowledging that queer life in Kathmandu carries its own textures, rhythms, risks, pleasures, and possibilities.

Finally, we begin here because care starts with proximity.

Harm reduction teaches us to start where we are, not where we wish we were. We cannot write for every queer person everywhere. We cannot capture every experience.

But we can begin with the

people around us, the conversations we have had, the stories we have been entrusted with, and finally, the communities that have shaped us.

Kathmandu is where we learned many of these lessons.

Queer people are who taught us most of them. This chapbook is our attempt to honor that knowledge. It is made with the hope that we can continue keeping each other alive, safe, joyful, and connected.

~

Dear friend, as we talk more on harm reduction,

**WE FEEL THAT IT IS IMPORTANT TO NAME:
Performance, systemic injustice, masking,
isolation, stigma, lack of affirming spaces,
police and legal violence.**

**WHAT WE HOPE TO BUILD ON:
Community knowledge, peer care, safer use,
and the right to pleasure.**

LET'S TALK ABOUT SUBSTANCES.

The same principles apply everywhere. Different substances come with different textures of risk, pleasure, and stigma. Here is a quick map.

ALCOHOL

Alcohol is the most socially accepted substance in most queer spaces, especially given its legal status in comparison to other substances. It is at almost every party, maximum gatherings, and sometimes most conversations. That normalcy can make it hard to notice when it stops being fun and starts being something else. Being legally available doesn't mean that it doesn't harm the body.

NICOTINE

Most commonly available and used substance. Nicotine is available in many forms and is marketed towards young people. It is important to understand the long term health implications of smoking in which our lungs face more wear and tear especially coupled with the polluted air we are forced to breathe in the valley.

VAPE

Rapidly increased use and evolving impact on users. Its fun flavors and notoriously easy habit forming nature often keeps us from noticing the frequency of use and how it affects our mood.

WEED

Still criminalized in Nepal but seen in a lot of queer spaces. It's worth knowing how it interacts with your mental health and medications especially antidepressants and mood stabilizers. Using substances that are sold illegally may come with severe legal repercussions, if caught. Please stay at a safe and secure place when engaging. Given that there is no regulation, there is a chance that the weed you consume could be laced/adulterated.

STIMULANTS & CHEMSEX

MDMA, meth, GHB, cocaine. Often used in sexual contexts because they lower inhibitions around bodies that have been sites of shame. You deserve pleasure. You also deserve to know what you are taking and how your body will react to it.

POLYDRUG USE + MEDICATIONS

If you are on PrEP, ARVs, antidepressants, or mood stabilizers, interactions matter! tripsit.me is a free tool that lets you check drug interactions without judgment.

INJECTING

Use your own sterile equipment EVERY TIME. Shared needles risk hepatitis C and HIV. If you MUST re-use a needle, keep a set of words or markings on it so you know it's yours. If you MUST share a needle: first rinse the syringe with sterile water, then rinse the syringe with bleach, followed by a final rinse again with (new) sterile water.

SOME QUESTIONS TO SIT WITH:

The following questions are modeled around the use of substances. However, they can be used for any behaviour/pattern/coping mechanism that are relevant in our personal lives and no longer serve us or simply just to observe. Feel free to use this as a resource to have conversations with your loved ones. Remember, we ask ourselves these questions not to judge ourselves, just to notice.

- Am I using substances more than I planned to, more often than I planned?
- Are substances helping me show up or helping me not have to?
- Have I been experiencing cravings for substances? How often do I feel the craving or need? When did I first notice feeling this craving?
- How much of my time do I spend trying to obtain, use, or recover from substances?
- What makes me engage with substances? What leads me to it?
- How do I feel the day after use of any substance, not just physically but emotionally?
- What is my primary motive for using substances usually? To celebrate/relax/have fun/cope/numb things? Are there any alternate things for me to do for the same effect?
- Are there things I would want to do sober that I currently only feel able to do when I am under the influence?
- Am I using substances to self-medicate?

SOBER CURIOSITY

Sober curiosity is not sobriety. It's just asking honest questions about your relationship with substances without having to arrive at any particular answer. It certainly can be a portal to what sobriety can feel like.

All at your pace.

Curiosity being the key term here, if you and your friends, partner(s) want to design or curate space and time to be sober, there are intentional activities you can plan together.

Here are certain things to practice when abstinence feels like a too far away goal:

#One of the most widely practiced sober curios portals is taking a month off of all substances and seeing how it feels in the body. Make this a shared activity if you and folks have felt that most activities have revolved around a substance or two.

- This is a reminder to engage in conversation about what having fun, feeling joy and pleasure mean to us and our bodies.

Our bodies have a limit. And to build habits that help us sustain our bodies and relationships, this practice of taking a month off together is a good one. And your liver will definitely be grateful!



Create a ritual to give thanks. Take a pause, to give thanks. All are ways to slow our consumption, as we especially live in a world that pressures us to consume more.

- Substances like alcohol and marijuana have a rich history of ritual in indigenous communities. They are woven into sacred practices. However in the world we currently inhabit, the practices en masse are devoid of rituals and understanding that create an embodied experience.

Asking ourselves, why we need substances to celebrate a win, a birthday, just to make space for ritual might help slow down and make the practice more intentional.

**TO START THIS JOURNEY, TAKE A LOOK AT OUR
SOBER CURIOUS ZINE!**

SAFER SEX IS SEXY.

Intimacy is one of the places where harm reduction gets most personal and where the stakes are highest. For queer people especially, sexual health has been entangled with shame, surveillance, and stigma for a long time. We are reclaiming it as something more profound: care, curiosity, and community.

Safer sex is not about fear. It is about knowing what you are doing, choosing to do it, and giving your body and your partner's body respect.

It also doesn't have to be clinical. Talking about protection can be part of intimacy, not an interruption or spectralization of it.

- - -



ORIENTING TOWARDS OUR BODY – A PAUSE

If the fast pace of attraction feels disorienting, pausing and learning about one another, is harm reduction and it is ~sexy~!

Take a moment for yourself and sit or lie down in a comfortable position. Start by feeling the clothing on your skin, the air around you and notice what the sensation feels for your skin. And breathe into it...

If you want to feel more, take your hand, and gently caress your knees and thighs, the sides of your body, your lower back. Notice if there is a negotiation happening of how much, how little, how long you want to be soothed.

With some music in the background, you can match the rhythm and move your hands on your body.

Once you feel ready, you can invite a partner you are intimate with or start the journey with.

Pick a safe word (not "safe word"!), settle into slowing down.

Enjoy learning about yourself and your partner(s)' body.



PROTECTION BASICS

CONDOMS

The most widely available barrier. Effective for HIV and most STIs when used correctly — meaning the right size, the right way, every time.

For penetrative and anal sex: take your time. Our muscles take cues from our breathing to relax. Acquaint yourself with cues of arousal, relaxation, breathing of your own body and your partners'. Always use extra lubrication to prevent tearing, which increases transmission risk.

DENTAL DAMS + FINGER COTS

Barriers for oral sex on a vulva or anus. Often hard to find; a condom cut open works too. Rarely talked about, frequently needed. You can also make your own from a latex glove.

LUBE — ALWAYS

Water-based or silicone-based lube with latex condoms. Oil-based lubes degrade latex and increase the chance of the condom breaking.

More lube = less friction = less tearing = less risk

There is rarely ever such a thing as too much lube.

DIGITAL SAFETY

Use applications with end to end encryptions when sending pictures and/or videos of yourself. You can always remove or avoid markers on your body that might lead to your identification. As privacy rights are being taken away from us, figure out ways together to be safer online.

HIV PREVENTION + TREATMENT PREP, PEP, AND U=U.

PREP — PRE-EXPOSURE PROPHYLAXIS.

A daily pill (or on-demand dosing) that is highly effective at preventing HIV. If you are sexually active with multiple partners or have a partner living with HIV, ask about PrEP.

PEP — POST-EXPOSURE PROPHYLAXIS.

Taken after a potential HIV exposure — must be started within 72 hours. Not a substitute for PrEP but critical to know about. Go to a clinic as soon as possible if you think you've been exposed.

U=U: UNDETECTABLE = UNTRANSMITTABLE.

A person living with HIV who is on treatment and has an undetectable viral load cannot transmit HIV sexually. This is not a technicality — it is science, and it matters for how we talk about HIV.

HIV stigma costs lives. Knowing the facts — and sharing them — is part of harm reduction too.

Called the “gay” disease, the institutional silence regarding HIV AIDS led to thousands of queer lives being lost. Harm reduction activists, queer black feminists, disability justice workers who stepped up to bridge the gap knowingly created by institutions. *How to Have Sex in an Epidemic*, one of the first community-based safer sex guides, was co-authored by Michael Callen — a New

York musician and writer who had been diagnosed in 1982 and went on to become a central figure in AIDS activism and a vocal advocate for the rights of people living with AIDS¹.

Throughout the height of the epidemic and beyond, queer communities have practiced harm reduction while actively grieving for the loss of their loved ones. They participated in community work as well as challenging the status quo, doing civil disobedience demonstrations and always centering harm reduction by emphasizing needle exchange, dignified and equitable access to resources for all especially folks who use drugs as well as sex workers. Many of the organizers themselves were sex workers.

As we look back to harm reduction lineage and give thanks lets also do our part in educating ourselves on these issues, to understand sex work with nuance and use dignified language. Our practices always say NO to Sex Worker Exclusionary Radical Feminists(SWERF) as well as Transgender Exclusionary Radical Feminists(TERFs).

¹ <https://mattersnetwork.org/lgbtq-hx-harm-reduction/>

ALL ABOUT HPV

There is a lot of information about HPV online and it can feel very difficult where to begin.

Most websites outline that HPV is the common cold of sexually transmitted infections meaning that they are very common and many of us will likely get it through our lifetime and our bodies will get over them in time.

If you are between the age of 9 to 45, getting vaccinated is highly recommended as for all, for ALL PEOPLE.

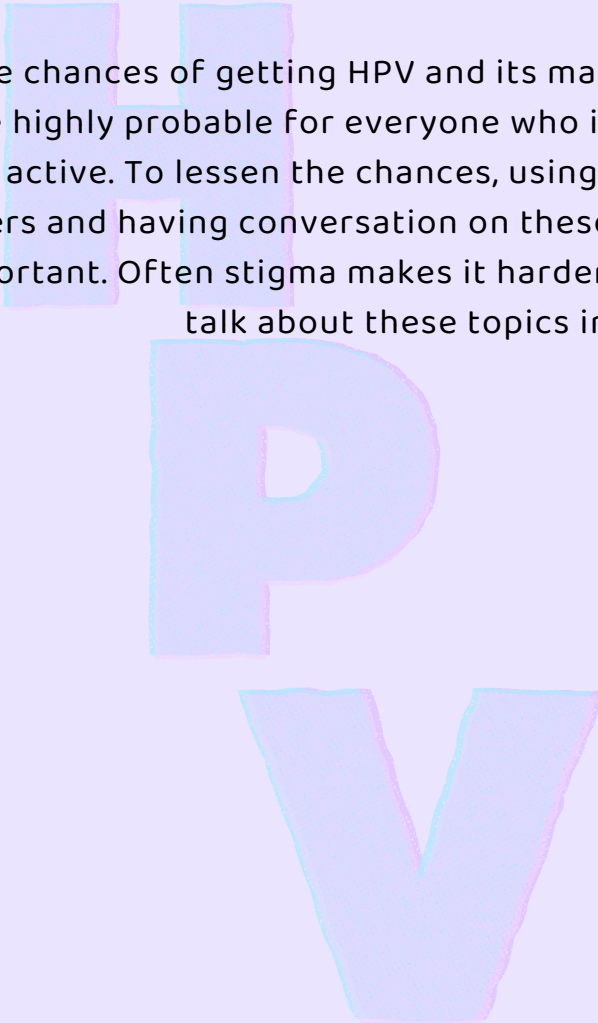
For vulva owners, this vaccine can be life saving as it can protect from cervical cancer.

For folks living with HIV, your immune system may have a harder time fighting HPV. Hence regular testing is important.

There are more than 100 subtypes of HPV and high-risk HPV infection (HPV types 16 and 18) causes the majority of cervical, penile, vulvar, vaginal, anal, and oropharyngeal cancers and precancers, while other HPV infection (HPV types 6 and 11) causes genital warts and recurrent respiratory papillomatosis.

For folks around the ages of 25-29, it is important to conduct pap smear screening once every 3 years. For folks around the ages of 30 to 69: conduct HPV testing once every 5 years.

The chances of getting HPV and its many strains are highly probable for everyone who is sexually active. To lessen the chances, using different barriers and having conversation on these topics is important. Often stigma makes it harder for us to talk about these topics in general.



VACCINES – GET YOUR SHOTS.

Dear friend, it is important to get your shots because you deserve to be safe and know about your body and be prepared to care for it better.

Some of the most effective tools for sexual health protection are vaccines — and they are chronically underdiscussed in queer communities in Nepal.

→ HPV VACCINE — Human papillomavirus causes most cervical cancers and many anal, throat, and penile cancers. It is also one of the most common STIs. The vaccine is most effective before sexual debut but remains beneficial for many adults. For queer people — especially gay and bisexual men and trans people — the HPV vaccine is particularly important and often not offered proactively. Ask for it.

→ HEPATITIS A VACCINE — Hep A can be transmitted sexually, especially through oral-anal contact. Highly preventable. One of the most straightforward vaccines to get.

→ HEPATITIS B VACCINE — Sexually transmitted and transmissible through blood. If you are not vaccinated, get vaccinated. If you are living with hepatitis C, this is especially important to protect your liver.

→ MPOX VACCINE — Increasingly relevant for sexually active queer communities. Speak to a healthcare provider about availability and eligibility.

If healthcare providers are not proactively offering these vaccines — ask. You have the right to access them. There is no shame in wanting to be safe. Finding an affirming provider who understands queer sexual health makes all of this easier.

TESTING + KNOWING YOUR STATUS

TESTING IS CARE, NOT CONFESSION.

Getting tested regularly is not an admission of irresponsibility. It is the opposite; it is you taking your health seriously, and taking care of your partner(s) too.

TEST FOR:

HIV · Syphilis · Gonorrhea · Chlamydia · Hepatitis B & C ·
HPV (via cervical screening or anal pap) · Herpes (if
symptomatic)

HOW OFTEN?

Every 3–6 months if you have multiple partners. At least annually otherwise. After any unprotected exposure — sooner rather than later.

Knowing your status is power. It lets you make informed decisions, access treatment early if needed, and have honest conversations with partners.

Stigma around STIs — especially HIV — is a barrier to testing. The shame is not yours to carry. An STI is a health condition, not a moral judgment.

~ TEST REGULARLY ~
~ KNOW YOUR STATUS ~
~ NO SPACE FOR SHAME ~

CHEMSEX + INTIMACY

WHEN SUBSTANCES AND SEX OVERLAP

Chemsex, using substances specifically in sexual contexts, is more common in queer communities than is often acknowledged. It is not inherently a problem. However, it does carry specific risks worth knowing about.

- Substances lower inhibitions, including around protection. Decide in advance what your boundaries are and communicate them clearly before you use. Have clear safe word practices and consent agreements.
- GHB/GBL has a narrow margin between a pleasurable dose and an overdose. Never mix with alcohol. Never use alone.
- Stimulants can mask pain and fatigue, making it harder to notice injury or discomfort during sex. More lube, more check-ins.
- Consent under the influence is complicated. Talk before, not only during.
- Use tripsit.me to know in-depth information regarding polydrug use as well as interactions.
- If PrEP timing is thrown off by substance use — on-demand PrEP dosing (2-1-1 method) may work better for you than daily dosing. Ask a provider or do extensive research from reputed sources online.

Substances affect our ability to notice pain or discomfort during sex. If you are using, pay extra attention to using protection and lube — your body may not be giving you its usual signals.

For many of us, being on a substance provides us with ease to engage and intimacy is no different. Intimacy can feel daunting. Whether this is true for you or not, lets take some time to ask ourselves, what is made possible when substances enter these spaces or when they do not. Discuss about this with your close friend/s with whom you have developed a rapport to talk about intimacy.

-What has it felt to be on substances to be intimate?

-What has the alternative of having sober intimate moments felt like?

-What are your non-negotiables in these situations?

You deserve pleasure that you can actually remember, in a body that stays safe.

THESE ARE NOT COMPETING GOALS.

TALKING ABOUT CONSENT

Talking to partners about protection can feel awkward, especially in queer spaces where there is often an unspoken expectation that everyone already knows everything, or that bringing it up kills the vibe. Talking helps remove stigma.

It doesn't have to be a negotiation. It can just be a conversation.

These conversations look different with different dynamics between people. Talking to someone you do not already have a rapport with can feel uncomfortable, but it is okay to have strong stances to protect yourself.

Some examples of conversation can look like:

"I was last tested in [month] — when were you?"

"I use condoms for anal sex — that's a non-negotiable for me."

"I'm on PrEP — are you? Do you want to talk about what we're both comfortable with?"

"I haven't been tested in a while — can we use protection until I get checked?"

ASK FIRST
TALK OPENLY
CARE FOR EACH OTHER

After care is an often overlooked but important way of looking after your body and respecting and meeting your emotional and physical needs.

If a partner reacts badly to you raising protection - that is information about them, not about you. Your safety is non-negotiable. A partner who respects you will respect this.

Be that friend to start conversation about safety among your friends. Romance and intimacy makes us feel vulnerable and even the most assertive of us might feel unsure. Be that voice of harm reduction. Spread the word for safer practices.

Let's take a collective breath together. Take some time with yourself to think or with a friend, introduce the notion of the last time you took a risk bringing up a topic into a conversation?

What was happening in that space that helped you speak boldly?

What and how did the response of the listeners help in making you feel heard?

Was there a catalyst to this conversation? Meaning did you watch a show, a movie, or a story that helped move the conversation?



PLEASURE IS NOT THE PROBLEM.

A world that tells queer people their desires are wrong, their bodies are shameful, their love is illegal, their ways of expression and experiencing the world is immoral - that world then turns around and acts surprised when queer people find ways to cope.

Harm reduction does not ask you to want less. It asks: how do we protect the people doing the wanting when they pursue their wants?

We want to continue to be curious and have fun and deepen our community connections in the process.

The politics of harm reduction is a queer politics. It insists that marginalized people's lives are worth protecting as they are lived, not only once they become legible, palatable, and acceptable to mainstream society.

**YOUR PLEASURE MATTERS.
YOUR SAFETY MATTERS.
YOU MATTER.**



ACCOUNTABILITY AS A LOVE LANGUAGE

Here is something worth sitting with: for many queer people, especially where masking and performance are survival strategies, being truly witnessed as ourselves, in our actual life is rare and precious.

Growing up, a lot of us were smothered by disciplinary and controlling languages masked as accountability language, "this is for your own good", "do this if you care about me", which more often than not made us feel defensive, numb, and/or oppositional defiant. What would it feel like to have people in your life who see you clearly, and love you anyway, say something when they're worried?

Accountability does not have to mean discipline. It does not have to feel like a lecture. The goal is to open doors in the relationship, not to close them.

It is a practice and we build on it over time through living through it.

WHAT ACCOUNTABILITY IS NOT:

Shaming. Controlling. "I told you so." Ultimatums. Making someone feel small and judged.

WHAT IT CAN BE:

Curiosity. Noticing out loud. Asking questions. Staying close. Making space for honesty without conditions. It is queer praxis in the making.

Shame should never take center stage in our conversations with harm reduction. We want accountability to continually widen horizons and create depth in our relationships, not to shrink it.

INTERVENTION

The word intervention can connote fear and anxiety and can bring up shame.

Let's switch the script. Infusing harm reduction into our understanding of intervention, we felt that it could be another form of intentional conversation about how we want to be cared for, how we want to be witnessed, what kind of language we want to be addressed by.

First step, find a friend or two who you have the depth in relationship to carry out this conversation.

Scenario A: If I notice something concerning in a particular relationship or an intimate relationship dynamics in your life, how would you want me to address it?

Feel free to ask each other what would raise a slight alarm that would lead to this conversation.

Be mindful of the time of the day, and the mode of communication. In person is always better. And it's best to have these conversations when not already very tired.

Scenario B: Going off medication can be a really tricky time. Always, always do it under the guidance of your doctor. Often it takes a few tries to find a good practitioner, that's a shared reality for us, so research together, never settle!



Hence, involving trusted friends and making a care plan is key. Especially, being around substances in those times can be tricky in itself.

Some questions to ask:

- How would you want me to ask you not to drink, or not to smoke?
- Can you be my sober buddy?
- Can you accompany me to this party and be my accountability partner?

If you are taking any type of medication, it is also important to check how different foods interact with it.

For eg. if you are on antidepressants, don't consume grapefruit! Certain substances worsen symptoms and/or disrupt absorption if taken alongside psychiatric medication.



WHO IS MY COMMUNITY?

As queer people, we may often have estranged relationships with our birth families because most birth family systems center heteronormative patriarchal values. And in our exploration for connection, the communities of support and chosen family we find can look unconventional.



We heavily rely on our friends and community members, for: witnessing us, giving us unconditional acceptance and regard, showing us love and grace, supporting us through tough times, being a part of our joy, and the list goes on. It is then with these people we sometimes have difficult boundaries.

We are conditioned and often brought up in ways that have reinforced blood relations over chosen ones. This has sometimes led us astray from prioritizing the relationships that fulfill us the most.



How to recognize who my loved ones are?

Here are some questions to think about in relation to our circles.

Some people may tick many boxes, some only a few, some who may only tick certain ones and not others, while some may not tick any at all. All of these relationships have their own roles in our social lives and their own way of strengthening our robust support system.

- Who in my life observes me astutely, and has been a witness to my life?
- If I lost all my memory, who would I choose to tell me who I am, what I am about?
- Who do I feel most like myself around?
- Who knows my values best?
- Who can I rely on for emergency purposes? (Pod mapping suggests that these can be folks who might not live your values or understand your queer identity, but they nevertheless would step up to help. You don't have to be close friends with someone to care about their wellbeing and/or receive help and care.)
- Who helps me find and reconnect to joy?
- Who is the best company to ground me when I am going through a difficult time?
- Who would I invite into my living room?
- How valued do I feel in my relationships?
- Are our needs mutual in this particular relationship? Is it necessary to be?
- Who do I feel the safest around?
- Which friendship do I have to spend a lot of energy protecting the relationship?
- Do certain relationship's uncertainty and chaos rupture my well being?
- Are there relationships in my life that are constant and supportive but may not share my life values?



Dear friend, we hope you know that this is not about picking favourites but about noticing the ways in which people show up in our lives and vice versa. This is not about asking you to remove people from your life but to start or continue reflecting on how we want to show up and how we prefer people to show up in our lives. Sometimes we find community in unexpected spaces and places, our family relationships may morph and make room for all parts of us, something only time will tell.

It is okay to assess and map risk and harm, even from relationships. You are not being cruel, but empowering each other to take up space and show up in ways that sustain relationships for longer.



FINDINGS

Dear friend,

As we had mentioned earlier, some strong pillars behind this body of work has been the survey we had circulated in the previous months, "Mapping Care, Burnout & Coping in Queer Activist Spaces Survey" and the interviews we conducted through the third season of our podcast series "सगँ-सगै: Harm Reduction as a care practice".

Some of the findings from the survey and the interview conversations are as follows:

WHAT QUEER PEOPLE HAVE FELT A LACK OF:

RISK MAPPING

For:

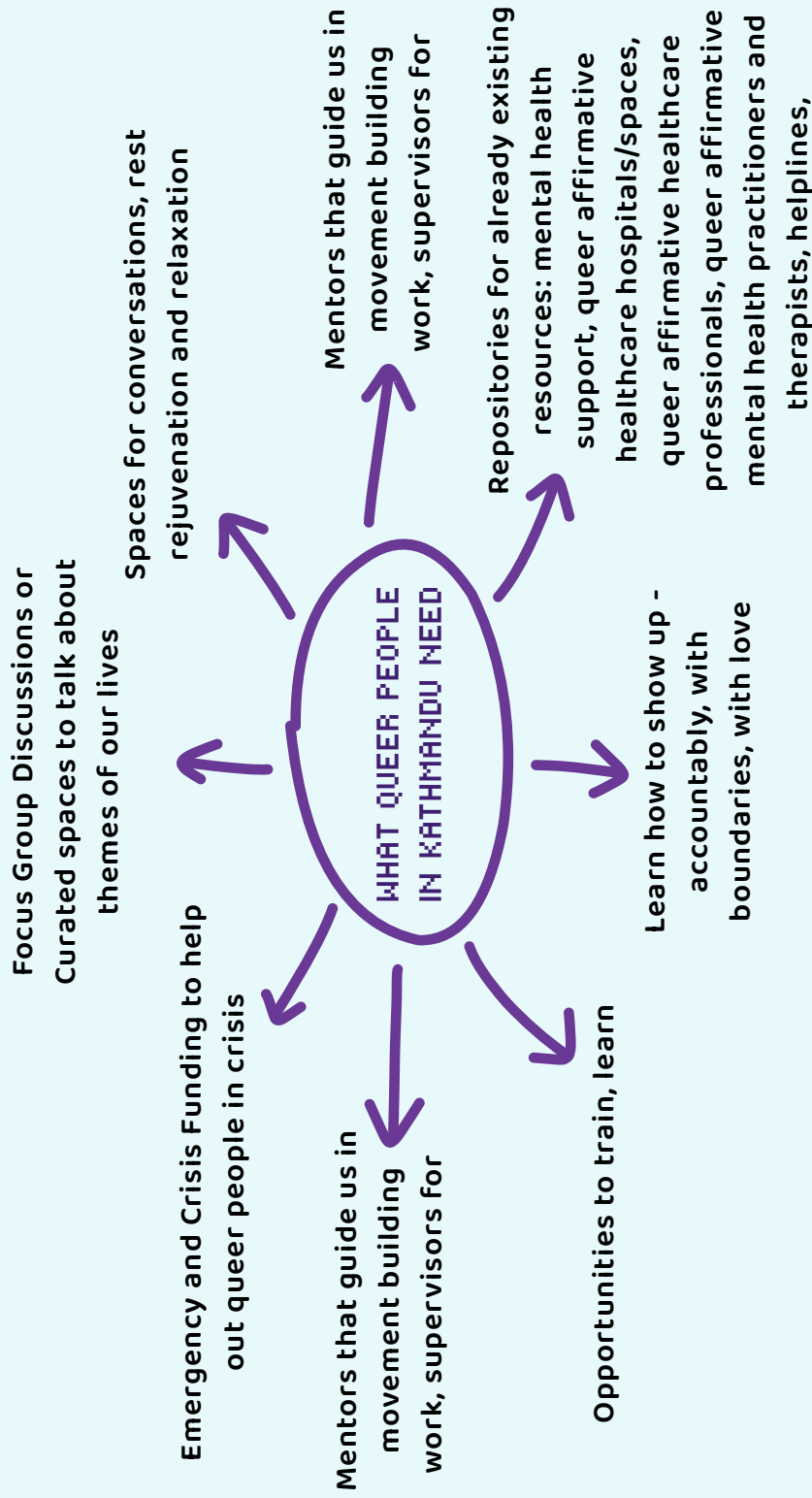
- when we are working,
- when we are present openly as queer people and show up
- when we are simply living our lives in our everyday lives

CONTINGENCY PLANNING FOR OUR DAILY LIVES

COLLECTIVE MAPPING

For:

- Funds
- Other resources like
 - o knowledge exchange
 - o intergenerational support and understanding
 - o sustainable community organizing



WHAT PEOPLE HAVE BEEN SAYING:

When we need to be so present in our everyday lives to ensure survival, how and when do we do all this mapping and planning?

Sometimes care feels disproportionate given that sober people have to take up the role of caring, how to make space that it doesn't feel burdensome rather than feeling like caring for people?

How do we address the gap of emotional labor needed for caring for community? What to do when you show up for the community but the community rarely ever shows up for you?

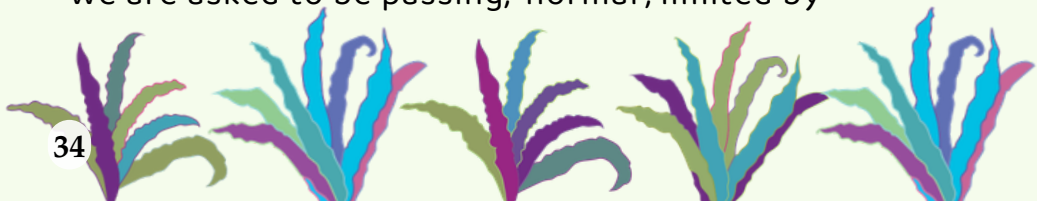
The above mentioned dialogues are excerpts from the conversations and survey that we conducted. To find more content, straight(queer :P) from queer activists in Kathmandu, tune into podcast platforms and find our third season 'सगैँ-सगैँ: Harm Reduction as a care practice'.

WE'RE HERE, WE'RE QUEER, WE'LL NEVER DISAPPEAR

We often experience our queerness fluidly or in multitudes. Knowing ourselves is almost never a linear journey. However, not knowing ourselves, our wants and desires, or how we want to experience certain things can be extremely frustrating if not distressing. Dear friend, we hope you know that it's okay if your queerness is a journey and not a destination. It's okay if you are still figuring things out. There is no right way to experience queerness. It is both very personal and subjective.

For a lot of queer and trans people, dysphoria can be a common experience. All of us might have different goals in our queer journey, such as in terms of our appearance, our expression, how we are perceived, the changes we want to make in our life, the acceptance we want to receive and feel from those around us, our birth families and the society at large. It's okay to be wherever you are in your journey, of being yourself, of making a life that is easier to live. Know that things will get better.

The world persistently tries us to put our limitless ways of being queer into neat little palatable boxes. We are asked to be passing, 'normal', limited by





binaries and/or trinaries, quiet about ourselves,
invisible, disorganized and divided. Dear friend,
accepting and loving ourselves as we are (even if
that looks different from our future goals) is a
great act of resistance. We are here, we are queer in
our endless possibilities, and we will never
disappear.

Being queer and experiencing queerness in the best
of our capacities can help us feel good about the
world because it ultimately leads us to feeling at
peace with and within ourselves.

THINKING INTENTIONALLY

Often conversations begin when something has already gone 'wrong'. Harm reduction doesn't have to and shouldn't only exist as a post-harm conversation.

Thinking intentionally and talking about these things helps us move away from stigma and invites openly talking and exploring our relationship with these parts of how we experience life. Talking about things beforehand in safe spaces helps build on practices that work for us and reduces risks.

How can we create spaces to have this conversation before harm is experienced?

Things that we can practice, when we have time, so that we are safer when we engage with our desires:

→ Pod Mapping – An exercise that helps one examine and identify: Who is in my circle? Who can I reach out to when I need help? Who are my safe contacts?

→ Having honest conversations about what we are experiencing with those we feel safe around.

→ Pre-plan Emergencies: Discuss what steps should be taken if you don't check in by a specific time. Be it meeting someone new, trying chem sex for the first time, going to some place new with unfamiliar things.

→ Contingency planning for when worst case scenarios happen.

→ Mapping:

- Safe spaces you can access when you need help
- Healthcare practitioners that are affirmative
- Risks that get increased based on what we are doing,

GENTLE REMINDERS

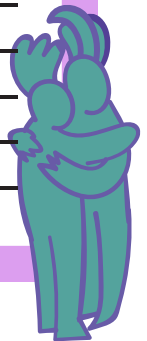
Dear friend, here are a few things that felt helpful to hear for us. The following section is for you, in case you needed to or for whenever you need to hear this:

- You matter.
- It's okay to be where you are in your journey, there is no shame in being wherever you are.
- If you haven't reached your goals, it could be in regards to any aspect of your life: sobriety, healthy relationships with substances, others and self, setting boundaries, tangible life goals/the life you want to live.
- A sober curious/sober life can be just as fulfilling, fun and full of wonderful memories/moments. Sobriety/Sober curiousness=/=boring
- Unlearning and choosing different or better decisions can be very difficult, especially if you don't know what that looks like, haven't seen those examples and haven't been taught, and if you haven't done them ever before. Making better choices is like building a muscle, you must consistently practice it and give it time.
- Getting better (and making better choices) is like sowing a seed. The day you sow isn't the day you harvest. You must tend to your garden over and over again.
- Things will get better.
- You are not a bad person for the way you cope.

GENTLE REMINDERS...

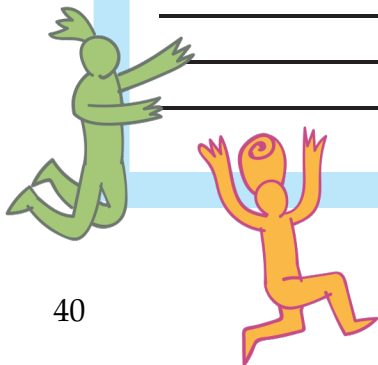
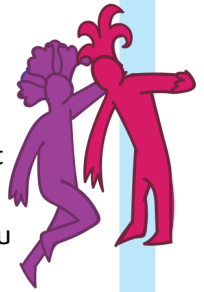
- You are capable of a lot more than you give yourself credit for.
- Even using one safer practice is worth celebrating.
- If you continue having a tough time, hold on to any amount of optimism possible, because life can and will get a lot better, even if that seems impossible right now.
- Taking deep breaths during the day whenever possible helps regulate our nervous systems.
- There are many things that affect our mood and behaviours in our day-to-day. Some of them are the day's temperature, body temperature circulation, stimulation level, body energy (mental, physical, emotional), daily routine, methods of emotional regulation, coping mechanisms, having support systems. The more things we are able to take account for and influence, the better it feels on our bodymind.
- When using substances in the times of acute weather changes, our abilities to understand our body gets diminished, and certain sensations gets heightened. It is important to stay hydrated and take breaks.

What are some helpful pieces of advice and reminders you have received or given over the years? Fill this section for reminders for your future self:

[illegible]

WHAT ARE YOU ALREADY DOING IN YOUR LIFE?

Often we may not have the vocabulary for it but have our own set of know-hows that have helped us through the years. We believe that you are already taking actions in whatever ways are possible for you. This space is for you to list down the activities and strategies that you have already been practicing in your life.

This image shows a blank sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. In the bottom-left corner, there is a small, stylized green cartoon hand with three fingers, appearing to hold the edge of the paper. The overall appearance is that of a clean, unused piece of stationery or notebook paper.



WAY FORWARD

Dear friend,

If there is one thing we hope you carry with you after reading this chapbook, it is this:
Harm reduction is not a destination. It is an ongoing practice of paying attention: to ourselves, to each other, and to the conditions we are living through.

We do not become safer overnight. We build safety through small conversations, through checking in, sharing information, making plans, asking difficult questions, practicing accountability, and through showing up for one another again and again.

The responsibility of care should never fall on one person alone. Harm reduction invites us to move away from individual solutions and towards collective ones. It asks us to remember that our wellbeing is deeply interconnected.

As queer people, we have always created ways to survive, resist, celebrate, and care for one another. We inherit generations of community wisdom, mutual aid, organizing, pleasure, and resilience. This chapbook is only one small contribution to that ongoing lineage.

So where do we go from here?

- Continue having conversations that reduce shame and increase understanding.
- Share knowledge, resources, and safer practices with friends, partners, and communities.
- Build your own care plans, pod maps, contingency plans, and support systems.
- Create spaces where people can ask questions without fear of judgment.
- Learn from each other's experiences and know-hows.

- Support queer-led initiatives, organizers, healthcare workers, and community spaces doing this work.
 - Remember that pleasure, safety, dignity, and joy are not competing needs. We deserve all of them.
- And perhaps most importantly:
- Practice harm reduction with compassion, including towards yourself.

There will be times when things do not go according to plan. There will be moments when we take risks, make mistakes, struggle, relapse, withdraw, or simply find ourselves overwhelmed by life. Like most things in life, this journey too, isn't linear. Harm reduction reminds us that care does not begin after perfection. Care begins exactly where we are.

This work does not end with this chapbook.

We invite you to continue building this conversation with us. You can still contribute to our survey and help us deepen our understanding of queer experiences, care practices, coping mechanisms, and community needs in Kathmandu and beyond.

If you have stories, reflections, resources, feedback, questions, or ideas, we would love to hear from you.

And if you would like to organize a conversation, reading circle, workshop, focus group, community gathering, or sensitization session in your space, please reach out. You do not have to do this work alone. Ping us at our social media handles @utarchadhav or email us at utarchadhav@gmail.com.

Together, we can continue building practices of care that are honest, practical, joyful, and rooted in our realities.

With love, solidarity, hope,
And as always, sending you Trucks of love,
Utar Chadhav

RESOURCES

- tripsit.me — check drug interactions, including with medications
- harmreduction.org — global harm reduction resources and toolkits
- hips.org/harm-reduction — harm reduction for sex workers and LGBTQ+ communities
- rainbowhealthontario.ca — harm reduction resources specifically for LGBTQ+ people who use drugs
- hri.global/nepal — Nepal-specific harm reduction information
- sfaf.org — PrEP facts and FAQ
- thebody.com — U=U fact sheet

**"NO PRIDE FOR SOME OF US WITHOUT
LIBERATION FOR ALL OF US."
MARSHA P. JOHNSON**

**THIS CHAPBOOK WAS MADE WITH LOVE, RESEARCH, AND
COMMUNITY CONVERSATIONS.
IT IS NOT A REPLACEMENT FOR MEDICAL ADVICE.
IT IS THE BEGINNING OF A CONVERSATION.**

**#SHARE IT
#ADD TO IT
#KEEP TALKING**

**QUEER HARM REDUCTION
· CARE ·**

MADE BY, FOR, AND WITH COMMUNITY

