The Humsafar Trust's
Research and Program
Knowledge Sharing Meeting
March 12-13, 2020 | Hotel Eros, New Delhi

BRIEF REPORT

Meeting Highlights

APRIL 10, 2020
THE HUMSAFAR TRUST
Mumbai, India
Table of Contents

List of Abbreviations .......................................................................................................................... 2

Background .......................................................................................................................................... 3

Day 1: March 12, 2020: Research ....................................................................................................... 4
  Session 1: Behavioural interventions and HIV ................................................................................... 5
  Session 2: Pre-Exposure Prophylaxis (PrEP)-focused studies .......................................................... 6
  Session 3: Internet-based studies and Self Testing for HIV ............................................................... 7
  Session 4: Navigating virtual and physical spaces ........................................................................... 9
  Session 5: Study in highlight ......................................................................................................... 11

Day 2: March 13, 2020: Program ....................................................................................................... 13
  Session 1: Health and HIV interventions ....................................................................................... 13
  Session 2: Transgender Inclusion in Mainstream spaces ............................................................... 14
  Session 3: Capacity Building ......................................................................................................... 15
  Session 4: Advocacy .................................................................................................................... 17
  Closing Address and Vote of Thanks .............................................................................................. 18

Collaborating Agencies and Supporting Partners .............................................................................. 19
List of Abbreviations

AIDS: Acquired Immuno-Deficiency Syndrome
ART: Antiretroviral Therapy
CBO: Community Based Organization
CDC: Centre for Disease Control and Prevention
FHI: Family Health International
GFATM: Global Fund for AIDS, Tuberculosis and Malaria
HIV: Human Immunodeficiency Virus
HIVST: HIV Self Testing
HST: The Humsafar Trust
ICMR: Indian Council of Medical Research
IRB: Institutional Review Board
LGBTQ+: Lesbian Gay Bisexual Transgender Queer+
MDACS: Mumbai District AIDS Control Society
MSM: Men who have Sex with Men
NACO: National AIDS Control Organisation
NGO: Non-Government Organisation
NIRT: National Institute of Research in Tuberculosis
PI: Principal Investigator
PLHIV: People Living with HIV
PrEP: Pre-Exposure Prophylaxis
RCT: Randomized Control Trial
STI: Sexually Transmitted Infection
TGW: Transgender women
USAID: United States Agency for International Development
Background

The Humsafar Trust (HST) is among India’s first community-based organizations (CBOs) of Lesbian Gay Bisexual Transgender Queer+ (LGBTQ+) persons working for LGBTQ+ health and rights for over 25 years. HST is the convener of Integrated Network for Sexual minorities, a National level network with over 100 CBO partners from across the country to strengthen the voices of the community. HST nurtured initiatives Yaariyan (Friendship) for LGBTQ+ youth, Umang (Joy) for LBT communities, Transcend for inclusion of transgender communities in mainstream employment, and Sanjeevani (Life Saver) for people living with HIV (PLHIV). These initiatives aim to create safe spaces; encourage inclusion in employment spaces; foster dialogue and peer support; facilitate access to mental and sexual health services, nutritional and adherence guidance, access to medicines and information, and strengthen community capacities. HST currently provides services to over 10,000 LGBTQ+ individuals annually over real and virtual platforms, has a clinic with HIV testing facilities on its premises, is a link ART centre, and is governed by over 50 policies regulating organizational aspects such as governance, financial transparency, recruitment, employee/client redressal, and procurement. HST works in the following four verticals: advocacy, research, capacity building, and health. In 2017–2019, HST has implemented at least nine research studies with national and internal collaborators; has strengthened community capacities across India; implemented innovative strategies for inclusion and crises redressal among LGBTQ+ communities; and has implemented health interventions in Mumbai and helped design innovative outreach strategies for hard-to-reach men who have sex with men (MSM) and transgender women (TGW) communities.
Day 1: March 12, 2020: Research

Vivek Raj Anand (CEO, HST) announced Mr. Suhail Abbasi as the new chairperson, HST, following the resignation of Mr. Ashok Row Kavi from the post. Mr. Suhail Abbasi shared a note on his journey with HST and invited Dr. Alka Gogate [Chairperson, HST Institutional Review Board (IRB)] to share her insight into the beginning and progress of HST’s Research Unit. Dr. Gogate’s insightful addressed was concluded with a lamp lighting ceremony with Dr. Raman Gangakhedkar [Head of Epidemiology and Communicable diseases as the Guest of Honour, Indian Council of Medical Research (ICMR)] and Dr. Alka Gogate, Dr. Shrikala Acharya [APD, Mumbai District AIDS Control Society, (MDACS)], Dr. Venkatesan Chakrapani [Center for Sexuality and Health Research Policy (C-SHaRP); Wellcome Trust/DBT India Alliance Senior Fellow, HST] Mr. Suhail Abbasi, and Mrs. Alpana Dange (Consulting Research Director, HST) as special guests. Dr. Raman Gangakhedkar spoke about his relationship and association with HST beginning with his early interactions with Mr. Ashok Row Kavi and wished the organization best luck for all endeavours ahead.
Study presented: Fostering resilience to HIV risk among Indian MSM: findings from a biobehavioural randomized control trial (RCT) among MSM in Mumbai and Chennai

Presenters:
- Dr. Beena Thomas, [India Principal Investigator (PI) Consultant, National Institute of Research in Tuberculosis (NIRT)-ICMR, Social and Behavioural Research]
- Mrs. Alpana Dange (Site PI, Research Director, HST; Founder, Partners in Progress)

Session Chair:
Dr. Viraj Patel (Assistant Professor of Medicine, Division of General Internal Medicine Montefiore Health System; Albert Einstein College of Medicine)

Session Co-Chair:
Dr. Chitra Nayak (Head of Department, Dermatology, TMNC and Nair Hospital)

Study information: The study was a bio-behavioural RCT with MSM (n = 608) implemented in Mumbai and Chennai with HST as the Mumbai-implementing partner, NIRT as Chennai-implementing partner and Sahodaran as the Chennai community partner. The study was funded by National Institutes of Health with Massachusetts General Hospital and Fenway Community Health Center as principle partners. The study team from US were Dr. Steven Safren, Dr. Matthew Mimiaga and Dr. Conall O’Cleirigh as PIs and Dr. Kenneth Mayer and Dr. Katie Biello as CO-PIs. This two-arm trial had one arm as standard of care (n=304) and the second as standard of care with intervention (n = 304). The intervention design focused on self-acceptance as a resilience factor for MSM, and comprised six individual and four group session on coming out, dealing with societal pressures and self-acceptance, sexual trigger management, safer avenues to meet partners, and overall risk reduction. Bio-behavioural assessments were conducted at baseline, 4-, 8- and 12 months; HIV/STI testing were done at baseline and 12 months.

Key learning:
- Almost 85% retention at 12-month assessments
- HIV prevalence was over 9% and STI prevalence was over 30% with higher prevalence among Mumbai participants despite lesser reported condom-less anal sex; over 90% had never been tested for STIs.
- Greater number of Chennai participants reported engagement in sex work (91%) as compared to Mumbai (31%)
- 56% participants reported a score of ≥10 on CES-D indicative of depression symptoms
- 11% participants reported a scores of ≥8 on AUDIT indicating alcohol abuse.

Way ahead:
- Need for STI testing and treatment to be expanded to include gonorrhoea, chlamydia and not restricted to syphilis.
- Focus on mental health and substance use in national HIV interventions
- Intervention structure could be a potential counselling package for MSM in HIV interventions.
- Study findings (effect of intervention, 12-month HIV/STI numbers) to be shared with key policy makers and HIV organizations in India as soon as available.

**Session 2: Pre-Exposure Prophylaxis (PrEP)-focused**

**Studies presented:**

1) PrEP acceptability and preferences among MSM communities in Chennai and Mumbai - a discrete choice experiment

2) Barriers and facilitators for PrEP prescription among healthcare providers in Mumbai

**Presenters:**

- Study 1: Dr. Peter A Newman (Professor, Factor-Inwentash Faculty of Social Work, University of Toronto)
- Study 2: Dr. Rupa Patel (Assistant Professor, Infectious Diseases; Director, HIV PrEP Program Washington University in St. Louis)

**Session Co-Chairs:**

- Dr. Seema Sahay (Scientist G, National AIDS Research Institute)
- Dr. Shrikala Acharya (APD, MDACS)
- Yashwinder Singh (Community perspectives on PrEP)

Study 1 information: The study, conducted in 2017, used discrete choice experiment using pictorial cards to assess preferences for different PrEP attributes (cost, place of access, efficacy, side effects) using tablet-assisted surveys. The study was funded by Canadian Institutes of Health Research, Canada, and Wellcome Trust/DBT India Alliance fellowship grant. Dr. Newman and Dr. Venkatesan Chakrapani were the study’s international and Indian PIs; the study was implemented by HST in Mumbai and C-SHaRP and Sahodaran in Chennai

Study 2 information: The study aimed to assess current sources of PrEP information and barriers and facilitators for prescribing among healthcare providers in Mumbai and preferences for education and tools to aid PrEP prescribing among healthcare providers in Mumbai. The study was funded by Washington University in St. Louis, School of Medicine with Dr. Rupa Patel as the international PI and Ms. Shruta Rawat and Mrs. Alpana Dange as the study Co-PIs.

Key learning from Study 1:

- High willingness to use PrEP – 77% said that they would “definitely use PrEP”
- Intermittent PrEP (≤4 pills/week) increased odds of choice by 50% versus a daily regimen
- Sex workers had higher odds of choosing PrEP based on its high (99%) efficacy than non-sex workers
- Sex workers did not have a venue preference; Non-sex workers prefer government hospitals, with private hospitals decreasing odds of choice by ~15%

Key learning from Study 2:

- Guidelines by regulatory bodies are desired by providers to foster PrEP prescribing
- Facilitators for prescribing included links to CBOs and the community
- Barriers for prescribing included lack of guidelines, limited awareness, costs of PrEP to patients, and the perception that specialty qualifications are needed

Way ahead for Study 1:
- National guidelines for PrEP to strengthen advocacy around PrEP uptake
- Cultural competency for PrEP providers at government and private hospitals/clinics
- Intermittent dosing model should be investigated with demonstration projects.

Way ahead for Study 2:
- Study findings should be incorporated into future provider educational materials and national PrEP implementation planning
- Multi-city sampling: interview prescribers from other cities.
- Consultations with communities for improving understanding and PrEP prescription among healthcare providers

Session 3: Internet-based studies and Self Testing for HIV

Studies presented:
1) Zero meters away: findings from a large internet-based all-India survey of MSM and HIV prevention opportunities
2) Analyzing internet-based safe spaces: understanding the role of e-safe spaces in LGBTQ health and safety
3) Acceptability of HIV self-testing among key populations

Presenters:
- Study 1: Dr. Viraj Patel (Assistant Professor of Medicine, Division of General Internal Medicine Montefiore Health System; Albert Einstein College of Medicine)
- Study 2: Ms. Mallika Govindan (Medical student, Albert Einstein College of Medicine)
- Study 3: Mrs. Alpana Dange (Research Director, HST; Founder, Partners in Progress)

Session Co-Chairs:
- Dr. Nomita Chandhiok [Scientist G (R) and consultant, ICMR]
- Dr. Beena Thomas (Consultant, NIRT-ICMR, Social and Behavioural Research)
- Dr. Akshay Raundhal (Consulting Doctor, HST; Yaariyan member)

Study 1 information: The study, conducted in 2015, aimed to understand HIV testing rates and determine individual and structural factors associated with HIV testing, understand reasons for never having tested for HIV and determine PrEP awareness/acceptability among internet-using MSM (n = 4179). The study was funded by Einstein School of Medicine and Montefiore Medical Center, Bronx. Dr. Viraj Patel was the international PI on the study and Mrs. Alpana Dange and Ms. Shruta Rawat were the study’s Indian PIs; the study was implemented by HST.

Study 2 information: This study analyzed Yaariyan (HST’s internet-based e-support group for LGBTQ+ youth with over 8500 members) as an intervention model for HIV information and access to social support. The study analyzed the group’s interactions since its inception in 2011 along with focus-group discussions with current members and in-depth interviews with
current/past admins. The study was funded by the International AIDS Society with Dr. Viraj Patel as the international PI on the study and Mrs. Alpana Dange and Ms. Shruta Rawat as the study’s Indian PIs; the study was implemented by HST.

Study 3 information: This multi-city study aimed to understand acceptability, feasibility and preferred modes of delivery of HIV self-testing (HIVST) and inform pilot inform designs for pilot interventions among key populations. The study was funded by American People through the United States Agency for International Development (USAID) and the US President’s Emergency Plan for AIDS Relief, and National AIDS Control Organization (NACO) Dr. Shalini Bharat (Tata Institute of Social Sciences, Mumbai), Dr. Sunil S. Solomon (YRG Care, Chennai) were the study PIs, and the study was implemented by International AIDS Vaccine Initiative, YRG Care, and HST in Delhi, Imphal, Vijaywada and Mumbai.

Key learning from Study 1:
- 46% study respondents had never had an HIV test
- 47% of those currently engaging in condomless anal sex have never had an HIV test
- 42% of those respondents who’ve never had an HIV test said that they did not perceive themselves at risk.
- 61.3% study respondents who answered PrEP questions were likely to use PrEP and 68% were aware of PrEP

Key learning from Study 2:
- Sharing positive messages and engaging in banter are key aspects to community-building

Varied Crisis Responses

- Lighthearted banter
- Psychosocial support
- Tangible support
- Difficult interpersonal experiences (including issues with family, friends, and partners)
- Current affairs
- Physical health and wellbeing
- Crises

Tangible Support
- Offering a resource or aid
- Direct advice

Emotional Support
- Self-assertion support / providing empathy, compassion
- Suggesting new ways of thinking
- Providing analogies to personal or friend experiences
Key learning from Study 3:

Way ahead for Study 1:
- MSM on internet platforms are emerging as a much vulnerable community and may need interventions to address low risk perception
- High interest for PrEP among internet-using communities should be explored as a way to integrate them into HIV programs
- Substance use should be explored in greater depth for internet-using MSM.

Way ahead for Study 2:
- Study findings indicate a holistic approach to LGBTQ+ health with foundations in emotional and social wellbeing could strengthen uptake of services
- Models like Yaariyan should be explored, supported and upscaled for addressing LGBTQ+ communities’ needs especially for those isolated and without other support.

Way ahead for Study 3:
- As cost and access are important factors for facilitating access and uptake for HIVST, multiple options must be explored for dispensing HIVST.
- It must be stressed that HIVST is a screening test only, and demonstration models are needed to understand strategies for linking those screened as positive on HIVST.
- Easy-to-understand educational and information material is needed to facilitate understanding (use and interpretation) of HIVST.

Studies presented:
1) Navigating family and social spaces: experiences of transmasculine persons
2) Identity, attraction and trust: How MSM compose and assess location-aware dating/hookup app profiles in Mumbai
Presenters:
- Study 1: Dr. Venkatesan Chakrapani (C-SHaRP; Wellcome Trust/DBT India Alliance Senior Fellow, HST)
- Study 2: Dr. Jeremy Birnholtz (Associate Professor, Communication Studies, Northwestern University)

Session Chair:
- Dr. Brian Horton (Assistant Professor, Brandeis University)

Session Co-Chairs:
- Shruta Rawat (Research Manager, HST)
- Raj Kanaujia (Umang - An LBT Support Initiative)

Study 1 information: This study was a part of a larger study that aimed to explore Interconnections Between Syndemics, Stigmas and Sexual Health among Sexual and Gender Minorities. With very little academic evidence on transmasculine individuals, the study investigated access to navigating family and social spaces among transmasculine individuals in Mumbai and Chennai. Dr. Rajesh Kumar (Department of Community Medicine and School of Public Health, PGIMER) was the study PI with Dr. Manmeet Kaur and Dr. Venkatesan Chakrapani as the study Co-PIs. The study was supported by the Wellcome Trust DBT India fellowship and was implemented by PGIMER, HST and C-SHaRP.

Study 2 information: This study was conducted at HST in partnership with Northwestern University and supported under The Sexualities Project at Northwestern Award. The study explored the use of location-aware social apps by MSM communities in Mumbai and negotiation of identity, attraction and trust on these platforms. Dr. Jeremy Birnholtz was the international PI on this study and Mrs. Alpana Dange and Ms. Shruta Rawat were the Indian PIs. The study was implemented by HST.

Key learning from Study 1:
- Strategies such as self-acceptance, strategic identity concealment/disclosure, and self-advocacy played a key role in resilience
- Participants with supportive peers and families reported good resilience in dealing with stress.
- Social support also contributed to increased self esteem and self-acceptance.

Key learning from Study 2:
- Dating apps are used by MSM for community support, friendship, and information; their use is not limited to sex.
- These apps are used in urban as well as non-urban areas; however, individuals may choose to have different levels of visibility depending upon their location.
- While individuals report the fear of blackmail and harassment on these platforms, and some also shared their negative experiences, they have also found friends, health guidance, and long-term platonic relationships on these spaces.
Way ahead for Study 1:
- As a community that often is marginalized and invisible even within LGBTQ+ spaces, research focusing on health needs of transmasculine individuals is much needed.
- Strategies to improve mental health and self-esteem and decrease isolation are key to prevent adverse mental health outcomes and develop resilience.

Way ahead for Study 2:
- Location-aware apps should be explored as platforms for sharing community resources and information that are relevant to the location that the app is being used in.
- Community advocates and organizations must explore ways to help communities address violence and harm faced on these platforms either via in-app resources or dedicated messaging.

Session 5: Study in highlight

Study presented: LGBTQ+ Individual Experiences in Educational Institutions

Presenters:
- Aakanksha Bhattar (Research Associate, The Humsafar Trust)
- Dicky Baruah (Research Associate, The Humsafar Trust)

Panelists:
- Session moderator: Mrs. Alpana Dange (Site PI, Research Director, HST; Founder, Partners in Progress)
- Dr. Subhojit Sen (Ramalingaswami Fellow, School of Biological Sciences, UM-DAE Center for Excellence in Basic Sciences)
- Dr. Venkatesan Chakrapani (C-SHaRP; Wellcome Trust/DBT India Alliance Senior Fellow, HST)
- Gautam Yadav (NOREC Fellow; community perspectives of a gay man living with HIV)

Study information: This study adopted a mixed-methods approach to understand experiences of bullying in retrospect among LGBTQ+ individuals and attitudes of staff in educational spaces. The study was funded, conceptualized, and implemented by HST to bridge the gap on information on experiences of LGBTQ+ in institutional spaces in India.

Panel discussion: Panel discussion of this session focused on the role that educators play in facilitating understanding and acceptance of LGBTQ+ in their environments. The panellists shared their experiences from academic and social perspectives with Dr. Sen providing insights as an educator, Dr. Chakrapani sharing findings from his studies that highlighted the impact of bullying/hostile educational environments on general health outcomes of LGBTQ+ even after they have moved out of those spaces, and Gautam sharing the impact of bullying on his mental and general health as a gay man living with HIV. Mrs. Alpana Dange highlighted that despite two model case studies of LGBTQ+ inclusion in educational spaces, institutions were reluctant to participate as they did not find LGBTQ+ inclusion relevant to their work, were uncomfortable with the topic, or were pressed for time.
Key learning from the study:

- Almost 29% “agreed/strongly agreed” having felt suicidal in their school years. Almost 55% reported feeling depressed.
- Only 3% respondents “strongly agreed” to having had support of their school.
- Staff in educational institutions reported not having in-depth understanding of LGBTQ+ issues and shared that they had witnessed LGBTQ+ students being bullied by peers.
- Schools that participated understood the need for LGBTQ+ inclusion but did not have any formal policies that protected LGBTQ+ students from bullying and harassment.

Feelings that resonated with LGBTQ+ individual’s school years

Way ahead the study:

- Community organizations must lobby with policy makers, educational bodies and board for structured workshops on LGBTQ+ issues
- Advocacy for including LGBTQ+ issues in educational curricula.

But there are definitely things that all the parents should know about like basic things. Not sensitize them to the extent that we have to go for a five hours workshop. Because none of these parents would. But at least inform them that this is what it is and this is something that’s very real, very tangible even and work with that. And teachers for sure. Because honestly there are also the teachers who also bully the student how they walk or talk – Clerk

When there is break in the college or when college gets over, many boys go down to have breakfast. If gay boy or bottom and all stand, then nobody stands with them. I explain the students that he is like us. He is like us and there is no different. We should have equality. We shouldn’t say that he is different. We shouldn’t feel ashamed in standing with them. We should feel proud that we are standing with them because they are very sensitive people and tolerate everything - Educator
Day 2: March 13, 2020: Program

Day 2 of HST’s Research and Program Knowledge sharing meet focused on showcasing programmatic achievements of HST in 2017–2019. The day showcased the project and innovative strategies implemented by capacity building, advocacy and health units at HST.

Session 1: Health and HIV interventions

Presenting team:
- Rakesh Thorat (Laboratory In-charge, HST)
- Malini Mohite (Counsellor)
- Dr. Akshay Raundhal (Physician)
- Ganesh Acharya (Health coordinator)
- Umang Sharma (Clinic admin support)

Session co-chairs:
- Dr. Alka Gogate (HST IRB Chairperson)
- Vivek Raj Anand (CEO, HST)
- Mr. Pallav Patankar (Avegen)

Background: MDACS sanctioned NACO’s first pilot project in the MSM sector in Mumbai for 1000 MSM and TGW communities in 1999. HST’s clinic was established on June 26, 1999. Since then, HST currently implements three HIV interventions providing services to 7500 MSM and TG. HST’s support group for MSM and TG living with HIV (Sanjeevani) was formed in March 2003 with the first MSM-TGW link ART center being inaugurated at HST on March 31, 2019. HST uses a clinic client tracking software designed by Avegen to monitor client follow up and referrals. The clinic is currently supported by MDACS, MAC AIDS Fund, and Project Accelarate.

Highlights:
- HST’s clinic has provided services to over 5200 MSM and TGW communities in 2017–2020.
- HIV positivity was 5.64 in 2018–19 and increased to 7.31 in 2019–20. Syphilis positivity was 29% among people who had tested positive. Syphilis positivity was 9% among other clinic attendees.
- In this duration, clinic provided mental health counselling services to over 1500 clients and nutritional guidance to 851 clients.
- Link ART currently providing ART to 47 clients with potential to upscale clinic for PEP and PrEP dispensing in future.
- Software used by HST clinic allows better coordination and protection of client data – it allows recording of detailed client history as well as follow up.

**Session 2: Transgender Inclusion in Mainstream spaces**

Presenting team:
- Nilofer Maske (Project Transcend)
- Anjali Siroya (Advocacy Officer and Transgender Point of Contact, HST)
- Shwetambera (Project Manager, Transcend)

Session co-chairs:
- Dr. Venkatesan Chakrapani (C-SHaRP; Wellcome Trust/DBT India Alliance Senior Fellow, HST)
- Sowmya Gupta (Project Connect, HST)
- Raj Kanaujia (Umang - An LBT Support Initiative)

Background: Project Transcend was initiated to address persistent gaps in transgender communities’ access to opportunities and inclusion resulting from lack of policies, opportunities and conducive environments for inclusion and social entitlements. The project was initiated in 2017 after a first-of-its-kind situation analysis on socio-economic profiles and needs assessment of transgender communities with a quantitative survey data from 518 transgender individuals and qualitative in-depth interviews with 17 transgender individuals in Bangalore, Delhi and Mumbai. The project has created manuals on inclusion of transgender communities in educational and corporate spaces, and has also conducted a national consultation involving 100 transgender individuals for charting a roadmap for inclusion and capacity strengthening. The project is supported by a CSR initiative of Publicis Sapient.

Highlights:
- Capacity building of 124 transgender leaders from 12 transgender CBOs in Delhi, Mumbai and Bangalore on research methodology, legal awareness, advocacy, effective use of social media, resource mobilisation strategies including volunteer mobilisation and grant writing, leadership, organisational development, and setting-up and strengthening state transgender welfare boards.
Over 15-one-time innovative initiatives undertaken by transgender community partners across India were supported by Project Transcend and 175 transgender individuals have been trained under skill-building programs.

- 100 workshops on gender, sex, sexuality, and identity have been conducted in Delhi, Mumbai, and Bangalore corporates/educational institutions till date; over 3000 individuals have been sensitized.

- 26 advocacy sessions with politicians, lawyers, and law enforcement agencies on needs of transgender communities.

- Over 600 transgender individuals have been provided with identity and social entitlement documents.

- Six narratives of transgender individuals have been created by independent community film makers under Project Transcend.

**Session 3: Capacity Building**

Presenting team:

- Tinesh Chopade (Advocacy Manager HST)
- Shruta Rawat (presenting on behalf on Mr. Sandeep Mane, Project Director, Capacity Building)

Session co-chairs:

- Mr. Aditya Singh (Executive Director, Johns Hopkins University)
- Ms. Deepika Joshi (Public Health Analyst, CDC)

Projects presented:

- Diversity in Action (DIVA) Project: From where to here (Tinesh Chopade)
- Project Linkages: Peer navigation and Enhanced Peer Outreach (Shruta Rawat)

Background: This session presented highlights from two of HST’s capacity building projects. DIVA was a multi-country South Asia Global Fund for AIDS Tuberculosis and Malaria (GFATM) Program implemented in two phases with UNDP – BRH first and then Save The Children International as its Principal Recipient. Project DIVA was funded by GFATM-9. The HST was the Sub recipient for MSM component. Project Linkages (supported by NACO, MDACS, USAID and FHI 360) was implemented by HST in Maharashtra to strengthen existing HIV interventions for linkage of PLHIV to treatment and care services via peer navigation as well as test/implement unique outreach strategies for hard-to-reach MSM and TGW, especially those on internet spaces. The presentation for project Linkages presents novel outreach strategies such as enhanced peer outreach for hard-to-reach key populations, work in index partner testing, and Yes4Me – an internet-based testing platform for key populations at risk.

Highlights: Project DIVA

- National level Training of Trainers in collaboration with NACO and SACS that trained 68 master trainers in Mumbai and Delhi
- Initiation of Likho Media Training Workshops for sensitive LGBTQ+ reporting
- Initiation of Emerging Queer Leaders (EQUeL) Summit for training young LGBTQ+ leaders
- Provided technical assistance to 29 community-based organisations in the country as per their requirement
- Advocacy Seed Grant program with 20 CBOs across India for sensitization and building awareness among stakeholders.

Highlights: Project Linkages

- Provided technical assistance to 25 MSM and TGW HIV interventions across Maharashtra.
- Over 240 MSM reached via EPOA with 3% HIV positivity and around 9% syphilis positivity; only 19% reported regular condom usage.
- 250 TG/ Hijra individuals reached for via TGW EPOA; 7% HIV and 16% syphilis positivity detected
- Index testing with partners of those tested positive (n=222) revealed 11% HIV positivity.
- Event-based testing: novel events organized for community members
- Online platform for risk assessment and testing “Yes4Me” created and piloted
Presenting team:
- Anjali Siroya (Advocacy Officer and Transgender Point of Contact, HST)

Session chair:
- Ms. Amrita Sarkar (SAATHII)

Session co-chairs:
- Saadhya Pawar
- Christy Raj
- Yadavendra Singh (Board member, Pahal Foundation)
- Shwetambera (Manager, Project Transcend, HST)

Background: Since its initiation in 2008, the Advocacy wing at The Humsafar Trusts has been engaging with the community at various levels. At present, the wing functions at five levels which include sensitization, community mobilisation, media relations, crisis management and policy change.

Project highlights:
- The advocacy unit has conducted over 600 workshops in 2017–2019 attended by 15000+ individuals
- The unit has conducted 32 sensitization workshops with educational institutions attended by 700+ students
- Advocacy unit engages with over 65 corporates for inclusion strategies and policy reviews for LGBTQ+ employees.
- Over 680 cases of blackmail, harassment, extortion and violence have been addressed by the advocacy team in this duration.
- The advocacy unit has collaborated with training and strengthening capacities of allied support groups with initiatives like Prabal (training parents of LGBTQ+ individuals) and informal community initiatives in tier II cities.
The two-day knowledge sharing meeting was closed with film screenings from the Unheard Stories narratives curated by Project Transcend. Film makers Christie and Yadavendra shared their perspectives on challenges faced by transgender communities and their experiences in making these narratives. Amrita Sarkar closed the session with a summary of advocacy needs and the need to focus on rights of LGBTQ+ communities with their health. Mr. Vivek Raj Anand presented the vote of thanks to collaborators, supporting agencies and meeting attendees.
Collaborating Agencies and Supporting Partners

HST would like to thank all of our supporting partners who have continued to strengthen our capacities and believe in our work. We would especially like to convey our gratitude to NACO, MDACS, and MSACS for their support and continued guidance in our work. HST would like to thank our current research funding agencies and collaborators: C-SHaRP, DBT India Alliance, PGIMER, ICMR, NIRT, Massachusetts General Hospital, Brown University, Harvard Medical School, Fenway Community Health Center, Einstein School of Medicine and Montefiore Medical Center, Washington University in St. Louis, Northwestern University, University of Toronto, National Institutes of Health and Canadian Institute of Health Research. HST would like to thank Publicis Sapient, Avegen, Amplify Change, and MAC AIDS Fund for their support in our programmatic initiatives. Our gratitude to FHI 360, USAID, UNAIDS, UNDP, UNESCO for their partnership, continued support and encouragement. We would like to extend our gratitude to the hospitality team at Hotel Eros for catering to us and our guests with detail and enthusiasm. We would like to express our heartfelt gratitude to all attendees and presenters at the knowledge sharing meeting, who despite odds and challenges associated with COVID-19, contributed to making the meeting a phenomenal success.

HST’s Research and Program Knowledge Sharing Meeting was supported by the following partners: