

# Combination Collaboration

Leveraging government commitment, donor processes and community mobilization to develop a national program to build the capacity of MSM and transgender populations as HIV prevention partners: The making of the Global Fund-supported Pehchān program in India



## Authors

J. Robertson<sup>1</sup>, S. Mehta<sup>1</sup>, V. Anand<sup>2</sup>, P. Patankar<sup>2</sup>, P. Dhall<sup>3</sup>, I. Ravishanker<sup>4</sup>, Y. Singh<sup>1</sup>, A. Bondyopadhyay<sup>2</sup>, L. Prakash<sup>5</sup>, K. Biswas<sup>1</sup>, R. Mani<sup>1</sup>, S. Rakesh<sup>1</sup>, A. Row Kavi<sup>2</sup>

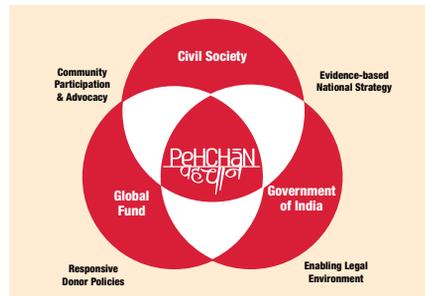
<sup>1</sup>India HIV/AIDS Alliance, New Delhi, <sup>2</sup>The Humstaf Trust, Mumbai, India, <sup>3</sup>SAATHI, Kolkata, India, <sup>4</sup>SAAP, Chennai, India, <sup>5</sup>Adhikar, New Delhi, India

## Results

The revised proposal succeeded in Round 9, and after almost two years of implementation, Pehchān remains the largest single-country grant focused on sexual minorities supported by the Global Fund. In order to reach MSM, transgender and hijra communities with needed services, community systems strengthening and community mobilisation have emerged as priority interventions, though few programs or donors—in India or elsewhere—have attempted to engage these populations at the geographic scale of Pehchān.

At the end of the first eighteen months of implementation (1 October 2010-31 March 2012), Pehchān was on target, having achieved or overachieved the vast majority of its indicators and receiving an "A1" rating from the Global Fund. The collaboration that marked the development of the proposal has continued in the program's implementation. Government support has been essential to success, strengthening the program through engaged leadership and a commitment to community ownership of HIV prevention programming beyond the life of the program.

**Combination Collaboration: Success factors to support action for HIV prevention in MSM, transgender and hijra communities in India**



## Conclusions

Even after more than three decades of sustained engagement with HIV, investments in programming targeting MSM and transgender populations remain vastly inadequate. A recent review of donor spending on MSM revealed that barely 2% of HIV prevention funding targets MSM in developing countries (MSMGF, 2011).

The Government of India's support for HIV prevention interventions for MSM and transgenders was established before the Delhi High Court's decriminalisation of homosexuality in 2009. India remains a remarkable exception; in far too many low and middle income countries, the criminalisation of homosexuality is used as a primary rationale for simply doing nothing.

Pehchān experience shows that collaboration—like interventions themselves—need to be tailored to local circumstances. The nature of the Global Fund as a multilateral financing mechanism with its commitment to national ownership enabled the development of a program for sexual minorities in India that might have been difficult to fund through other channels such as bilateral donors or government domestic spending, both of which are subject to more immediate political pressures. In countries without government support for such programming, the Global Fund model can fail sexual minority communities.

Nonetheless, in all epidemic contexts, civil society, government, and donors need to work together to develop and fund a wider range of intervention models—from large scale, national initiatives to smaller, less visible programs—that will address the prevention needs of MSM and transgender communities around the world.

## Acknowledgements

India HIV/AIDS Alliance would like to thank the **Global Fund to Fight AIDS, Tuberculosis and Malaria** for its support of Pehchān and UNDP India for its support of Sashakt. Alliance India is grateful to NACO and State AIDS Control Societies for their many contributions to our efforts. At the heart of the program are the Pehchān teams at the Humstaf Trust, SAATHI, Sangama, SAAP, Pehchān North Region Office and Alliance India Andhra Pradesh whose work supports strengthened MSM, transgender and hijra communities in India.

## Contacts

James Robertson: jrobertson@allianceindia.org  
Sonal Mehta: smehta@allianceindia.org

**Pehchān remains the largest single-country grant focused on sexual minorities supported by the Global Fund.**

## Background

HIV prevalence among MSM in India remains disproportionately high—most recently measured at 4.43% in provisional 2010-11 data from the National AIDS Control Organisation (NACO)—as compared with overall national prevalence of 0.3%. India HIV/AIDS Alliance in consortium with four other organisations implements the five-year Global Fund-supported **Pehchān** program in 17 Indian states to build the capacity of 200 CBOs to serve as effective HIV prevention partners with the National AIDS Control Program and reach 453,750 MSM, transgenders and hijras using a community-driven and rights-based approach. The program represents an active collaboration of civil society, government and a donor committed to improving the HIV response for vulnerable sexual minorities.

## Methods

Pehchān was initially included as part of the HIV component of a Round 8 proposal to the Global Fund in 2008. A group of civil society organisations working with MSM, transgender and hijra communities in India collaborated to develop a proposal that emphasized community systems strengthening as an essential and previously missing element in the government's efforts to control HIV in these populations. This initial proposal was not recommended for approval but was strongly encouraged for resubmission in Round 9 following revision.

Through a collaborative process, the civil society partners, NACO, UNAIDS and the India Country Coordinating Mechanism retooled the program strategy in response to the Global Fund Technical Review Panel's feedback. Additional evidence of the proposed implementation model's feasibility was requested, which led to the development of a pilot program called Sashakt funded by UNDP India from 2009-11.

Further negotiations with NACO led to the alignment of the proposal's implementation model to the national HIV prevention strategy. India's third National AIDS Control Program (NACP III: 2007-2012) had prominently included HIV prevention in high-risk groups through Targeted Interventions (TIs) for sex workers, MSM and injection drug users. Consequently, Pehchān was developed as a mechanism to strengthen CBOs to serve as government-funded implementing partners under the Targeted Intervention strategy for MSM and transgender populations.



[www.allianceindia.org](http://www.allianceindia.org)