



# **Programme Summary**

Avahan, India



# Programme at a glance

The India AIDS Initiative (Avahan) was implemented in six states in India between 2003 to 2014. In the southern state of Karnataka, the primary goal was to prevent HIV among female sex workers (FSWs), men who have sex with men and transgender people through improved service provision. An additional goal was to address the high levels of violence against these key populations through a set of structural interventions, including community mobilisation and empowerment. A repeat cross-sectional study of the interventions with FSWs found that they experienced significantly less violence from clients and the police over the period of implementation. **The Avahan experience in Karnataka demonstrates how FSWs collectivisation and empowerment, coupled with interventions with the police and an effective response system, can reduce police violence and non-partner violence as part of HIV prevention programming.** 

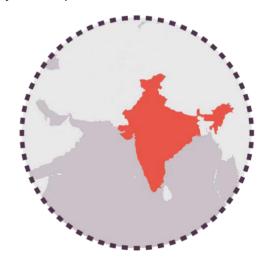
### **Background**

Globally, women in sex work experience high rates of violence, including sexual violence, which elevates their vulnerability to HIV and other adverse physical and mental health consequences. FSWs also face multiple barriers to accessing health care, including accessing treatment for HIV/AIDS, as well as legal services and protection. Combined, these challenges render women who sell sex vulnerable to HIV transmission and other sexually transmitted infections (STIs).

Avahan was developed in 2003 to deliver HIV prevention interventions in six Indian states with high HIV burdens, focusing on groups at high risk of HIV transmission, which included FSWs. Avahan contacted the University of Manitoba (UoM) who partnered with Karnataka Health Promotion Trust (KHPT), a non-governmental organisation (NGO) based in Karnataka, to implement several initiatives under the Avahan programme between 2003 and 2014. Violence emerged as a key concern in consultations with FSWs in the planning stages of the interventions. In response, UoM and KHPT developed an intervention to address violence within the broader HIV prevention programme. The programme was transitioned to the government of Karnataka in 2013, and Avahan's model has now been adapted to more than 15 countries.

# **Programme context**

FSWs in India are exposed to various forms of violence, abuse and discrimination – including physical and sexual violence, and arbitrary arrest and violence from the police.2 Other perpetrators of violence include clients, pimps, madams and intimate partners.3 The challenges FSWs in India face stem from intersecting forms of marginalisation: being women, often being poor and from marginalised castes, and earning their livelihood from sex work. Sex work is not illegal per se in India, however, the law penalises solicitation and those who profit from sex work such as brothel owners. pimps and madams.4 However, sex work is typically seen as immoral and is widely perceived as illegal, including by many police officers and by sex workers themselves.5 As a result, violence against FSWs is widely underreported.



# **Programme description**

The violence prevention interventions were designed to operate at three levels, working with multiple stakeholders:

- Female sex workers (FSWs) as the primary stakeholders - community mobilisation, collectivisation and developing a community-led violence response system;
- The police and judges advocacy and dialogue with senior officials and trainings and sensitisation of police personnel around sex work and human rights;

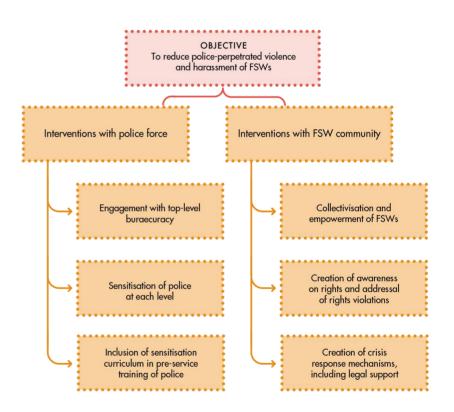
 At the policy level through working with the state government - advocacy work to create an enabling environment for protection of FSWs' rights.

**UoM** and KHPT partnered with local NGOs throughout 18 of Karnataka's 30 districts to deliver the interventions, reaching approximately 60,000 FSW. The partner NGOs facilitated the formation of female sex worker-led community-based organisations (CBOs) in all districts. By the time the interventions were transitioned to Government of Karnataka, female sex worker-led CBOs were implementing programmes in 70% of the districts.

# **Theory of Change**

Violence prevention was not initially an explicit goal of the programme but emerged as a priority for FSW during the design phase. The programme was therefore adapted to address violence as an underlying root cause contributing to FSWs vulnerability to HIV. The strategy had a dual approach: creating an enabling environment by working with the police and empowerment of FSWs.

The empowerment process focused on equipping FSW with skills and knowledge to collectively challenge violence. The work on the enabling environment focused on addressing structural drivers of violence and harassment of FSW by state and non-state perpetrators – with the ultimate goal of reducing police violence against FSW.



#### **Core components**

#### C O M M U N I T Y M O B I L I S A T I O N A N D C O L L E C T I V I S A T I O N

Peer-led outreach: Mobilisation of FSWs was done through peer led-outreach. Peer educators were selected by the FSW community and they received 15-20 days training every year, covering topics such as outreach, behaviour change communication, rights and legal literacy, and services offered by clinics. The training

acknowledged the diversity within the community and the need to tailor outreach strategies and services. The training curriculum was standardised across all districts, but the implementing partners could also add their own topics. The peer educators provided information, condoms, and violence support to FSW in their areas, linked them to services and engaged them in programme activities.

Safe spaces: The early phase of the programme included establishing safe spaces in the form of drop-in centres. The number of centres in each district depended on the population of FSWs and were operated by implementing partners, including sex worker-led CBOs. The centres provided a space for FSW to meet for peer-support as well as practical support. For example, the centres ran skills building sessions, provided clinical services and had spaces for showering, childcare and sleeping. The centres ran weekly peer-meetings that aimed to create a sense of solidarity and collective identity among FSW by discussing common challenges and possible solutions.

Community-based organisations (CBOs): The next phase of the mobilisation was facilitating and strengthening sex worker-led CBOs. Peer-educators held sessions with FSWs in their constituency to discuss pros and cons of collectivisation. Once the CBOs were formed, UoM/ KHPT supported the development of systems for finance and management. By 2010, some of the newly formed CBOs were qualified to receive funding and initiated interventions on their own. A core aspect of the collectivisation process was to foster critical reflection skills for identifying common challenges and needs, and the CBOs provided a platform for forming collective strategies and actions to address these.

Community-led response systems: Community-led crisis management teams were formed in each district to provide support to FSW when they experienced violence, harassment or wrongful arrest. The teams consisted of peer educators (who were sex workers), outreach workers (sex workers or non-sex workers), as well as pro bono lawyers and senior staff from the programme. The team members received five days training in addressing crisis and violence and were provided a refresher training every quarter.

Each crisis team had a 24-hour telephone service with the number distributed to all FSW in the area. When the team received a call, they organised a response team to go to the site of the incident. Depending on the situation, the team would provide on-site support and make referrals to medical, legal, and psychosocial support, and shelter and childcare if needed.

Legal empowerment workshops: 25,000 FSW participated in legal empowerment workshops which were delivered in collaboration with lawyers' collectives. The workshops included case studies to understand how the law applies in different situations that FSW face in their daily work and life, in particular in situations of arrest and violence. The participants also visited the local police station to learn about reporting procedures, including how to file a report on police violence. This also aimed to initiate a dialogue between FSW and the police.

Policy level participation: UoM and KHPT, in partnership with the state government, led the development and facilitation of District AIDS Committees at the sub-national level. The committees included FSW who had received training in advocacy prior to joining the committees. This provided a platform for advocacy around FSWs' rights and issues.

# SENSITISATION AND ADVOCACY WITH POLICY MAKERS AND POLICE

Advocacy with Senior Police Officials: The programme engaged with the highest level of the state government to build commitment and support for the police's role in reducing violence against FSWs. This resulted in the Director-General of Police issuing instructions to all police personnel, clarifying the legislation and how it should be enforced in ways that reduce harm towards FSW and instead target the traffickers and pimps/madams. The message also stressed that any alleged police violence and harassment against FSW would not be tolerated.

#### Regular advocacy with selected police stations:

A mapping was carried out to identify police stations that perpetrated high levels of violence against FSW. The implementing partners visited these stations regularly to meet the officials and sensitise them. They also invited the officials to see programme interventions and learn more about the lives of FSW. This closer interaction with the programme contributed to improved attitudes among the police.

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Training the police: Training of Trainers was conducted involving police officials, staff of implementing partners and FSW. One-day workshops were held with all police personnel at each station in the programme districts. The workshops comprised six sessions to strengthen police personnel's knowledge of the laws related to human rights, women's rights and sex work. The workshops also sensitised the police about the lives of FSWs and the various forms of violence they face. Between 2005 and 2011, 85 senior police officers and 13,594 police officers were trained as facilitators, which was about 60% of Karnataka's police force.

# Police workshop sessions:

- Introduction to the training
- Gender and power relations: contextualising violence against women and children
- Basics of HIV/AIDS: Perspectives, changing attitudes and interface between VAW and HIV/AIDS
- Experiential sharing and VAW with specific reference to women in sex work
- Rights of women and legislations for women (Criminal and Civil Laws)
- Case study: Police procedures and expected behaviour when dealing with crimes and VAW

# Monitoring and evaluation

Monitoring data was collected monthly from each programme district, using standardised indicators to track service provision, service uptake and community activities. Data was captured on peer educator interactions, utilisation of STI services, and operational issues reported by the implementing organisations. To improve reporting by peer educators (who generally had limited literacy) on violence, UoM/ KHPT developed visual reporting tools with pictures.

Besides routine monitoring, yearly anonymous polling booth surveys (PBS)<sup>6</sup> were conducted at population level in all intervention districts to monitor violence and other behaviours. They show that:

- The proportion of FSW reporting being raped (by anyone) in the past year decreased from 30% in 2007 to 10% in 2011.<sup>7</sup>
- The proportion of FSW reporting using a condom with their last client increased from 70% in 2007 to 82% in 2011.

To evaluate the impact of the programme, a series of repeat cross-sectional bio behavioural surveys<sup>8</sup> were conducted with random samples of FSW in four districts, representing approximately 60% of the FSW population in each district. Three data collection rounds examined experiences of police arrest and non-partner violence. The surveys found that:<sup>9</sup>

- Reports of ever being arrested fell from 9.9% to 6.1%, and experiences of past year arrest dropped from 5.5% to 2.8%.
- FSW reporting being arrested as part of an arbitrary, routine police raid dropped from nearly half to 19%.
- Among FSW who had been arrested, the proportion who had received support from fellow sex workers increased from 41% to 70%.
- FSW reporting being beaten by a non-partner in the past 6 months fell from 8.4% to 5.5% – the most common non-partner were clients.

# **Lessons for programming**

The Avahan experience in Karnataka shows that it is possible to reduce violence against FSWs as part of wider HIV prevention programming. This work has generated lessons that can be used when adapting and implementing similar initiatives.

# Importance of listening to community needs:

Violence prevention was not initially a programme objective but emerged as a priority in dialogues with FSW, leading the programme to develop interventions to address violence against FSW. This shows that it is crucial to listen and create spaces for targeted communities to share their needs and priorities. This requires flexibility on the part of both implementing organisations and donors.

# Adapt interventions to the local context:

Even within the same state, the context for FSWs and their needs and priorities varied and a flexible approach was needed. Although implementation followed the same model across programme sites, delivery was tailored to the local conditions and needs on the ground.

Addressing different forms of violence can be a gradual process: When violence surfaced as a key concern among FSW, the focus was on police violence and non-partner violence. As FSW participated in the collectivisation process, legal workshops and other programme activities, they started to recognise and discuss intimate partner violence. This shows that addressing different forms of violence can be a gradual process; some forms of violence may not even be recognised as violence to begin with or be perceived as too private or sensitive to talk about. How to effectively address IPV against FSW requires further attention.

# **Challenges with monitoring violence:**

Monitoring and collecting data on violence against FSW was challenging for several reasons. Surveys would generally find higher prevalence rates of violence than routine monitoring data and reports would indicate. Violence against FSW was likely underreported due to fear of potential consequences, or that FSW did not see the value in reporting. Another reason was that some forms of violence may not have been considered severe enough to report, either by the person receiving the report from or by the FSW herself.

# Sustainability of community-led processes:

The collectivisation and empowerment process led FSW to identify priority issues, take charge and set the agenda. By the end of Avahan, FSW collectives wanted to continue work to address violence, including IPV, which subsequently led KHPT and the CBOs to apply for further grants to continue the work initiated under Avahan. This highlights the sustainability of the empowerment and collectivisation processes.

Violence prevention can be integrated into existing platforms for HIV programming: The violence interventions utilised platforms and structures within the broader Avahan programme. Peer-educators, drop-in centres and crisis management systems were already planned as part of the programme, and the strategy for reducing violence against FSW could build on these platforms. Additional resources were required for developing guidelines and manuals, and for training and capacity building. However, it did not require additional programme structures.

Importance of ongoing engagement with the police at all levels: The programme worked at all levels of the police administration to ensure wide buy-in and commitment from the police to reduce violence against FSW. It was critical that the engagement with the police was maintained through regular engagements. FSWs' participation in police trainings was also critical for police officers' understanding of their situation and the consequences of violence. Given the sensitive nature of the relationship, as the police were both perpetrators and protectors, the programme maintained close dialogue with FSW around their engagement with the police.

Transferring to state leadership: The programme recognised that responsibility for capacity building of the police and systems to support FSW would need to be transferred to government stakeholders and integrated into policies for long term sustainability. Through the programme's advocacy work, the crisis management system has been integrated into key population national guidelines for HIV prevention and sessions on sex workers' rights have been integrated into the national police training curriculum, both pre-training and in-service training.

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Mental health and poverty require further attention: Learnings from the programme implementation and studies stress the need to address FSWs' mental health as well as poverty as part of comprehensive strategies to reduce vulnerability to violence and HIV. There are

several potential pathways through which poverty and poor mental health can reduce ability to negotiate safer sex with clients and increase risk-taking,10 which warrant further attention in interventions to reduce violence and prevent HIV among FSW.

# Source documents

Violence against female sex workers in Karnataka State, South India: Impact on health, and reductions in violence following an intervention programme, Beattie, T. SH. et al. BMC Public Health 2010, 10: 476

An integrated structural intervention to reduce vulnerability to HIV and sexually transmitted infections among female sex workers in Karnataka state, south India, Gurnani, V. BMC Public Health 2011, 11:755

Community mobilisation, empowerment and HIV prevention among female sex workers in South India, Blanchard, A. K. et al. BMC Public Health 2013, 13:234

Declines in violence and police arrest among female sex workers in Karnataka state, South India, following a comprehensive HIV prevention programme, Beattie, T. S. et al. Journal of the International AIDS Society 2015, 18:20079

Strategies for reducing police arrest in the context of an HIV prevention programme for female sex workers: evidence from structural interventions in Karnataka, South India, Bhattacharjee, P. et al. Journal of the International AIDS Society 2016, 19(3)

# Links to further resources

A series of implementation guidelines and resources have been developed based on the Avahan experience, including:

- Peer Led Outreach at Scale: A Guide to Implementation, Bill and Melinda Gates Foundation
- Community Led Crisis Response Systems Handbook, Bill and Melinda Gates Foundation

The Population Council has documented lessons learned from Avahan, which can be found here.

Avahan has been replicated in multiple countries. To learn about the replication of Avahan in Kenya, see this paper.

# **Endnotes**

This document is part of the RESPECT Framework Implementation Guide, commissioned by UN Women and developed by Social Development Direct, which can be found here.

Suggested citation: UN Women and Social Development Direct (2020) Avahan, RESPECT Preventing Violence against Women Programme Summary.

<sup>&</sup>lt;sup>1</sup> World Health Organisation (2005), Violence Against Women and HIV/AIDS: Critical Intersections. Violence against sex workers and HIV prevention. Information Bulletin Series, Number 3

Bill and Melinda Gates Foundation (2009) The Power to tackle Violence: Avahan's Experience with Community Led Crisis Response in India

<sup>&</sup>lt;sup>3</sup> Ibid.

<sup>&</sup>lt;sup>4</sup> See The Immoral Traffick (Prevention) Act, 1956

<sup>&</sup>lt;sup>5</sup> Beattie, T. S., Bhattacharjee, P., Ramesh, BM., Gurnani, V., Anthony, J., Isac, S., Mohan, HL., Ramakrishnan, A., Wheeler, T., Bradley, J., Blanchard, J. F. and Moses, S. (2010) Violence against Female Sex Workers in Karnataka State, South India: Impact on health, and reductions in violence following an intervention programme

<sup>&</sup>lt;sup>6</sup> Anonymous polling booth surveys were designed to minimise reporting bias compared to face-to-face interviews. FSWs were separated from the researchers and each other in a "polling booth" environment where they were asked 23 questions with only yes/no answers.

<sup>&</sup>lt;sup>7</sup> Beattie, T. S., Bhattacharjee, P., Isac, S., Mohan, HL., Simic-Lawson, M., Ramesh, BM., Blanchard, J. F., Moses, S., Watts, C. H. and Heise, L. (2015) Declines in violence and police arrest among female sex workers in Karnataka state, South India, following a comprehensive HIV prevention programme, Journal of the International AIDS Society 2015, 18:20079

<sup>&</sup>lt;sup>8</sup> Bio behavioural surveys were conducted through face-to-face interviews, using a comprehensive questionnaire, which collected demographic information as well as asked FSWs about sex work, sexual behaviour, condom practices, use of drop-in centres and clinics, and violence. <sup>9</sup> Bhattacharjee, P., Isac, S., McClarty, M. L., Mohan, L. H., Maddur, S., Jagannath, S. B., Venkataramaiah, B. K., Moses, S., Blanchard, J. F. and Gurnani, V. (2016) Strategies for reducing police arrest in the context of an HIV prevention programme for female sex workers: evidence from structural interventions in Karnataka, South India, Journal of the International AIDS Society 2016, 19(3)

<sup>&</sup>lt;sup>10</sup> See e.g. Beattie, T. S., Bhattacharjee, P., Ramesh, BM., Gurnani, V., Anthony, J., Isac, S., Mohan, HL., Ramakrishnan, A., Wheeler, T., Bradley, J., Blanchard, J. F. and Moses, S. (2010) Violence against Female Sex Workers in Karnataka State, South India: Impact on health, and reductions in violence following an intervention programme