



Touching Communities, Transforming Lives

Stories of sex workers and MSM in Alliance India's Avahan programme

India HIV/AIDS Alliance

Headquartered in New Delhi, India HIV/AIDS Alliance (Alliance India) was founded in 1999 as a non-governmental organisation working in partnership with civil society and communities to support sustained responses to HIV in India. Complementing the Indian national programme, Alliance India works through capacity building, technical support and advocacy to strengthen the delivery of effective, innovative, community-based interventions to key populations affected by the epidemic. The organisation's programmes focus on those most vulnerable to HIV, with a particular emphasis on marginalised populations including men who have sex with men (MSM), transgenders, hijras, female sex workers, people who inject drugs (PWID), at-risk youth and women, and people living with HIV (PLHIV).

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Acknowledgements

The story book 'Touching Communities, Transforming Lives' is a collection of true stories of female sex workers and Men having Sex with Men (MSM) of Alliance's Avahan Programme implemented in 14 districts in Andhra Pradesh for the past 10 years. These stories were collected through interviews with community members in the field. While names of the community members have been changed, their trials and tribulations, and amazing tenacity and togetherness as depicted in the book, are both real and reflective of the confidence and pride that evolved among them during the programme in AP.

Alliance India Andhra Pradesh commends the courage and self-determination of these women and men who overcome several obstacles in their daily lives to emerge with a smile on their faces.

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I trust that the stories in this collection would make readers more compassionate, caring and supporting of marginalised communities.

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Foreword

Female sex workers (FSW), transgenders (TG), injecting drug users (IDU) and Men who have Sex with Men (MSM) are the most vulnerable and at-risk populations in the context of the HIV epidemic. They are also among those who are the most affected by poverty, gender inequity, stigma and discrimination (both in law and in practice), harmful cultural and religious practices, lack of access to credit, and denial of fundamental rights, including property and inheritance rights. They are especially vulnerable to both social and state discrimination. Criminalisation of activities of these communities acts as a major barrier to their ability to access services in the context of HIV prevention, care and treatment. Laws and social customs in many countries condone discrimination against those populations who are most at risk of HIV, complicating efforts to deliver services and impeding the engagement of the affected populations as essential partners in the response to the epidemic.

The Avahan AIDS India Initiative, a Targeted HIV Prevention Programme for sex workers, MSM and clients of female sex workers in six states was implemented from 2005- 2013 with the support of the Bill and Melinda Gates Foundation (BMGF). India HIV/AIDS Alliance, a state lead partner of BMGF in Andhra Pradesh, implemented Avahan and the Frontier Prevention Programme which covered over 60,000 population including sex workers, MSM, IDU and People who live with HIV (PLHIV) in 116 blocks/mandals in 13 districts. The goal of the programme was to reduce HIV transmission and the prevalence of STI in these vulnerable high-risk populations through prevention education and services. The main components of the programme were condom promotion, STI management, behaviour change communication, community mobilization, and advocacy. Alliance India integrated the creation of an enabling environment to increase the effectiveness of the HIV response through individual and organizational capacity building efforts. During the project period, Alliance India's efforts increased the mobilization of key populations for a collective effort. This was done by addressing community needs, violence mitigation and prevention, improving access to HIV services and improved individual capacities, all of which impacted self-identity, self-respect and dignity of work. This collection consists of stories of sex workers, MSM and transgender communities on their life experiences, and on how the prevention initiative influenced their outlook and aspirations far beyond the programme itself.



Stories from Female Sex Workers





Tackling violence

“There has to be a lasting solution from the women themselves. More control, smarter management of money, more shrewdness in dealing with people. A female sex worker should have control over her income, and we want to make it one of our goals to teach them some financial management.”

In Andhra, as elsewhere, the lives of sex workers are entwined with violence. Most sex workers face violence at some point or another in the course of their work. They are abused, subjected to perversions, sadism, and detention. However, what really affects them is the violence from their own men folk—father, husband, brother, son, lover, temporary husband and regular partner. The reasons range from lack of trust and jealousy, to more serious ones such as property disputes. Invariably, the women end up as victims, losing their security, emotional strength, and, sometimes their lives.

Rama's story is like that of many others. She was wooed relentlessly by a man before she agreed to marry him. Soon after the marriage, the groom was jailed for a petty crime. Rama had to resort to sex work to earn the money for his release. Strangely, on his return home, her husband began to beat Rama routinely, until the beatings became a daily occurrence.

Rama shivers at the very thought of going home. “It seems like an impossible situation,” she says. “He doesn't leave me, he doesn't let me live in peace.” The Community Based Organisation (CBO) is still on the job of bringing the errant husband to heel.

Like Rama, Jaya too dreads going home, where she faces violence on the smallest pretext, for example if she serves a meal late to her partner. Rama does not see much hope but for her co-members, who affirmed they are going to script the ending of violence by themselves.

In a recent event, a senior sex worker was found murdered in her home. The victim's son, the only suspect, had an alibi: he was at his workplace when the murder took place. Determined to nail the suspect, a fellow sex worker group insisted that the police go to the victim's son's office and check the gate register. The gate register confirmed that the victim's son took a break when the murder took place. The police used a few special methods of their own, and the son confessed that he had murdered his mother for her property.

A leading figure in this attempt to solve the murder was a woman called Sujatha. She had to face a great deal of domestic violence during her marital life. In her words, "When I left my house because of my abusive husband, and had to leave a small baby and my son with him, I knew nothing about what I was going to do. I just had a stubborn streak that carried me through." It was this stubborn streak that helped her and other women to solve the mystery of the senior sex worker's death. The death also made them realize how vulnerable they all were to violence from men in their lives.

The CBO discusses domestic violence with special attention at every meeting. Vasanta, Field Coordinator says, "There are many occasions when we meet the men who have perpetrated such violence. We counsel them or hand them over to the police."

As domestic violence is a serious issue, the CBO has started to network with local agencies that deal with cases of violence, keep the police updated about incidents and ensure that these cases are not ignored. At the same time, as Vasanta says, "There has to be a lasting solution from the women themselves. More control, smarter management of money, more shrewdness in dealing with people. A female sex worker should have control over her income, and we want to make it one of our goals to teach them some financial management."

The CBO stands behind its members like a protective family. It hopes that one day soon, Bhadrachalam will be one of those places where female sex workers have achieved empowerment in the fullest sense of the term.

In togetherness is strength

Being a sex worker in a city accords a few advantages such as anonymity and a greater client base. However, the sheer size of the city nullifies these advantages. The anonymity that shields sex workers from prying eyes also leaves them helpless when they face violence from clients whose identity is equally anonymous. When a client insists on going to a place of his choice, the sex worker often follows him without knowing where she is going.

Jayanthi is a sex worker whose silence speaks more than her words. Her friends say that she wanders around in a pre-occupied manner and talks only when she is drunk. She talks about her lost friend Rattamma to whom she could not say goodbye.

Rattamma, a sex worker in the area of Toilchowki in Hyderabad, and a part of the Avahan project, was gang raped and murdered a year ago near Langer House. Rattamma was a beautiful woman. Jayanthi says of her friend, “It was only her husband who forced her into sex work. In spite of all her adversity, she was a cheerful, friendly person, and attracted everyone with her good looks.”

Jayanthi did not see how badly Rattamma was tortured. “Now,” says Anjamma, an outreach worker (ORW), “we ensure that at least two of us stick together, especially in those hotspots that are deserted.”

“It helps us to be alert all the time when it concerns our community.”

“There have been many instances when a sex worker, despite escaping from a violent client, could not get out of the area because she did not know the way. Deserted areas are always a problem. We pay only the policemen posted in our areas, but police from other areas rob us of all our belongings, and demand free sex.”

In another incident, a sex worker was found murdered near a Dargah. The client had smashed her head with a stone, and the body was mutilated beyond recognition. Police sought the help of other female sex workers in identifying the victim, and the culprit too. One sex worker refused to help the police, but when the others sat down with her and talked to her about staying together as a community, she agreed to cooperate. It turned out that the person she had identified was found to be the culprit. Police later found that he had committed 13 murders earlier, all of which had remained unsolved until then.

Another sex worker was kidnapped when she was soliciting a client. The kidnapper and his men tied her to a chair and beat her mercilessly. He claimed that on an earlier occasion, she had robbed his belongings, and he wanted to teach her a lesson. CBO members, alarmed by the absence of their friend for a long time, called her. The kidnapper switched on the lights while the sex worker was answering the call. He discovered she was not the sex worker with whom he had gone out the previous day.

He immediately untied her, took her to a doctor and bought medicines, dropped her home, and apologized for his folly.

“It helps us to be alert all the time when it concerns our community,” says Muttamma. “A phone call actually saved our friend from further violence.”

A rapid action team!


“It takes so much fortitude to bear the troubles in life, and yet the strongest among us cracks up when the pressure becomes too much, when it starts affecting her family, her children.”

Exploitation, helplessness, desertion, surrender: these are the words that mark a woman's journey to being a sex worker. Noorjehan, an outreach worker at Madanapalle said, “It takes so much fortitude to bear the troubles in life, and yet the strongest among us cracks up when the pressure becomes too much, when it starts affecting her family, her children.”

Noorjehan had worked in a government poverty alleviation project and lost her job. She then sought to work in the field, but did not have the physical strength to work continuously for a sustained income. “There used to be so much harassment there,” she says. “If you refused the contractor's overtures, you were either saddled with difficult work, or simply thrown out of work. So I had to succumb.”

Mumtaz was very unhappy being a sex worker, but with three children to take care of, and almost no support, she had no option. She seized the opportunity to work in the HIV prevention project in Madanapalle, where she identified and mobilized over 300 sex workers, and has seen the evolution of the Avahan Project over time.

She narrates the story of her friend Lakshmi Devi from Kalikiri who

A group of women are seated together, likely in a community meeting or a support group. The woman in the foreground is wearing a bright yellow and orange sari with a floral border. She has a bindi on her forehead and is looking directly at the camera with a serious expression. Other women are visible in the background, some wearing colorful saris. The setting appears to be indoors with warm lighting.

had a horrific experience, and how the project team rescued her. A hooligan attacked Lakshmi when she refused his demand for free sex. She was severely beaten, stripped, and dumped in thorny bushes. Unable to move and bleeding from her wounds, she cried out in a hoarse voice until she was heard by someone passing. The man pulled her out, covered her with his shirt, and called the project team after Lakshmi gave him the phone number.

“We were horrified to see the state she was in. If she had not been rescued, she would have died in a few hours. It was a providential escape. We went to the police station and cops found the man within a fortnight.”

The rapid action team from the Mythri Mahila Sangham CBO addressed the issue, and the police took an undertaking that the man would take responsibility if anything untoward happened to Lakshmi again.



Advocacy with the police

Hyderabad is considered a hot bed for sex workers, who are scattered across the city. Over 600 female sex workers were identified in the sites around Hayatnagar, Hyderabad. Avahan's HIV prevention interventions since 2005 have aimed to draw the diverse sex worker groups into a single protection programme.

Most female sex workers travel from villages in neighbouring districts to seek a livelihood through sex work. Street based sex workers constitute a distinct group. They solicit clients at bus stops, theatres, parks, and major city junctions. This group of sex workers is much more vulnerable to not only police harassment and unlawful arrests, but also to physical and sexual violence. The Hayatnagar intervention is a chequered one, with many incidents of violence and harassment experienced by the sex workers.

Soni, an outreach worker says, "Some cops are tough nuts to crack. When we run into a tough cop, we concentrate our efforts on informing and reforming the police officer." Project Co-ordinator Srinivas reiterates, "But it is one police officer who has made life difficult for the women in this area."

The irony, according to the sex workers, is that a woman police officer is responsible for the harassment of sex workers, peer

“We have talked to many police officers who understand our issues and problems. The work we are doing is basically to protect our colleagues.”

educators (PE) and outreach workers. The woman sub-inspector in the area does not understand the nuances of the project, and has been rounding up women, detaining them for long hours, and sometimes even overnight at the police station.

“She doesn’t listen to us, takes away our cellphones, and refuses to look at our identity cards. We just sit there and wait for her to get into the mood to let us out.”

The project team was surprised at the behaviour of the cop. But they understood she was new to the area and did not understand how an HIV intervention programme works. The CBO is now gearing up to once again undertake an advocacy programme with the police. “We have talked to many police officers who understand our issues and problems. The work we are doing is basically to protect our colleagues. Now we need to find another strategy to reach out to this new officer,” Soni says. “We’ll strive to do HIV prevention work, as well as to strengthen our community, through peaceful means.”

The emergence of leaders

Amravati wants to be a leader. She is someone who would like to carry the torch forward, even if support is not forthcoming, until the goal is reached. The determination that Amravati, an ORW with the Sri Kalahasti intervention displays, is particularly noteworthy, given that she had all along been restricted to being a wife and a mother, and had rarely ever crossed the threshold of her home. She depended on her timber merchant husband for everything. The same Amravati one day stepped out of home with the goal of becoming a leader among sex workers.

When her husband died of alcoholism-related ailments, Amravati was devastated and felt completely crippled. She barely knew the world outside her home. She struggled to make ends meet with money left by her husband but soon realized she had to find a job.

“I joined as an assistant in a school where the boss tried to molest me and offered to ‘keep’ me. I was upset and quit that job but could not find any other. It was then that an MSM boy who fetched vegetables for me every day from the market suggested I meet a woman who runs a brothel here.” Amravati was horrified at the thought, but then gradually came to accept the idea, as she had to take care of her children and their education.

“We have to build the capacities of sex workers, unite the community and make them understand that there may be no project tomorrow, yet we have to take care of ourselves.”

“There are many young, unmarried girls in the profession. Often, I am distressed when I see that seven out of ten girls I talk to refuse to understand the peril to their health. But, if there is someone who responds me, I feel rejuvenated.”

Amravati, now a forceful person, commands much respect in her community. “I can pull strings and get loans. I can arrange for business opportunities for any sex worker who wants to get out of the profession. I know many people in high places and I can convince anyone to contribute to our cause,” she says proudly.

Her daughter is studying to become a nurse and her son to be an engineer. She is an icon, an example of a purposeful existence, for most of her colleagues who have seen her evolving from a helpless widow to a confident and discerning social worker.

“We have to build the capacities of sex workers, unite the community and make them understand that there may be no project tomorrow, yet we have to take care of ourselves,” Amravati says.

The CBOs are important training grounds. Reluctant leaders and recalcitrant community members enter them, only to find a new self down the line. It is important for the community that they are groomed well, for they are going to lead from the front when the NGO exits the scene.

Pavana and Savitri went from being insignificant somebodies to fighters. So much so that the CBO has

today pinned all its hopes on them. Pavana was a street child in Chittoor with a carefree existence until somebody raped her. Circumstances pushed her into sex work. She was identified and taken into the project, but was thrown out on account of her wayward and unpredictable behaviour. When Avahan staff later approached her, she refused, citing the previous experience. The staff persisted, though, and convinced her to join the project, and Pavana began to like the experience.

She soon began to withdraw from sex work, and is now totally off sex work. A peer educator today, she is also the CBO's point person. The CBO ensures it sends her to all trainings, because she comes with a lot more experience than others do. She played a key role in establishing the district level network for sex workers. Pavana, like many others, is a leader among her community today.

Savitri Kattamanchi fights. From access to tap water to rights of HIV positive persons, Savitri has fought for everything. As someone who does not openly disclose her vocation as a sex worker, she nevertheless participated in the CBO meetings. The staff remember her as someone who always came late to these meetings and always ended up paying a fine, which she did with a big smile! With one foot inside and another out, she was never quite completely involved in the project.

However, it was her fighting spirit and ability to speak eloquently on any given topic that made her a leader. Savitri maintains that the police should be made to realize that sex workers are a group with rights, and advises community members not to be afraid for example when a First Investigation Report (FIR) is filed. Savitri's advice is that they should demand to know what is written in the FIR. "I have some domestic responsibilities that I need to take care of immediately. Once I am done with them, I will join the CBO on a full-time basis."

The CBO is waiting for her to join them, for she is their *Brahmastra* - an invincible weapon. She is seen to be the most influential and enterprising among them, and one who has the wherewithal and the right contacts. Most importantly, she has an understanding of HIV and related issues, and an empathy for sex workers.

With Savitri and Pavana to lead them, the members of the CBO say they are waiting for the day when they can show the world what they are capable of achieving.

Suicide, the last resort

A phone call that could be about anything turned out to be a friend attempting suicide.

Members of the CBO in Anantpur rushed to Malleswari's place. She was almost unconscious. She was taken to hospital immediately, where it was a long battle for her life. When she walked out of hospital, it seemed like a happy ending to the tragic event. But the battle had just started again for her. Malleswari had never found love all these years, but then met someone who changed her life. She bore him two sons out of marriage. However, he had other plans - he intended to marry another woman. A devastated Malleswari asked him to return Rs 65,000 that she had given him. He refused.

When she went to lodge a complaint, the hostile response confirmed her fears that her partner had already bribed the police. But when she returned to the police station the next day, this time with her friends from the CBO, the Head Constable, amazed by the show of strength, remarked, "So you have a *Sangham*! Why didn't you tell me before?" He summoned her partner and made him agree to return Malleswari's money within 10 days.

The partner, however, continued to threaten her by saying he would disclose her profession to everyone in the village. And that is what he did, when Malleswari discovered he had married, and when she demanded the return of the gold ring she had once given him as a mark of love.

Humiliated, she attempted suicide.

A remarkable initiative

“Whenever I meet another sex worker, I tell her to plan carefully for her future. Nobody can continue in this profession forever and one has to plan for life after ‘retirement’.”

The Sri Kalahasti initiative is a medley of images—images of ordinary people who made a spectacular success of the complex programme, whether or not they won their own personal battles in life.

Lakshmi, an outreach worker, is one such person. The reins to her life, she says “are firmly in my hands”. From what her children watch on television to the dinner menu to financial planning, she decides everything herself. “It is important that we inculcate the right values in our children. It makes them good citizens, and they also learn to take good care of their parents.” The journey has been long for Lakshmi, but in her eyes, has been rather smooth. “There are no bumps in sight either,” she giggles.

“Whenever I meet another sex worker, I tell her to plan carefully for her future. Nobody can continue in this profession forever and one has to plan for life after ‘retirement’. Even if I meet someone who is not yet willing to acknowledge herself as a sex worker, I tell her to accept the fact, for there is nothing wrong in admitting to it. It only does you good.”

Amravati and Lakshmi both work in the same project. One is a woman who has just begun to learn how to walk, still faltering, while another is seasoned and has long forgotten when she last faltered. However, they both work for the same project, cater to a similar set of people, and have been equally successful at it. Each handles people and issues in their own way, achieving comparable results and forging alliances along the way—the way, India HIV/AIDS Alliance works.



Crafting one's own destiny

“ I have always been a bold woman. Now I strive to teach my friends to be bold and to look out for themselves. ”

In the small town of Guntakal in Anantpur district, sex workers do not exactly have choices. However, these women have stood up for their rights and have come together for the cause of collective goals. The women have seen much in life, fought against destiny and faced what life doled out to them. These women have today crafted their own destiny.

Mumtaz, married to a man her family opposed, could not go back to her maternal home when her husband abandoned her twice for other women. Mother to a young daughter, Mumtaz had to take up sex work to earn a livelihood, and soon fell seriously ill.

“I was half dead, in much pain and yet I hesitated to come to the clinic, as I thought appearing here might stigmatize me. After all, I was a secret sex worker but it looked as though the secrecy was going to cost me my life as I could not even go to some other doctor in this small town.” Mumtaz was finally convinced to set aside her inhibitions when Eshwaramma, President of the Pragati Mythri Mahila Sangham and an ORW herself, sternly told her to think at least of her daughter's fate.

“It was just a matter of crossing this threshold and I was totally taken in by the sense of camaraderie here and decided to join the

team as a peer educator,” Mumtaz recalls. She was promoted to the post of an outreach worker in the project in 2004. She says she initially was very quiet. “I am now among the most vocal people here and I am even acquainted with the local MLA,” Mumtaz says proudly.

Fakhrunnisa Begum is another such woman but someone who presents a contrasting picture to the vivacious Mumtaz. Ailing, with a congenital heart problem, Fakhrunnisa had to resort to sex work as a means of livelihood. “I used to feel fatigued and jittery. I was so demotivated and felt I had nothing to look forward to in life.” Contacted by the Avahan team, Fakhrunnisa found new strength to carry on, and joined the team. To her delight, her health improved and she felt rejuvenated as she interacted with other members of the team every day.

“My family has a political background and I have always been a bold woman. Now I strive to teach my friends to be bold and to look out for themselves.”

Fakhrunnisa rescued a girl who eloped with her lover who then left her and absconded with her valuables. Using the good offices of her brother-in-law who is in a senior position in the government, Fakhrunnisa helped to send the girl back to her home, persuading her parents to accept her. “My health is so fragile. I just want to do some good deeds while I can still carry on,” she ends on a poignant note.

The other women in the Avahan team of Guntakal are not far behind in heroic rescue acts. Rama, married to a suspicious man who made her life hell, was between a rock and a hard place as her parents too beat her up when she sought their intervention. “There used to be a sense of rebellion surging inside me but I never knew how to translate it into a better deal for myself in life.”

Needless to say, the project helped her find her feet and Rama grew bold enough to rescue young girls from trafficking.

As for Mumtaz’s daughter, she now attends college. The girl, while not knowing that her mother is a sex worker, is proud of the fact that she is working in a major project.

A new confidence

“Apart from the fact that the project takes care of one’s health, it also gave us respectability in society. In all those years of uncontrolled lifestyle, no one ever bothered to sit down with me and tell me about what I was missing.”

Vasantham knows Bhadrachalam’s streets as she knows the lines on her palm. No wonder, she ran through most of these streets when chased by a jealous partner who tried to pull her out of commercial sex work. “I ran like a deer, agile and excited. I jumped over walls to escape someone who actually was promising to take care of me. That was the age.”

Married when she was barely 12 years old, Vasantham quickly gave birth to two children. She walked out of her home when her husband acquired a lover and turned abusive. Vasantham, then barely out of her teens, left her children at her mother’s place and came to Bhadrachalam. “I cannot say I had a plan. I just thought I would go to the town, do something, some work for my livelihood. And I landed in sex work.” Initially lured by another woman into the profession, Vasantham became a busy sex worker, indulging in major business. She used to be constantly drunk, went to bars, led an extravagant life and had rollercoaster relationships with many men. “I was a totally bad woman. However, I was much sought after. People knew me in all the hotspots, in the market, near the temple and outside theatres. It was then that I met a client, who later became very attached to me. He wanted to marry me and relentlessly tried to wean me away from sex work.”

He waited for her at the hotspots, tried to chase away the clients and tried every trick in the book to stop her from going out. However, Vasantha was too used to the lavish and carefree life. “I never really thought about the future. To me life seemed just perfect. I was popular, I earned a lot of money and could send enough money home for my children. I refused to acknowledge that there were going to be problems.”

Then the Avahan project began. Vasantha adapted surprisingly well to the needs of the project and realized what it had to offer to the community members. “Apart from the fact that the project takes care of one’s health, it also gave us respectability in society. In all those years of uncontrolled lifestyle, no one ever bothered to sit down with me and tell me about what I was missing. It was after I became a part of this project, I realized my partner had a point too,” Vasantha smiles.

Now a field coordinator in the project, she has been involved right from its inception. “The project has defined our felt needs and as we deal with various agencies, we know who has solutions for our problems.”

Years of separation from her children has taught Vasantha that nothing is worth missing their growing years. “Sex work is okay, many times inevitable. But, it is most painful when women leave their children to do this work. Parenting is all the more important for our children as we need to cushion them from this fluctuating, traumatic life and teach them the right values.”

Vasantha says her most satisfying moments in the project come when she is able to gather her community and take concrete steps for their welfare. “There is this sex worker who has two toddlers. We brought her into our home and asked her to manage home and take care of our children while we went out for sex work. Without being a part of this group, I don’t think I would ever have done anything for someone else.”

Tales from the temple town

“I could take a firm decision and marry again because of the project. It is such a useful project.”

Tirupati is the town of seven hills. It is said that PASS, the local NGO, too had to cross seven hills before the HIV prevention intervention stabilized. It was not an easy intervention to manage. The pilgrims, who constitute the major client base for sex workers, are often travellers from other regions. A majority of sex workers here are also from a floating population who travel to the temple town from more than three states. Most of them were runaway children who were eventually trafficked into sex work.

Hyma was one such runaway child. She withdrew from sex work when she got married, and soon became a mother to a son. Life seemed to have returned to where she started, when her husband, a TB patient, committed suicide. He was unable to bear the taunts of people who called him an 'AIDS patient'. Hyma returned to sex work, and a year later, joined the NGO as a peer educator. She was diagnosed with HIV and then re-married, as she says, for emotional support. "I could take a firm decision and marry again because of the project. It is such a useful project. My parents used to be afraid for me when I was a sex worker. They are happy now," Hyma says.

Padma, another peer educator, has a similar story to share. For nine years, she roamed the streets of Tirupati as a street child. She was reluctant to get into sex work, but things became difficult and she had to enter the profession. "There was no choice." An HIV positive sex worker, she was approached by the project staff who reassured her and offered her a job. Now a mother to an 11-year-old daughter, Padma says health was never a priority for her earlier, but now she takes enough care, thanks to the project.

“Ever since I started as an ORW, I have had niggling doubts about whether being a sex worker is such a good option. Every time I went for an encounter or something untoward happened, I thought of my children and what would happen to them if I am no longer around.”

Overcoming obstacles of tradition

Shankaramma is a *Basivini*, a woman married off to the village deity and therefore prohibited from marrying again. She belongs to the remote Bommanahal mandal of Anantpur district of Andhra Pradesh. The area, bordering Karnataka, has the archaic *Basivini* system well and thriving.

At the age of twenty-six, when Shankaramma went to admit her eldest daughter to a local school, she was asked a question she failed to anticipate. The headmaster asked her to write the name of the father of her daughter. “I had no answer. I told him I did not know who the father was. And then I had to tell him my story.” The headmaster’s question came as a moment of reckoning for the frail woman.

Found in parts of Andhra Pradesh and Karnataka, *Basivinis*, like *Joginis*, *Devadasis* and *Mathangis*, are products of a bizarre tradition, in which parents give away their daughter in marriage to the village deities. After consummation of the marriage, either with her maternal uncle or cousin (son of father’s sister), the woman becomes ‘*Ummagattu*’, or the property of the village, free to be exploited sexually by any villager, usually those of the dominant castes and with the means to take care of her family’s needs.

Initially some kind of courtesans, the women eventually turn into sex workers, albeit with the stamp of approval of society. Some areas consider them wives of God, and hence holy, and they are asked to dance before the idols during festivals. They are even believed to possess powers to heal diseases.

“Married off at 14, all I had was to choose who would tie the *mangalasutra* - between my uncle and the priest,” Shankaramma says. She chose the priest and turned into a sex worker soon after as her family could barely make ends meet.

A series of relationships led to the birth of three children, two girls and a boy, and she had to continue in sex work to sustain the family. Until, she was discovered by MEOS staff.

“I was approached by one of the staffers here and they persuaded me to join the project as a PE to teach other women what I have learnt here.” Shankaramma continued in the intervention, now two years old, and became an ORW.

A violent incident in her life was the turning point for her. A jealous partner hit her on the head with an axe, and this, combined with the newly acquired awareness about the risks of sex work, made her rethink her lifestyle. “Ever since I started as an ORW, I have had nagging doubts about whether being a sex worker is such a good option. Every time I went for an encounter or something untoward happened, I thought of my children and what would happen to them if I am no longer around,” Shankaramma says.

The meeting with the headmaster helped her make a firm decision. “He was surprised to know that I was made a *Basivini* at such a tender age and gently pointed out that my children may find it difficult to adapt to my life pattern as they grow up,” Shankaramma recalls.

The 14-year-old girl may have been married to the most eligible bachelor in town, the village deity himself, but today she has no intention of letting her children follow in her footsteps.

She knows she has a tough road ahead. “The children are growing up fast. It is in a way tragic that they cannot relate to the concept of a father. They call my father *Appa* but I know the eldest will soon ask me about it,” Shankaramma rues.

Dealing with one's positive status with confidence

The Sri Kalahasti Frontiers Prevention Programme presents many stories of the courage, hope and confidence of ordinary people.

“I am not afraid to go alone for my outreach work, anywhere, at any hour. Whenever I perceive a threat from someone, I just declare that I am HIV positive. And I am safe.” Humour is not only a tool Manemma uses effectively to melt the resistance of the people she is trying to reach out to, but also it is a banner of revolt – a revolt against adversity.

And who knows better about adversity than Manemma, a 26-year-old woman from Ammupalem village, Sri Kalahasti mandal, Chittoor district? Married at 12, she lost her husband to AIDS when she was 24 years old. She has a daughter who is HIV positive. She was driven out of home by her in-laws and has no assets whatsoever. “And I am HIV positive too,” she adds cheerfully. “You know what, my sister-in-law has just taken away all my belongings. I can’t even offer water if you come to my house,” she smiles.

Manemma’s courage in the face of the adversities she has encountered is remarkable. “I never thought about my tomorrow. My husband and I sold off some land we had in our village and deposited the amount in a bank in our children’s names,” Manemma says.

She worked as a daily wage labourer from the time her husband died. When Manemma joined STEPS as a peer educator for the Frontiers Prevention Programme, her hard work and confidence led to her being promoted to the post of outreach worker. Today, slender Manemma is able to laugh at her relatives’ outrage about the contents of her handbag - a penis model and condoms.

Vannuramma dropped out of school when she was studying in the fifth standard. She is barely literate.

“I was diagnosed positive about seven years back. Ironically, my positive status has injected new determination into me to lead a purposeful life. I want to do as much as I can to prevent HIV infection in my village.”

At the age of 30, she is a worldly-wise woman who can articulate her thoughts on prevention of child marriage, protection of the girl child, prevention of trafficking and even a policy for HIV prevention. “Every man and woman should be tested for HIV before marriage. A certificate should be made mandatory for a marriage. I see so many young girls ending up in marriages of deceit, as they were not informed earlier about the status of the men; they end up being married to an HIV positive person. What makes it worse is that a large percentage of these are child marriages.”

There is no doubt Vannuramma knows what she is talking about. A victim of child marriage herself, she was widowed at the age of 15 barely three years after her marriage. The wisdom that she garnered from living a tough life, deprivation, stigma, harassment and humiliation has made her conscious of the problems underlying the issue of HIV, sex work and social segregation. She is proud of the fact that she could foil four child marriages in her village and help put the girls back into school. “I have three younger sisters. I belong to a backward community. When I lost my

husband, my parents could not do anything for me. I had to resort to sex work 15 years ago. I was diagnosed positive about seven years back. Ironically, my positive status has injected new determination into me to lead a purposeful life. I want to do as much as I can to prevent HIV infection in my village.”

Vannuramma, who works in Rayadurgam in Anantpur district has faced much heckling and harassment from the men in her village who found it hard to accept that she defied stereotypes. “They can’t understand how an HIV positive woman can be so healthy and happy. As I pass them on the street corner, they comment. They say, ‘look at her...she is walking like a queen with her bag.’ I used to ignore them and then tried to counsel them. But it didn’t seem to work.”

Vannuramma changed fifteen phone cards as she was harassed in the middle of the night from strangers insulting her and asking her how she could sleep so peacefully in the night. Things reached an alarming point when five men chased her one evening demanding free sex. She immediately called the Circle Inspector of her area. The cop appeared on the scene within minutes and arrested the men. “Eventually they were counselled by the Inspector who took an undertaking from them that they would not harass me. The incident made villagers aware of some men who are known to trouble women.”

Stigma against the HIV positive person goes beyond the individual and affects the family, as Vannuramma found out when it was becoming difficult to arrange the marriages of her younger sisters. She went to the prospective groom’s house and explained to the family how HIV was limited to her and that her sisters are not going to get it. “It is a tough time in life when you are called upon to be brave and face challenges. Somehow, I found the strength to face the unpleasant task of persuading the groom’s family for the sake of my sisters.”

One of the most deeply satisfying moments for Vannuramma, who is named after her village deity, was when she was able to rescue a young pregnant sex worker from an attempted suicide. The girl said she could not keep the baby and wanted to kill herself. Vannuramma took care of the sex worker until the baby was born. “The mother would have killed the baby and when I tried to tell her it is a sin, she challenged me to take the baby and bring her up. That is exactly what I did.” The one-year-old baby is now the second reason for Vannuramma to lead a healthy positive life!

Bringing hope to others' lives

“I was indifferent to the presence of other sex workers in my town. I barely said hello to them. Nevertheless, when I joined the project, and they continued to ignore me, I could not take it. I persisted and soon won over their confidence. Most of them are now active participants in project activities,” says Radha, an ORW in Jagitial in Karimnagar district.

A freak mishap at a paper mill in Salem, Tamil Nadu changed Vasanta's life. She not only lost her fingers but also learnt that she was HIV positive. Unable to bear her mother's insults, Vasanta left home and reached Jagitial. Her HIV status was confirmed during surgery for appendicitis. She was referred to Osmania General Hospital in Hyderabad for further treatment, where she was shocked by the apathetic attitude of the staff. “My case file had ‘HIV+’ written in big bold letters on the cover. I was different.” It was then that Vasanta decided she had to do something for people living with HIV. She stumbled upon the Avahan programme and has stayed with the programme ever since. Today she works as a field coordinator.

Vasanta and Radha are friends with a cause. The small town of Jagitial has more than 600 identified key population (KP)

“We never ask the community to quit sex work or to join the project. We just tell them that no matter what you do, take care of yourself. We tell them about availability of health care facilities at the Drop-in-Centre (DIC), and encourage them to drop by to see it for themselves.”

members, and it is their mission to have each one of them protected from HIV.

“We never ask the community to quit sex work or to join the project. We just tell them that no matter what you do, take care of yourself. We tell them about availability of health care facilities at the Drop-in-Centre (DIC), and encourage them to drop by to see it for themselves.”

“For people like us who spend a lot of time talking to the community, it is essential to be able to disseminate proper information. We have been doing this effectively for a long period. We are much sought after for the health tips we give.”

Vasanta and Radha have a magnetic effect on the community around them. Their words of reassurance and their presence mean a lot to the others. Many people living with HIV tend to withdraw and shy away from others, including their own family, and it is to such people that Vasanta and Radha reach out.

It has been 15 years since Vasanta met with that fateful accident. She continues to stay healthy, defying stereotypes about what an HIV positive person looks like. Her healthy lifestyle and proper care are what made it possible, says Vasanta. And that is what she tries to teach the others too.


“Hug me,” she says to a hesitant positive person, and there is a bounty of smiles. For her, there is much hope, health, and life left.



From despair to hope

When Tara's father remarried, she was the first born (and the only daughter) of the three children he had with his second wife. Her father had ten children from his first marriage. When she was five, her parents sent her to stay with her grandmother in Bangalore. Growing up in a different city, she missed her parents and insisted on coming back. She returned after three years. "My mother was scared to show any love for me because she thought that the children that my father had with his other wife will think she is being partial to me. She got so scared that she used to beat me, push me away. Seeing her behaviour, my father sent me as a house cleaner to Chennai. I was just 8 years old," says Tara. There, she was made to work very hard, and was harassed. "I silently bore that torture for three years wondering what kind of parents would do such a thing to their daughter. When my father came to take me back four years later, I flatly refused to go with him. I was so angry. But he got me back anyway," she adds.

Just four months after she returned home, her father died. Although they had some ancestral property, her father had squandered it on drinking. By the time he died, they did not even have the money to pay for his funeral. Tara said her uncle sold the last piece of land for funeral costs but spent only a part of it on

A photograph of two women and a child sitting on the floor, smiling and working with colorful flower petals. The woman on the left is wearing a yellow and black striped sari. The woman on the right is wearing a blue and white striped sari. The child is sitting between them, looking towards the camera. They are all smiling and appear to be in a joyful mood. The background is a simple room with a grey door.

“The NGO taught us how to talk to the media, how to fight for our rights. I had the confidence that if something goes wrong then they are there to support me.”

the funeral; he did not return the remaining. After her father died, all their relatives avoided them, as they did not want to support the family financially. It was left to Tara and her mother to take care of the family. As she did not want her brothers to suffer as she did, Tara started to work as a fruit-picker. She was paid Rs. 12/- for a whole day's work. With that money, she bought food every day. She and her mother used to wake at 4 in the morning and go to the forest to get firewood. They would bring home a bundle in the morning and another in the afternoon as they could carry only one bundle at a time. "If we sold the bundle in a house, we got Rs. 5/-. However, if we sold the same to a hotel, we got Rs. 6-7/- . Even that small difference of a rupee mattered a lot to us in those days," recalls Tara.

In 1992, unable to make a living in the village, Tara and her mother moved to a nearby town. There they started working as house cleaners. Around that time Tara, then 13 years old, fell in love with a person who was in his early twenties. He convinced her that marriage was in the offing but because they needed money, he and his mother asked Tara to opt for sex work. She resisted. They then hit her, and threatened to starve her family. When nothing else seemed to work, they finally gave her heroin in her food. In the two weeks of unconsciousness that followed, Tara was sexually assaulted.

When Tara resisted the assaults, she was burnt with metal rods. With her survival at stake, she finally became a sex worker. Among her clients were village heads and even an elected member of the Assembly. She began to solicit sex at the bus stop in the next town. At times her husband used to accompany her and find clients, wait outside the lodge, take the money from her, and then leave. Tara became pregnant when she was 16. A boy was born. When her husband said that the boy was not his son, Tara told him, "You are the one who put me in sex work. He is your son, like it or not." He started staying at home and took care of the son while Tara went out to work.

Because her husband was of a different religion and caste (a *harijan*), the religious head ostracized them and did not allow her brother to get married in the village mosque. Tara took him to the next village and got him married there. She also gave a big party for her son's circumcision ceremony in the same village to show the villagers that she did not care about what they thought about her life.

In 2000 Tara became friends with Pauna, a local sex worker in the same town as her. Pauna gave Tara a lot of support and the confidence to face her husband. She told Tara, "Why do you have to sleep with

others to take care of your husband and put up with his harassment?” This question got Tara thinking. One day, her husband got drunk and hit her with a stick. She had to get 14 stitches on her head. She went to the local police station and lodged a complaint. She told them that her husband pimped her. Police tried to question her family. They even asked her brother to tell her to stop sex work. Her brother flatly refused, saying, “Because of her sex work, we survived. There was no one to take care of us and she suffered so that we could live. I have no right to tell her what to do. She can do what she wants.” Tara got divorced from her husband after this incident.

In 2003 her brother died in a road accident while he was working as a lorry driver. Around that time, Tara met another person and fell in love with him. When he wanted to marry her, she talked to her younger brother, who worked as a carpenter, and with his consent she married him.

In 2004 Tara joined an NGO called WINS that was working for people living with HIV. They told Tara about HIV and STI, safe sex, and their rights as sex workers. The NGO also facilitated their HIV testing. Tara found out that she was HIV positive. The results shattered her. She immediately got her lover tested; he was negative. She got his blood tested again a few months later just to be sure. He was still negative. She asked him to leave her because she wanted him to be safe. She even got him married to another person. Tara says he now stays in Kerala, where he has a son from his second marriage.

In 2009, when she was a member of WINS, a media person who came to know about Tara contacted her. He told her that the information on her would be presented anonymously and went on to take details of her life. “But when it came in the newspaper, they clearly mentioned the village name and my father’s name, although they changed my name,” says Tara in anger. “It was so easy to identify it was me. In the article the writer mentioned that I was a sex worker and I had AIDS, a very deadly disease.” Tara then gave an interview on MAA TV. She narrated her story and it was telecast all over the state. She talked about HIV and how she got it. She also explained why people should not fear HIV or her. The TV show provided courage to other sex workers like her. She became an instant celebrity and was recognized for her courage in disclosing her status.

“All this became possible because of the support I received. The NGO taught us how to talk to the media, how to fight for our rights. I had the confidence that if something goes wrong then they are there

to support me. For instance, seeing the TV programme, my property owner wanted me to vacate the house. I said I have every right to live there like others. I wouldn't have thought I could speak like that if I had not joined the CBO," says Tara with pride in her voice.

Seeing how strongly she fought for her rights, the villagers changed their attitude towards her. They realized that she was a very courageous and resourceful woman. Tara began to be invited to various village functions. The villagers made her a part of the discussions held on any problem or conflict in the village.

Small steps forward began to make a difference in Tara's life. When she went to apply for a ration card, she was asked, "Oh, aren't you the prostitute they showed on TV?" She answered "What has that got to do with getting a ration card? I'm an Indian citizen too and I have my rights." Very soon, she got the ration card. Now she has a house loan approved and is planning to build her house soon. "I want to leave my rented place only if I have a house of my own," she adds. She also has an *Aadhaar* card and an *Aarogya*sri card as well. In addition, she received a land *patta* through a government scheme.

Tara's son is working as a carpenter now. She hopes he will go to Kuwait someday to earn a lot of money. When he recently came to know that she was HIV positive, he left home in fear, but returned after he understood that it was not a deadly disease. Now when anyone asks him what his mother does, he says with pride that she works for an organization that works on HIV prevention.

Tara has been put on anti-retrovirals only recently because of jaundice that reduced her immune system. She was hospitalized for three months that resulted in a debt of one and a half lakh rupees. Talking about her debt, she says, "I took some money on high interest to take care of my life and medical expenses for the months I didn't work. Now I pay Rs.6000/- a month just as interest. I am hopeful that with my son working and with me returning to work again, I will be able to repay the loan soon."

Currently, Tara is the president of a district network of sex workers. "From a simple girl in a village to a network president, all this was made possible thanks to work done by Alliance and other NGOs. They gave us confidence to lead our lives," admits Tara.



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A woman of substance

“They call us sex workers because we sell our body but why don't they have a name for those men who use and abuse us for sex?”

“It all started because I was a girl,” says Anjali, now 38. “I was one of 3 daughters to my parents, I had one brother. Our parents always treated us differently from our brother.” Her father died when she was young. As they were poor, her mother sent her along with her sister to their grandmother's house. When her grandmother became too frail to take care of her, she returned to her mother. After getting two of her sisters married with decent dowry, her mother found a man who would live with them as her brother had by then joined the army and they felt that he would never come back alive.

In 1992, when Anjali was married, she had no idea what a marriage or a relationship was. She wanted to study, not marry, and even attempted suicide to avoid the wedding. Nothing worked. She thought she had found a nice husband, but he was a drunkard and squandered money. Very soon, he and her mother started fighting and one day, her mother kicked him out. “I didn't want to go with him because he was very abusive but my mother threw a rope at me and said I either go with him or I hang myself. So I left,” says Anjali.

They moved to Vijayawada where Anjali started working in a

hotel, cleaning dishes. Her husband started harassing her, saying he needed dowry. When she was 6 months pregnant, he kicked her out of the house. Her mother did not accept her back. Relatives fed her for some days and then gave her money and put her on a bus. She moved to Chennai and started doing odd jobs. She delivered a baby there. Not in a position to take care of the child, she left the baby with her husband and started living alone.

In 1994, she went to Delhi on the advice of someone who said he had found a good job for her. When she entered the gate, she saw women drinking alcohol and smoking. It took her some time to figure out what had happened: she had been sold for forty thousand rupees to a brothel. She stayed in the brothel for 22 days and cried with every customer, wanting to escape. At a customer's advice, she met the 'madam' of the house, fell at her feet and wept. She was set free but not before having to part with all her belongings and money. She returned to Chennai empty-handed.

Anjali started doing odd jobs again, living in a hostel. Everywhere it was the same story: she had to sleep with her employer to stay in the job. One day she met a person whom she fell in love with. He was a 'radical' and worked in villages. Anjali started working with him. She went through multiple abortions as she came to know he was already married, with two children. Then she had a son with him. Knowing that he was not going to look after the family, in 1997, she left for Tirupati to find a job. However, he followed her and asked her to leave his son with him.

In 2001, her lover fell sick. On March 19th, on her son's birthday, when she visited them, he was bed ridden. His family lied to her saying it

was measles. He had HIV. The news leaked and villagers got scared. They thought HIV would spread even if they bury him in the village, so he was ostracized. A pastor kept him in the Church where he died on the 9th of April. When Anjali returned to Tirupati, she was tested and found to be HIV positive. “The world came crashing down around me. I took sleeping pills and lived in a daze for two weeks. I thought I’d die soon,” says Anjali. Her partner at the time suggested moving to a new place, hoping things would improve. However, there he started getting drunk, abusive and very violent. Through a person to whom she narrated her story, she was put in touch with a pimp in Tirupati.

“That is how I got into sex work. I was the same person who fled the brothel in Delhi. Now I had to take up sex work willingly to make money. I thought if the men are paying me Rs.700/- or Rs. 800/-, instead of using me free for sex, why should I not be paid for sex? They call us sex workers because we sell our body but why don’t they have a name for those men who use and abuse us for sex?” says Anjali. She got into sex work because of her son’s education expenses. She brought her son from the village and enrolled him in Balmandir, a welfare hostel in Tirupati. “I thought if I die at least the Tirumala Tirupati Devasthanams (TTD) people will take care of him. In those days, they would not even give a glass of water to HIV positive people in villages. So I didn’t have much hope about my future,” says Anjali.

Soon, Anjali came to know that if she went to Mysore for sex work, she would make more money. So she moved there, worked day and night, having 20 or more encounters a day, and made money. She was paid Rs.100/- per encounter. When tired, she drank a bit to relax at work, otherwise she never drank at home. “By drinking, you gain confidence. How else would you get rid of shyness and fear to go and stand on a street looking for men? Alcohol helps in reducing the inhibitions, and that’s the reason why many of us drink,” says Anjali. She started saving money; however, she shopped for nice clothes, as she had to compete with younger sex workers in looking good.

In 2005, she ran into an ORW from WINS, an NGO working with sex workers and PLHIV. They told her about nutrition and health, they told her how to take care of her body. The antiretroviral therapy (ART) medicines were not available easily back then. WINS inspired them to lead a healthy life. Every month on the 24th, they held a meeting for PLHIV at the NGO. Anjali eagerly looked forward to that day. They sang, danced, and felt like one big family. The NGO also helped Anjali open a bank account, counselled

“ Without the NGO I would have committed suicide by now. The NGO gave me support and confidence to lead my life. They gave me the strength to disclose my status to doctors. So far, no doctor has discriminated against me based on my HIV status.”

her, provided STI treatment, access to condoms, and legal advice, told her about human rights, and helped her in solving many problems.

Anjali always insisted on using condoms with her clients. She told them, “You don’t know who all I’ve been with and what all I have. So use a condom because you have family and children and I do not want them to face any problems.”

Now, thanks to the support from the NGO, Anjali is confident enough to speak to newspapers. WINS also told her that the funds would eventually run out. The sex workers got together, and formed a CBO called PASS, and set up a system of membership fees. They elected an Executive Committee, and undertook various activities. Once the CBO was formed, they went to the Collector for support, to avail of subsidized rice and kerosene, to avail of housing schemes and widow pension. They went to the Mandal Revenue officer (MRO) and told him their stories. He supported them in getting ration

cards and access to various schemes. A TV reporter too helped them in obtaining ration cards by giving the issue media coverage.

Anjali was told that she could apply for a ration shop because she was a widow. She went to the MRO who then put her in touch with the Rural Development Officer (RDO). Knowing that she was a PLHIV and that she needed to stop sex work, he immediately sanctioned a shop for her. Anjali has had the shop for four years now. She now has 3 flats, rupees 10 lakhs worth of gold and has fixed deposits.

It was all going well until July 2006. Anjali suddenly fell sick. There was no ART available in Tirupati then. She got back in touch with her sisters. First, she tried to lie about her past but very soon, they confided in each other and realized they were all in the same situation. “We cried a lot. I did not tell them that I had HIV; instead, I told them that I had some cancer. However, my elder sister suspected it was HIV and assured me that it was fine to disclose the status. When I did, she accepted it easily, although my brother-in-law was a bit scared. She took me to Kilpauk Medical College (KMC) in Chennai. There I found out that my CD4 was 33. They did tests and ruled out TB. I could not eat anything. I used to drink rice broth for the most part, after the food had been ground,” recounts Anjali about those difficult times.

At the Freedom Foundation, an NGO that works with PLHIV, a doctor named Ramesh was supportive. He put her on treatment, suggested an endoscopy, which later showed that she had TB. Her neighbours supported her by bringing vegetables and fruits. Her sister bought her a pressure cooker so that she did not have to struggle to cook. It took her 6 months to recover. “During that time, even my clients visited me and thanked me for insisting on using condoms that saved their lives. They still respect me for that.” says Anjali.

On one occasion, her son found a condom in her bag. He was very upset and confided in his uncle. As the uncle knew Anjali well, he told her son that she works for an NGO on HIV prevention, and condom distribution was part of her job. That reassured him and allayed his doubts.

“Without the NGO I would have committed suicide by now. The NGO gave me support and confidence to lead my life. They gave me the strength to disclose my status to doctors. So far, no doctor has discriminated against me based on my HIV status,” says Anjali.

Keeping check: CBO-led monitoring

The stack of files is visibly the owner's pride and should be any government department's envy. They are neat, well classified and accessible to anyone whose business it is to ensure the smooth functioning of the CBO Pragati Maitri Mahila Sangham, an Avahan project in Guntakal. The CBO with 1500 members is a force to reckon with in the area. The group has diversified its activities, creating a role for everyone and finding solutions for every kind of problem.

"We have a Voluntary Action Team (VAT) that addresses crises. Very often, we get frantic phone calls about violent incidents, or about some rescue that is needed on the spot. Our friends call us about hooligans harassing them or cops who detain them. Then there is no time to waste and we swing into action," Eshwaramma, senior-most among the ORWs and the president of the CBO, says. "We choose those with the strongest voice to be members of the VAT. It's a three-tier plan, the VAT responds immediately, then the CBO formally represents the person in question and if either of these doesn't work, we take legal recourse." The CBO has plans to educate its members about their rights.

The sex workers formed a self- help group, explored income generation options with embroidery units, with units making leaf plates, spices, etc. They have a blood helpline, in association with another organization Jana Vignana Vedika and participate regularly in the Pulse Polio programme, volunteering to give

“ We change positions of power every now and then so that everyone gets a decision-making role in rotation. ”

polio drops to all the children in the town.

The CBO has formed four core committees – a Government Schemes committee that keeps track of benefits that government gives, a Health Protection Committee, a Women’s Empowerment Committee that conducts training programmes and imparts skills, and an Economic Development and Resource Mobilization Committee that plans for the future of the CBO and organizes donations and fundraisers. These are apart from the Voluntary Action Team and a Disciplinary Committee ‘that spares no one in the hierarchy.’

The Committees are not just for show but meant to be inclusive, drawing in everyone into the processes that make for a successful CBO. “We change positions of power every now and then so that everyone gets a decision-making role in rotation,” explains Mumtaz, another ORW.

The sex workers now directly correspond with the police and officials. Everything is on record, well documented and maintained. While police seek their help in anti-trafficking efforts, the community proudly claims that even the general population comes to them for help to settle a property dispute here, a marital discord there or even to counsel young people to take their education seriously.



Democracy in action

On a hot afternoon in Khammam, while the dust kicked up during the recent Indian general elections was still settling down, voters, candidates, polling officers and external observers for CBO elections congregated in a small hall on the outskirts of the city. The elections to the leadership of 'The God Teresa Mahila Mandali' CBO in Khammam were about to begin and the excitement was palpable.

Neatly organized chairs from the morning session were found scattered by the time lunch began. The hum of whispers, which had been subdued until then, reached its crescendo. Impromptu parleys marked the

lunch break as women huddled together to discuss whom to vote for.

Nominations were invited three weeks earlier from interested key population members to contest the elections for the posts of the president, vice-president, and treasurer. Nagamani and Srinivasa Reddy, both KPs from Tirupati in Chittoor, took on the job of introducing the contestants to the gathering. As each of them was called on to the dais, they lost no opportunity to convince the voters to give them a chance. Eloquent speeches were made, promising actions that could very well change the course of the CBO.

A few posts went for up for grabs immediately, but it was a confident woman who stunned the gathering. Though she was unanimously elected as the treasurer, she invited anyone from the crowd to contest against her. A thunder of applause rose from the gathering as another KP accepted her challenge and entered the fray.

The voting process for the remaining seats soon started and women formed serpentine queues to cast their votes through secret ballot. Volunteers guided voters through the process, and to check any double votes, the left index fingers of voters was marked with ink. The voting process being over in an hour, counting began on the dais itself. As the contestants oversaw the process, the results were declared in a short time.

What happened next took everyone by surprise as the 'winners' and 'runners' were all cheered. This response from the community was because they did not want to make anybody feel less special. Democracy is what the event was all about and strong bonding means more than anything else does!

The CBO: a friend in times of need

Usha's parents died when she was six years old. They used to live in Manuguru, a small village near Vijayawada. Usha had another sibling, a brother, who was younger than her and needed care. Having no source of income, they moved to Vijayawada in search of employment. Very soon, Usha found herself working as a domestic help and living off whatever was given to her. She never went to school.

Staying with a woman who provided her shelter, Usha was married to an auto rickshaw driver upon attaining puberty. A son was born a year later. Her husband was an abusive alcoholic who harassed her and squandered all the hard-earned income on gambling. He even stopped coming home a year after the marriage. Usha cut her hand to show how much she cared for him. But though she was hospitalized, he did not come to see her. She carries a scar on her left hand.

With a small child, Usha did not know where to go. In construction activity, there was no safe place to leave a small child and work. Through some known person, Usha found work in an NGO. Very soon, she started sex work along with her job to supplement her income. Usha's influence grew and soon she was providing sex workers for others. She became active in mobilizing women for political causes and her popularity soared to the point where she was being asked to contest as a ward member.

During this time, she fell in love with a man across the street, a Muslim who worked in a jewellery store. But this led to her getting threatening calls. Having no other choice, she

“Before they used to snigger at us, look down upon us. But now I can proudly claim that I have helped my community members in a significant way.”

eloped with him to Kothagudem, a place far from town. In Kothagudem, her partner started driving an auto. However, the money he brought home was not sufficient to run the family. Usha started sex work again. She found clients when her partner was away, and made money to send her son to a good school. While operating as a sex worker, she was approached by an ORW who told Usha about a CBO that worked for the welfare of sex workers. Usha joined the CBO and was happy to meet other women like her who got into sex work because of harsh circumstances. She also found friends she could rely upon in times of need.

The need came in the form of an accident faced by her son. She had an *Aarogyasree* card that covered nearly rupees 1.5 lakhs of the total expenses. When the CBO members came to know about her predicament, they all pooled the money together and gave it to her. “I can’t tell you how blessed I feel because of this,” she says with tears in her eyes. “They were so selfless in helping me out. My own family would not have done it.”

As part of her CBO work, Usha has ensured that other women like her gain access to social welfare schemes. Getting a ration card, or an *Aarogyasree* card, without facing any discrimination has been her priority. Now she goes to government offices and faces the officials to push the paperwork. Usha says, “Before they used to snigger at us. But now I can proudly claim that I have helped my community members in a significant way”. She also believes that her work at the CBO has resulted in better health in the community. She takes it seriously to educate other women on HIV and to promote safer sex practices.



One step at a time

Chukkamma, now in her early forties, was born in Dornakal. She is the youngest in the family, and has four brothers and two sisters. The parents were very poor and migrated to Kothagudem in search of employment. At 13, she was married to a man and sent with him after the wedding. However, she had a mentally challenged husband. She was unaware of it until she got married. She had three children with him before her husband left home and started to wander on the streets. Having no social support, she returned to her family in Kothagudem. Having no one to take care of her family, she found work in brick kilns and construction sites. Men at work started approaching her for sex, offering money in return. As she was in dire need of money, she agreed. That is how Chukkamma became a sex worker.

Chukkamma did not know anything about STI or HIV at that time. She always had unsafe sex with her clients. However, she never developed any complications. As a part of her sex work, she started going out of town; she used to get picked up by men

in lorries on the highway and she worked all night, hopping from one lorry to the other, and came back home a day later with money to buy food.

One day Chukkamma met an auto driver whom she really liked. He became a regular partner to her. He promised her a safe and comfortable life and asked if he could live with her. She was happy and agreed. He told her that to make more money they need to have more autos. Chukkamma worked day and night and saved enough money to buy three autos. Now they had four autos. She also bought some gold for herself.

On one of her sex work trips, Chukkamma ended up in Bhadrachalam, a big town with a large migrant population. There, at a truck stop, an ORW who was working for Mythri clinic approached her. The outreach worker told her about STI and HIV and asked her to get tested. She agreed. The results showed that Chukkamma had HIV. She returned home and got her partner tested. He turned out to be positive as well. She felt her world had suddenly crashed. She was depressed and felt completely lost for many days.

The woman who got her tested told Chukkamma about a clinic in Kothagudem, the area where she lived. She visited the clinic that was associated with a CBO called SECURE. There she met other sex workers and learned a lot about her rights and sexual and reproductive health. She also met other HIV positive women like her. They all gave each other support and discussed ways of improving their health. She started taking care of herself again and continued her sex work but always with a condom. When a position became vacant, Chukkamma joined as an ORW and started working for the community. Wherever she went for sex work, she distributed condoms and registered other women like her into the CBO. She educated others on STI and encouraged them to go for regular medical checkups.

It was at this time her partner left home with all the autos and the gold. Chukkamma traced him with the help of friends. When confronted, he even insisted that the land belonged to him. He threatened to go to the police and tell everyone that she is a sex worker and that he had gifted all the money and valuables to her. Chukkamma took support of the CBO members. She went and lodged a complaint against him. She called for a public meeting and told everyone the entire history, seeking their help in getting her valuables back. Hearing her story and seeing her confidence, they all agreed that her partner had no

“ It’s an uphill task to get equal rights for sex workers like us, but we win it one step at a time. ”

right over the autos or the valuables. With the CBO’s help and the public on her side, she got the autos and gold back. Her partner was warned of legal action if he showed up at her place ever again.

Now Chukkamma is actively involved with the CBO. In the recent elections, she contested for the post of CBO president and won. Now she heads the CBO and says that she is planning to form three more CBOs in the nearby area.

Chukkama wants all the community members to know that they are at risk of HIV and they should take precautions and come for regular testing. Under her leadership, the CBO members have organized rallies on World AIDS Day. When recently a sex worker’s aunt was murdered, she organized a candle light vigil to protest the incident. Due to their efforts, the culprit was caught and jailed. “It’s an uphill task to get equal rights for sex workers like us, but we win it one step at a time,” she concludes. “Slowly but surely we’ll get there. I’m confident.”

The CBO: a turning point in life

Now thirty-eight years old, Vijaya's life has been full of hardships. Her mother took to sex work right after her father left the family when she was four years old. Even at that tender age, she was made to baby sit for her younger sister. Her mother never took care of her, so Vijaya had to beg on the streets to feed herself. She neither went to school nor had any friends of her age who she could play with. "I don't know how I grew up, honestly," she says. "Everyone thought I was crazy and never bothered to find out how I was doing."

When she was ten, she was sent to a house in Warangal to work as a house cleaner. Two men of the house raped her. "I didn't even know it was rape until later, but all I knew was that I didn't like it," she says. As she could not stand the sexual harassment, she returned to Kothagudem to be with her mother. Her mother, from the time her father left, had taken to sex work and brought men home. "I remember how bad the times were then," says Vijaya. "I used to hide and sleep under the bed while my mother got clients home and slept on the bed. The sounds I heard still ring in my head." Unable to take this any more, she moved to an aunt's house and lived in a shack beside the house. For the most part, she begged on the streets to eat.

Vijaya did odd jobs to keep herself going. As she had no one to turn to, she depended on talking with strangers to make friends. This led to many men sexually abusing her from a very young age. "But having seen my mother do it, I never felt odd about it," she says. "Moreover, the men used to give me something to eat, which I thought was nice. I thought that's how the world works." She worked in a rice mill nearby, and at times, she worked

in construction sites. “I used to work for days without end as I didn’t want to come home. I remember working for three days non-stop a few times because that used to get me extra money,” she sighs.

When she turned 15, she was married. She had three children from that marriage. When her aunt fell sick, Vijaya noticed that she used to frequent a clinic regularly. Her aunt told her that she has HIV and the clinic she was visiting was called Mythri clinic. She followed her once, and there she met a woman who asked about her health. Vijaya told her that she had some white discharge every now and then and that her abdomen hurt at times. Knowing her sexual history, the woman suggested that Vijaya get tested as well. “I had an STI but no HIV, thankfully,” says Vijaya. “I was so relieved.”

Seeing that Vijaya was in need of a regular job, the woman offered her a job at the clinic. Very soon, she found herself meeting sex workers. “Until then, I didn’t know I could charge money for sex,” says Vijaya. “Only after starting work at the clinic did I realize that I could make money through sex. I started charging people. I made enough money to send my children to school and raise them well.”

Vijaya used her money judiciously. She bought a small house. She bought some gold. She also saved enough and got her eldest daughter married by paying a decent dowry. Now she is a grandmother. Vijaya is planning to get her next daughter married in May.

Vijaya feels that her involvement with the CBO has been a turning point in her life. She has come to know about HIV and STI so she can take precautions. She believes that because of the awareness about HIV and the use of condoms she is still free of HIV. She also learned how to negotiate safer sex practices. Her work at the CBO has led to increased awareness levels among the community. Describing how the CBO members help each other, she says, “When I bought the house, the neighbors raised a hue and cry, saying I was a sex worker and I shouldn’t be around. I come from a slum and most women there are sex workers. I took the CBO members to my neighbourhood and everyone realized that I know what I’m doing and that I have a say in my life. From then on, they left me alone.” Vijaya now has a partner. She lets out a small portion in the house for other sex workers in need. They take shelter there until they get back on their feet again.

Working together: advocacy with health care professionals

The Avahan HIV prevention initiative has faced challenges on many levels. It has also achieved results on many levels. Tadipatri's breakthrough came in the form of making possible fruitful interaction between doctors who provided services in the government sector and the key population, which had no choice but to access those very services.

This small town in Anantpur district in the Rayalaseema region is a hub for industrial activity and a transit point for thousands who travel from one district to another. When the HIV intervention was launched in December 2006, the project team found it difficult to zero in on the vulnerable population as floating, migrant sex workers and clients constituted the main base.

About 500 sex workers were identified in the initial months with truckers and workers from granite, cement, steel plants and beedi factories forming the bulk of clientele. "I have been a sex worker for many years. I was not open about my work and barely knew any other sex worker in this town. But when I joined the project as a PE I began to discover many layers in my own town," says Munni who went from being PE to ORW to counsellor.

"My thought process is very slow and I had to rehearse a great deal to persuade someone to access the project. I used to ask for a glass of water, clear my throat a hundred times and narrate my own story before I got to the point!" Initially there was no STI clinic here and the community had to go to the government hospital for treatment. The treatment facilities at the government hospital were not satisfactory and this caused the already reluctant sex workers to back out.

“ We have been conscious of the fact that the project will eventually be phased out and hence our main focus has been on clinics and clinical services. We know that we should avail of government services as much as possible and explain this to our key population. ”

Tadipatri with its floating population had high levels of STI among the high-risk groups and, identifying this as something that needed urgent attention, the project team decided to approach the government hospital seeking better facilities. “Three years ago the superintendent was uncooperative, the doctor was hardly available. They used to mention a time and when we took a group of key population members there, we would find that the doctor is on leave or attending a meeting. This disappointed the people so much that they would avoid the next two scheduled visits to the clinic as well,” recalls Vijay, an MSM outreach worker. On the insistence of the project team, the hospital brought in a retired doctor who was so unprofessional that he demoralized the community and alienated them even more. It was

then that the project asked for its own STI clinic, while efforts at accessing public health care continued.

“It is interesting to see the transformation among senior sex workers,” says Sunita who started as a PE and now works as an ORW. “When I started out I understood this issue quite easily and I wondered why the communities resisted it so much. Looking back, I think ill treatment at private clinics served as one of the motivating factors for the sex workers to join us. And hence, ensuring better care at government hospitals assumed even greater importance.”

Tadipatri’s breakthrough lies in the community’s tenacity in attaining efficient care and treatment at their government hospital. The entire process from lack of communication to smooth facilitation of treatment, referral and testing has been the outcome of the community’s relentless efforts. Now, the CBO takes care of all aspects from needs assessment, timely schedules for check-ups for each key population member, availability of medicines and HIV testing kits at the Integrated Counselling and Testing Centre (ICTC) and ART referrals, by constantly coordinating with the government hospital.

Elsewhere, in Rayadurgam another set of prevention workers evolved the Public Private Partnership (PPP) model with significant foresight. With more than 3000 sex workers and 600 MSM members identified in five project sites, it was decided that the most efficient way to access healthcare was through the public health institutions.

“In October 2007 we developed a model which facilitates the setting up of clinics in Primary Health Centres and the model came into existence in January and has been set up,” explains Praveen, Project Coordinator at Rayadurgam. “We have been conscious of the fact that the project will eventually be phased out and hence our main focus has been on clinics and clinical services. We know that we should avail of government services as much as possible and explain this to our key population.” Shankaramma, an outreach worker says.

“The Shakti CBO will continue to ensure healthcare whenever and wherever it is needed. This entire journey would come to a standstill if we cannot sustain STI treatment, HIV prevention and ART for people living with HIV. So talking to doctors constantly is top-most on our agenda,” Munni sums up.

Come, let me apply *kumkum* – motivating sex workers to access services

How does the programme motivate sex workers to attend the clinic regularly and avail services? Outreach, and follow up by peer educators, does help. Most of the key population members know the importance of regular check-ups and come to the clinic on their own. But the challenge is reaching out to and mobilizing those who do not turn up at the clinic, even when they know it is time to do so.

Chittoor's Prema Sangam Mahila Mandali found an innovative way to draw sex workers into the health loop. They used an old but still alive tradition of inviting women for a '*Perantam*' or a festive gathering of women. They followed the custom of applying vermilion to the forehead of the sex workers and invited them to attend the DIC and the clinic for a get-together. "*Undamma, bottupedata* ('let me apply kumkum') is a programme that is made to sound like a festival and we always casually slipped in the information about the medical check-up as if it were purely incidental," laughs Lakshmi, an ORW. The programme is also intended to reduce self-stigmatization by the sex workers who often perceive themselves as 'bad women'. "We give them a blouse piece and fruit just as women who attend *Perantam* get," Eeshwari, an ORW explains. *Sankranti Sambaralu* (festivities) for the harvest festival, Candle Light Day, World AIDS Day etc. are also celebrated by the CBO.

The CBO ensures there is constant activity on community mobilization. "We set up stalls in Tirupati and Kanipakam whenever Brahmotsavam, a grand affair, happens. We have an event called '*Aahaemiruchi*' (what a taste!) which is a cookery contest and it is an occasion for great fun and feasting," Vijaya Kumari, another ORW, adds.

“ We also have a cultural team that performs a programme of song, dance and drama when commissioned by someone. And we are proud to say that we have a team that holds training in outreach for any NGO that needs our experience. ”

The CBO also has a fund for PLHIV, a thrift group, and a fund to assist children of sex workers who want to study. It holds short-term sales of items such as ‘HIV red ribbons’ and has various committees for the smooth functioning of the CBO.

“We also have a cultural team that performs a programme of song, dance and drama when commissioned by someone. And we are proud to say that we have a team that holds training in outreach for any NGO that needs our experience,” Bhuvaneswari, another ORW, says. The CBO has also expanded the scope of advocacy efforts, addressing Panchayats and informal gatherings in villages to address misconceptions on HIV and AIDS.

The impressive range of activities notwithstanding, the sex workers are apprehensive of the future. “We are not sure we can mobilize the funding or keep the flock together. We are not sure we can sustain the clinical services on our own. Of course, we are tying up with government institutions to continue our good work,” Lakshmi says. “The question is, will we be able to handle a crisis when we are on our own?” Eeshawari, an award-winning ORW, says worriedly.

Tough cops, divisive politicians, exploitative clients, violent hooligans, unfriendly neighbourhoods, uncooperative officials – the CBO faces adversity from many quarters. As it moves into tomorrow, it is keeping its fingers crossed while making preparations to deal with challenges that may come its way.



Stories from Men
who have Sex with Men



Leading by example

“It is a common phenomenon in residential colleges, this exploration of one’s sexuality and it is usually a same-sex experience as we are not in co-ed institutions. Most people pass through this phase and then turn to the opposite sex but people like me would still favour sex with men.”

The school-going child’s homecoming was a time for celebration in the family. The family bought a ceiling fan, so that their child was comfortable in the punishing heat at home. “I was the first child in my family to attend school and they all were overjoyed when I came home from the hostel during the summer vacation,” Shivaiah, Project Coordinator, Khammam, recalls.

Shivaiah’s education was no mean achievement considering that he was born into an illiterate tribal family in a remote village in the Mudigonda mandal of Khammam district of Andhra Pradesh. After attending primary school in his village, he was sent to Khammam to his elder sister to complete his high school. It was around this time that Shivaiah started realising that his sexual orientation was not ‘normal’, unlike many adolescent boys of his age. He then went off to study for his junior high and stayed in a hostel where he met people ‘similar’ to him and had his first homosexual encounter.

“It is a common phenomenon in residential colleges, this exploration of sexuality and it is usually a same-sex experience as we are not in co-ed institutions. Most people pass through this phase and then turn to the opposite sex but people like me still favour sex with men,” Shivaiah says.

He passed out of college with a bachelor's degree in hand and another in education, and returned to his village to teach in the primary school. That was when he rediscovered his childhood friend, who had turned into a transgender. "It was then that I understood what a transgender was in the real sense of the term." Shivaiah, however, did not probe too much about his friend's activities and only came to know that the friend worked in an HIV intervention programme when he expressed an urge to break out and explore a bigger career.

"I never knew what my friend was doing and did not quite understand why an HIV prevention project was needed for MSM. I went to the project office anyway." Shivaiah was offered the post of an outreach worker right away since he was highly qualified and the NGO was more than happy to have an educated staffer.

"I went around with my colleagues and saw a whole new world. But, I was still lost to the requirements of my job. One day, at a review meeting, the then Project Coordinator was harsh with me for not meeting any of my targets and for being sluggish. I felt humiliated." The Project Coordinator called him to her office later on, and asked him gently what the problem was. She then sat down and patiently explained to him how the Avahan project worked. "That session in a way unveiled to me a whole new challenge and there was no stopping me," Shivaiah recalls with a smile. He identified and brought on the rolls more than 400 MSM in the next six months.

It was a matter of time before the dynamic young man went up the ladder in the NGO Jagruti, first becoming a clinic administrator, then an Assistant Project Co-ordinator and then finally, in 2007, the Project Coordinator.

Shivaiah has faced lack of opportunity as a child born into a tribal family in a backward village that did not have not a single literate member, and he has overcome it. He faced vulnerability as an adolescent, troubled by his sexuality and living alone in a hostel, and faced it with fortitude. He faced discrimination as an MSM and turned it into an advantage, becoming an important cog in the wheels that took the HIV prevention programme forward. He faced adversity from jealous colleagues who met all his overtures with hostility, and won them over.

Shivaiah stands as someone who leads by example and follows the project's values in letter and spirit.

Reaching out to society

“It has been our principle right from the beginning to reach out to society and convince them about our credibility rather than fight against society and coerce them into an uneasy resignation.”

The community of MSM believes that HIV prevention has to take precedence over everything else. More efforts have to be channelized towards checking the spread of the infection amongst the key population, say the members unanimously. While most other CBOs work towards mainstreaming the community members or fighting stigma and discrimination, the CBO at Bhadrachalam in Khammam district has a different take on the issue.

Ushodaya Social Welfare Society, the CBO, probably has all its priorities right. The CBO has developed a behavioural code.

In spite of Bhadrachalam being densely populated as it is a temple town, the MSM community has always remained dormant, thanks to the vast stretches of isolated areas on either bank of the mighty Godavari. “Self-identification happened quite early with us. But it took us a long time to acknowledge ourselves as a community that has collective needs to address,” says Mohammed Pasha, secretary of the CBO. “But once the Avahan project came into our lives our parents could accept us more easily, and had a better understanding of our psychology,” adds Chandu, member of the CBO.

Their unity notwithstanding, the MSM could never gain acceptance in mainstream society, particularly considering the aura that surrounds the popular pilgrim destination. They completely failed to make an impression on the police who readily slapped a case against the community when a transgender (TG) who was close to the community was robbed and murdered. “But it has been our principle right from the beginning to reach out to society and convince them about our credibility rather than fight against society and coerce them into an uneasy resignation,” David says. The project staff took the unfortunate incident as an opportunity to advocate with the police. “We organized several sessions on police advocacy and about MSM identity, behaviours, orientation, and lifestyle”.

“Avahan in fact helped us identify many of our own community members who remained hidden fearing ridicule and often faced self –stigma. We particularly remember an MSM who was married and refused to participate in the project or even to acknowledge that he belonged to the community even though it was widely known to us. However, when his wife became pregnant and discovered that she was HIV positive, he realized he might also be HIV positive. As a result, he approached us with an open mind and responded to all the advice and assistance we offered,” Krishnavamsi, another member of the CBO adds.

Interestingly, the MSM community members in Bhadrachalam do not want to bring society to their viewpoint. They would, however, rather blend into the existing society with all its norms and definitions. “During the past few years, we have managed to enhance our credibility by playing a key role in almost all the temple events. Apart from community service, we also began to network proactively with institutions whose support we need and hope to find a lasting relationship,” Moti, a member of the CBO explains. The MSM say they want the CBO to be a bridge to the mainstream, addressing the general population on HIV issues ensuring the welfare of the community.

“We want to develop leadership qualities in each of our members so that every MSM can be an exemplary citizen of this town leading every effort that contributes to the wellbeing of society,” Mohammed Pasha concludes.

Helping one's community stay healthy and safe

Now forty, Ravi is the youngest of seven siblings. He was born into a poor family that could not afford to send him to a decent school. Ravi was very effeminate since childhood. He liked to do chores in the house, such as cleaning and cooking, and he liked to put *rangoli* in front of the house. He took pleasure in dressing up and doing things that were done by girls. His parents never complained, nor did his sisters. “For all practical purposes, I was treated as a girl in my family,” says Ravi.

In school, he was the target of sexual innuendos and bullying. “I never took it personally,” Ravi says. “They were just being mean to me.” Ravi had his first sexual experience after he left high school. As there were no sanitation facilities in the village, most men went to a stream nearby to relieve themselves. Ravi started going there as well and one day another effeminate man approached him. He took Ravi to some bushes nearby and performed oral sex on him. This experience changed Ravi and he started frequenting the spot regularly. Although effeminate, Ravi was asked by other men to penetrate them. “Ironically, I was playing a *panthi* role at these spots even though I was effeminate.”

Ravi joined a college and started frequenting the public toilets in the town where he studied. In one of these spots, he met a very attractive young man who seduced him into being a receptive partner in sex. “That’s how overnight I turned into a *kothi*,” says Ravi, “and there was no looking back. I totally gave up being a *panthi* from then on.” However, this shift in behaviour affected Ravi and he started believing that he would never be able to perform with a woman in a manly role.



When Ravi's parents got him married, he lost complete confidence in satisfying his wife. He shied away from her and never consummated the marriage. This led to conflict between them. His parents and relatives tried to counsel him but to no avail. Things eventually led to divorce, and Ravi felt a sense of relief. He never wanted to get married again. However, a year later, his parents forced him to remarry. Ravi says, "My second wife was very cooperative. She used to bring me into the mood through foreplay and made me feel comfortable in bed." This led to the birth of two children. However, when the children were young, Ravi's wife suffered a stroke and died. As Ravi's parents lived nearby, they started taking care of his children.

Ravi kept visiting the spots where men interested in men gathered. He never knew about safe sex so he never used condoms. This went on for years. Once in a popular

“Now that I know about prevention of HIV, I always use a condom in an encounter. I also insist that other people do the same.”

tribal festival near the town, Ravi went looking for sex. There he met a man who in passing told him about a CBO in Miryalguda that works with MSM. Ravi got interested and after the festival he stopped by the CBO to see what it was all about. The CBO members enrolled him and counselled him to be tested. Without any hesitation, Ravi got himself tested. He came out to be HIV positive.

“It came as a shock to me,” recalls Ravi. “For a week or two I didn’t know what to do. The CBO members visited me and consoled me. I slowly recovered from the shock.” From then on, Ravi was determined that he would not let this happen to others. He got actively involved in the CBO and was a peer educator with them. He went to bus stations and railway stations to enroll others like him into the CBO. He distributed condoms in hotspots nearby and brought in many men for testing. He ensured that all the members were tested for HIV and had regular medical checkups. This led to identification of more cases. Ravi provided emotional support to these men. Seeing his hard work, he was promoted as an outreach worker. Ravi has found a partner now who he meets regularly. However, he does meet other men for sex and charges money for it.

“Joining the CBO was the most important step of my life,” says Ravi. “If I had not joined here, I would not have known about HIV. I would have spread the infection to many people and would have been the cause of their illness. Now that I know about prevention, I always use a condom in an encounter. I also insist that other people do the same.” Ravi is also involved with police advocacy and ensures that police or local goons do not harass the community members at the hotspots. This has created an environment of trust where many MSM in the region are able to negotiate safer sex practices and lead healthier lives.



A violent encounter

He woke up to an indistinct memory and a pain raging through his body. He lay there almost naked, in the bushes, waiting for some passerby to come to his rescue. As the tragic incident from the previous night began to unfold in his memory, he wished he could erase it from his mind. Nevertheless, all his efforts went in vain as the pain only made his memory more graphic.

As a few MSM later arrived at the regular hotspot, awaiting the first sexual encounters of the day, he summoned all his strength and moaned. A moan that was so painful that the people on the other side of the bushes thought it was a ghost. A thought that terrified them, and they almost ran away from the place, before one of them took the courage to look where the sound was coming from. There he was, their beloved friend, so near to death.

This incident shook all MSM in Vayalpadu, in Chittoor district. The story was that one of the MSM was gang raped by a group of fourteen miscreants, and was left in need of urgent medical help and water through the night. Just as death seemed imminent, he was found, given some water, and immediately rushed to a hospital.

In the hospital, recovery was slow. Once he got out of the trauma,



he identified the place where he was gang raped. Immediately, his friends went to the place under the pretext of having tea, and kept a watch for the gang.

They found the gang, and tried to talk sense into them. They tried to make them see how badly their friend had suffered at their hands, but it was fruitless. The MSM community then unleashed the final weapon, and induced fear, saying that as they had not used condoms, they might have contracted HIV from their friend who had had many sexual encounters. This worked. All fourteen visited the DIC and got themselves tested. Further, after coming to know more about the MSM community during their regular visits to the DIC, they expressed remorse at what had happened and vowed not to repeat the violent behaviour. For the MSM, it was a significant victory, not just because they reformed a gang of hooligans by peaceful methods, but also because they now come regularly to the DIC and seek medical advice. A milestone in the journey of MSM in the district had just been achieved!

A time to celebrate!

“I think the free availability of condoms here in the DIC has not only made life easy for us, it also made condom use something of a habit.”

Begun in 2004, the Tirupati intervention of Avahan started its work from ‘Brindavanam’, a fond euphemism that the MSM community found for a stinking hotspot near a slum. “Regardless of the fact that it was murky and was crawling with anti-social elements, hooligans and criminals, we still liked the place because we found our soul mates and our pleasure there. Hence, it was named as Brindavanam with all the *gopikas*,” explains Gajendra alias Gayathri, alluding to the name borrowed from Indian mythology where Brindavanam is Krishna’s abode of pleasure.

The community had to buy condoms, as they were too timid to go to the government clinics to ask for free condoms and, therefore indulged in sex without a condom more often than not. “I think the free availability of condoms here in the DIC has not only made life easy for us, it also made condom use something of a habit,” says Karunakar, an ORW who has been with the project since its inception.

A rope of mango leaves are strung together and tied across the room. Bunches of flowers are arranged all over the room. Colourful, intricate *rangoli* designs are drawn on the scrubbed floor on which an array of items for worship of God is laid out. The

more artistic among the devotees had made the face of Goddess Varalakshmi from turmeric paste on a coconut. The deity is decorated with a saree, flowers and gold ornaments. The stage is finally set for the special ceremony of Varalakshmi Puja.

Married women in Andhra Pradesh, seeking a long life and good health for their husbands, normally perform the elaborate ritual of Varalakshmi Puja. MSM in the Tirupati DIC transformed the place of worship with heavy incense smoke and the fragrance of flowers. The Puja seems an apt occasion for seeking the blessings of the benevolent goddess for the well-being of their partners.

Even before the Puja begins, the members of the DIC are fully engaged with a sense of purpose and a great feeling of camaraderie. The MSM tease each other even as they painstakingly finish each chore to perfection. The sweet prasadam is cooked to perfection and offered to the face of the goddess.

With about a thousand MSM identified in the area, Tirupati DIC is a peaceful haven in the middle of a congested market. The MSM, stigmatized and skulking in dark corners of the town just a few years ago, now walk confidently up the stairs and call the DIC their second home.

Five years after Aavahan stepped into their town, the MSM community has changed a lot. Gone are the several apprehensions and misconceptions. Health was not a priority issue five years ago. “We now ensure that each one of us is well and taking all precautions to prevent HIV. Those of us who are infected are taken care of too,” says Kirti alias Kishore Kumar Reddy, whose masterly lines fill the DIC floor with colour and patterns. The doctor who is providing services in the clinic at the DIC, keenly watching the Puja proceedings, endorsed this. “I worked on HIV projects before with the general population. But I find that the MSM here are a lot more attentive and enthusiastic about regular physical examination.” “These events give us an excuse to get together. You cannot even imagine how many such excuses we can find. Even newcomers into the area are welcomed into the DIC and these functions help break the ice,” Gajendra says.

The Puja turns the MSM into a husband; devotees listen to the *mantras* read by Gajendra, the priest designated for the occasion. Following consumption of the last spoon of holy *prasadam*, the entire DIC explodes into song and dance.

Supporting disclosure

It is a small village in Brahmasamudram mandal with about 50 families, all earning their living by making woollen blankets. In a community where no secret can be hidden for long, Chandrasekhar has been guarding his darkest secret - that of his sexual orientation- for the past 30 years. Now happily married with two daughters, Chandrasekhar says he wants to unburden himself and let his family know that he is an MSM, but has been unable to muster enough courage till now.

This is where the project comes into the picture, says Chandrasekhar. He understands that the secret is no longer a secret once it finds its way out of him; the whole village might come to know of it very soon and the reactions from the villagers could be unforgiving. The experience of working as an outreach worker at the Rayadurgam intervention in Anantpur district of Andhra Pradesh, he says, has given him enough confidence to prepare himself for D-day.

It is a similar story to that of most of the MSM in the area. Many of them live in villages, closer to Karnataka than Andhra Pradesh. The primary language of communication, for example, in Chandrasekhar's village is Kannada. The social bonding amongst

the villagers extends to a great degree, with their participation in each other's lives stopping perhaps only at the doors of their bedrooms. Secrets are better disclosed in the dark, for those that find their way out could cause more damage.

Ask Sri Ramulu, a community member, and he tells us how much damage it could cause. Part of a seven member family, he first gave sex work a serious thought when his father fell seriously ill. "I wanted to get into sex work, but was hesitant. Nevertheless, the high income was a reason good enough for me to get into the profession. My father soon recuperated, but I couldn't find a way to get out of it." Someone who got a whiff of his 'unnatural' behaviour told his parents, who were aghast. They immediately married him off forcibly to a close relative. His wife still does not know of the other side of his sexual orientation, but Sri Ramulu says she occasionally jokes that he got into the 'right office'. He is no longer into sex work, but focuses on educating people about HIV and AIDS.

Similar is the story of Basanna, who acknowledges that he had a feminine side from childhood. His mother died when he was in the eighth standard, and he was sent to a boarding school. With no money in hand, he reluctantly agreed to have sex with a man who agreed to pay his fees. This arrangement worked fine, until his elder sister came to know about it. Furious as she was, she married him off to 'contain the damage'.

When an outreach worker once approached him, he did not open up, but later joined the project as a peer educator. It was only after he joined the project that he came to know about STI. He identified 30 people, at an intervention where only 50 MSM were identified so far. Basanna is now an outreach worker, but says his biggest challenge lies at home – to face his already suspicious wife with the truth.

For Chandrasekhar, Sri Ramulu, Basanna and several other MSM in Rayadurgam, the challenge is similar. Having faced the external world, they have yet to confess to their families, whom they say they cannot cheat. Bridging this gap between themselves and their families is not going to be an easy task. The project is doing its part, preparing them for the day, counselling them, for there is now only one final frontier to conquer – the place they call home.



Fighting self-stigma

Stigma is difficult to understand. The discrimination that people show baffles MSM and causes self-doubt, and hits their faith in themselves and others.

“As an MSM, it was such a struggle to come to terms with my own orientation. The stigma that people showed everywhere demoralized me. Yet, I needed to establish my identity as someone who has made a choice. And this is where the project helped me,” says Chandra Shekhar, outreach worker and president of the Sneham CBO in Anantpur.

An early bird who understood the benefit of the intervention, Chandra noted that his community did not really need anyone to stigmatize them. “I watched so many of my friends when in public places and gatherings. It was as though they were trying to blend into the wall. They totally lacked confidence and believed they were somehow a curse that society was forced to bear. They called themselves *kojjas* (a derogatory reference to transgenders or effeminate men in Telugu) even before anyone else did.”

The discrimination hurt the most at the hospitals, one place where the MSM did not shy away from divulging their orientation. “I once found at the government hospital that they marked our

“ Making people accept us is one thing, but then we also need to brace ourselves against self-doubt. Which is why we want to make the CBO our main strength.”

case sheets with a bold red ‘Z’. I asked them what it meant. The technician sneered at us, saying we are ‘special cases.’ I was so angry that I took a photocopy of the case-sheet and took it to the District Medical and Health Officer. He promptly responded and took action against the offending staff.”

The incident triggered a whole thought process that made the MSM realize they needed to anchor themselves against stigma and lack of understanding. “Making people accept us is one thing, but then we also need to brace ourselves against self-doubt. Which is why we want to make the CBO our main strength,” says Srinivas Reddy, a member of the CBO.

The MSM chose a multi-pronged strategy – police advocacy, improving their access to health services, efficacious outreach at the hotspots and mainstreaming efforts. “There was a point of time when the cops hounded us at the bus stops. The community members usually ran helter-skelter and escaped. Once they were caught and questioned as there was a murder at the bus stop. It was scary... but the incident turned out to be a blessing in disguise as we could directly talk to the cops.”

The episode also served to boost the morale of the community and now the community members at the hotspot serve as informers for the police against anti-social elements.

The MSM at Anantpur also went on exposure visits to Humsafar Trust where they interacted with community members from across the country and this helped them overcome their biggest enemy – self-stigma.

Religion and reform

“ We suddenly realized the risks that were lurking in the frenetic but fun activity in the Jatras. We understood that learning about health is as important as cherishing the rituals and ceremonies. ”

They say the chain begins with love, and love leads to a relationship. The emotional bond needs to have a social name. The tag has to be stamped with a recognized ritual. This is what makes MSM and TGs in Karimnagar and neighbouring districts flock to Vemulavada to get their mutual agreement stamped by a third party. In this case, the deity-in-residence Himself.

Vemulavada is a temple town like any other in Andhra Pradesh. Crowd, sand and colourful stalls selling religious material meet the eye. On auspicious days a whole array of ceremonies are conducted. Including, weddings between MSM.

“There is an urge to get into a relationship that is recognized by mainstream society. This is a kind of paradox that even we do not miss. We know that people would not accept two men marrying and we do not care. But at the same time, we want some license that will help us merge into the mainstream,” Jagan, formerly one of the senior-most outreach workers in the Karimnagar initiative, says.

Vemulavada is witness to a phenomenon called ‘Shiva Parvatulu’ or ‘Shiva Shaktulu’, the deity in the temple being an incarnation of Lord Shiva. Shiva Shaktulu are men dressed as Shiva with half the body as a woman, signifying *Ardha Nareeswara* (an incarnation of Shiva), and marrying the deity on special occasions.

There are many unusual traditions specific to the town, including fasts and feasts, thread ceremonies, soothsaying, prophecies, religious trances, worshipping of tridents, and celebrating the festival of *Bonalu*. “We consider the wedding of Lord Sri Rama in Bhadrachalam on the day of Sri Rama Navami the most auspicious time for us to tie a knot. This happens for three days in a year,” explains Suresh, an ORW from Sircilla. The occasion is also crucial for MSM and TGs as many community members converge in the town, and each marriage has a witness from the couple’s own community.

“I have been involved in these *Jatras* for the past 15 years and I have often seen that these *Jatras* have a flurry of activity, including the weddings. Most people, including the priests, actually do not realize that the two men are marrying each other as it is this time when Shiva Shaktis marry the deity, but for us, it is a hugely symbolic union.”

“They get carried away at that time. The ambience as well as the aura the occasion carries does impel them into sentimental decisions but the relationships barely last, witness or no witness,” Jagan says, and Suresh agrees.

Both of them saw the ground realities and learnt the archetypical customs and practices of their community. As partners in Avahan, they have learnt some more things - safe sex practices, HIV prevention efforts, and tips for a healthy life. “It was as though we started seeing the town in a different light. We suddenly realized the risks that were lurking in the frenetic but fun activity in the *Jatras*. We understood that learning about health is as important as cherishing the rituals and ceremonies,” Jagan says.

The ORWs have been setting up stalls in the *Jatras* and celebrations for the last 5 years. They distribute condoms, counsel whoever comes to them and distribute literature about HIV and AIDS. They have reached out not just to the community but also to the leaders of each group- the *Nayaks* and *Gurus*. “We have even taught our community members to behave with restraint in public so that we can avoid harassment from unruly elements as well as gain the trust and friendship of the general population.”

Religion, ritual or belief, the community in Vemulavada is achieving a sacred goal – that of everyone’s well-being, not the least that of the key population.

Securing the future

“ I am confident the CBOs will stand on their own feet.”

Ramagundam, a town famous for its coal mines and a thermal power plant, is perpetually painted black by the coal dust that flies in. However, the dusty town is all set for a cleaner image, thanks to the Grama Navanirmana Samiti in this town in Karimnagar district of Andhra Pradesh. The Municipal Council of Ramagundam has recently entered into an agreement with the NGO for a supply of 5000 litres of phenyl per month.

The deal, valued at around one lakh rupees, guarantees a steady income of at least 30,000 rupees per month to the CBO and another deal for supply of bleaching powder is on the anvil. This is certainly a shot in the arm for the efforts of the members of the CBO, who have been manufacturing products such as bleaching powder, phenyl, room freshener and dish cleaning powder under the brand name of Sphoorthy for quite some time. With a postgraduate in home science appointed as a resource person, the members have managed to create a niche for their brand in the local market.

Not ones to be content with this success, members of the MSM community have been operating a community kitchen, which supplies food for events held by the NGO. Paper bags sourced



in Karimnagar, were sold for a profit in the town. School children were encouraged to collect donations for PLHIV at their schools and around their homes, for which they were issued medals and certificates. Parents were even encouraged to visit the office to know more about the project.

Recently, Unorganized Urban Employment Society, a government department, has recognized the sex workers as unorganized women and has agreed to give away 40 sewing machines as a grant. It has also offered subsidized loans at Rs.5000 per head for selling vegetables, Rs. 15000 per fruit vending cart and an MSM- specific loan for flower bouquet-making.

The intervention has three CBOs, Jeevana Jyoti Shree Public Welfare Society for PLHIV, Shakti Public Welfare Society for MSM and Mythri Spandana Welfare Society for FSWs operating in Ramagundam, Manthani, Dharmaram and Kamanpur mandals of the district. Satish Reddy Basani, Project Coordinator, has made sure that no stone is left unturned when it comes to empowering the CBO. "I am confident the CBOs will stand on their own feet. I can see the CBO get at least Rs. 30,000 income per month," he says.

The project had to face routine obstacles in its initial stages, but overcame everything by working hard towards a changed perception. In a town that records the maximum summer temperatures in the entire state, the members of the CBOs started summer water camps, and had them inaugurated by police officials. Observing that school children take the message far, essay writing competitions on HIV awareness were conducted at the local school. A mobile ICTC clinic and a workshop for Registered Medical Practitioners (RMPs) made sure that the KPs faced no problem in testing for HIV and STI.

Four years down the line, all three CBOs are much ahead of their time. With a steady income and a strong community brought together by an exemplary sense of camaraderie, the KPs are not afraid of the day when external funding would cease to come by. A friendly general population provides them additional comfort. The recently clinched deals reinforced the belief of the KPs that they are no longer segregated from the rest of the town. Rajeswari, a KP, is probably right when she said the town that once treated them as scum, now needs the very same people to get rid of its real scum!

Rising from the depths of despair

“I don’t think I’ll ever carry a bigger burden than this knowledge that I killed my father.” Disquieting words, but it is easy to understand the agony that Sampath lives with every day as one hears about the stormy days that he has been through.

Sampath, an MSM from Husnabad in Karimnagar district, lived a secret life, trying to come to terms with his sexual orientation. His family did not know about his orientation and married him off. Life was a little tricky but not too troublesome until the day Sampath was diagnosed as being HIV positive.

All hell broke loose when his HIV positive status was revealed. His father, unable to digest the fact that his son was not just MSM but also HIV positive, committed suicide. His mother was shattered and threw her son out, blaming him for the disaster.

“It was like a nightmare. I could see visible destruction of Sampath’s personality. I have been his friend since childhood and I saw him struggling to adjust to his being an MSM. But his father’s death virtually broke him,” Baba, an ORW at the Husnabad site of Aavahan, recalls. Sampath could not find a way to reach out to his family and he fell into a miserable silence when the shock paralysed his vocal chords and turned him mute. However, worse was to come. His wife disowned him and refused to let him come anywhere near their young son. A distraught Sampath attempted suicide, jumping in front of a bus but was saved by his friend who took him home, supported him through the tough times and brought him into the fold of the project. Slowly, Sampath got involved in the project and discovered a new purpose in life. “It was as though he found his family again. He leans heavily on us and shares his feelings with us.”

Sampath has even begun to regain his voice and now speaks slowly but clearly. “It is my dream to somehow be able to reach my son. I want to cherish every moment of his childhood. I hope I’ll get through to my wife and I am hoping my friends here will help me by counselling her,” Sampath says.

A transgender finds a family

“I didn't think it was possible to ever find a family, until I started visiting the DIC.”

Raju is packing his bags for the journey he dreamt of for a long time. It only takes about 10 hours to travel from Mancherial in Adilabad district of Andhra Pradesh to Vijayawada, but for Raju it took very long to prepare himself for the journey. After the journey has been made, Raju would be a different person altogether, having undergone Nirvana, or castration.

Raju, a KP at Mancherial, has a troubled past. His family stigmatized him severely for being effeminate. Unable to bear it any longer, he ran away from his home in Adilabad to Mancherial. He turned a transgender and began to earn his living by sex work, begging and dancing.

Leading a solitary life and yearning for love, he says he found his oasis of hope through the project. “I didn't think it was possible to ever find a family, until I started visiting the DIC.” It was here that Raju started to think about the course of action for the rest of his life. He wanted to break the final barrier that stood between him and womanhood by undergoing castration.

“Financial security is as important for us as emotional support. I have seen people who earned a lot in their heyday, but wasted it away in their final days and lived in poverty. I do not want to make that mistake.”

Post-castration, Raju plans to start a ‘family’ headed by himself, and offer protection to a few other TGs. This, he says, gives them both emotional and financial security.

The vulnerability of being different

“The ridicule and mockery begin at home itself. Parents have to be careful when it comes to such children, because they are doubly vulnerable to sexual abuse.”

In a village in Mancherial, Adilabad district, a special class in mathematics changed the equations in Arjun's life forever. A student of 10th grade then, Arjun had to walk all the way to the school in his neighbouring village every day. After attending the special classes in mathematics late in the evening, he slept in the school premises itself, going home early in the morning only to come back to the school in the afternoon.

The mathematics teacher one day took advantage of this and molested Arjun, who was sleeping alone in a corner. The torment of a lifetime began for Arjun who was continuously teased and harassed by the teacher in front of the whole class.

“Be it drawing *rangoli* in front of the house or blushing like a woman, I always had a feminine character from my childhood. I never thought it would affect my life so drastically until the teacher trained his cruel humour on me. Every day was a living hell as he mocked me before the whole

class saying I was a female and encouraged my classmates to harass me,” says Arjun.

Back home, a cousin who never missed a chance to molest him was his first offender. But when his classmates, goaded by the teacher’s remarks, started molesting him, Arjun discontinued schooling and studied from home. However, the nail in the coffin came in the form of a classmate in junior college, who forced Arjun to have intercourse with him. Arjun says he could never go back to being ‘normal’. “I don’t think MSM are born; sometimes they are products of exploitative circumstances. For boys who have certain female characteristics in their demeanor, the ridicule and mockery starts at home. Parents have to be careful when it comes to such children, because they are doubly vulnerable to sexual abuse.”

Arjun now works as a dancer, performing at stage shows and dance contests to earn his living.



A self-made leader

When he was 9 years old, his tutor's son sexually assaulted Aadi. "He raped me," Aadi recollects. Aadi comes from a poor family that migrated to Nagarjunasagar in Maacherla mandal in Nalgonda district. He is the youngest of four siblings; he has two sisters and one brother. His parents sent him for tuitions after school. The assault left a lasting impression on him.

"As a child, I always liked to dress as a girl," says Aadi. "I was always comfortable with being feminine all my life. Perhaps that is what must have prompted other men to sexually misbehave with me." The Muslims in town used to have a festival called *peerilu*, where all the town folk come together for cultural events. Dances were part of the events. "I used to dress up like a girl and dance," adds Aadi. "Everyone liked my dance and so I took it more seriously. From then on, I took pride in doing things that questioned the gender divide."

Aadi dressing like a girl elicited no resistance from home. He formally learned to dance, which he teaches currently, and used to perform as a girl in dance shows. On account of this, he attracted attention as a feminine person since his childhood days. In school too, he never made any effort to hide his mannerisms. "Perhaps that is the reason why I was raped by my teachers," says Aadi. His maths teacher first raped him when he was in high school followed by the sports instructor. "This left some deep scars inside me," says Aadi. "I lost trust in men and those in authority. But I never shared these experiences with anyone due to guilt and fear of being misunderstood."

In 1996, after he left high school, men approached Aadi regularly for sex. In his college days, men in bus stations and railway stations picked him. After his under-graduate education in sociology, he started doing odd jobs. However, he had a strong attraction for working with people like him. He looked around for opportunities to work for the community.

“What I initially thought was confined to very few people turned out to be much more prevalent than I expected. The community was in dire need of support, not just to improve their health but also to improve their standard of living and their self-esteem.”

It was then that he stumbled upon Ankita, an NGO that works with sex workers and MSM to prevent HIV among the community. In 2005, Ankita offered him the job of a peer educator. “As a peer educator, I learned a lot about the issues faced by the community,” narrates Aadi. “What I initially thought was confined to very few people turned out to be much more prevalent. The community was in dire need of support, not just to improve their health but also to improve their standard of living and self-esteem.”

Aadi’s relentless work for the community got recognition among his peers and the organization. Soon he was promoted to the position of outreach worker and then to clinic administrator. Alongside, he also learnt the way an organization works and what it takes to mobilize the community. He started a CBO called Liberty to Individual Fundamental Efforts (LIFE).

In 2006, Aadi mobilized the community and formed a CBO, and got it formally registered in 2007. He contested for the position of the president and won. “Since then, LIFE has grown in leaps and bounds,” says Aadi with a big smile. “It gave me a platform to really make a difference in the community. Starting with just a handful of members in 2006, the CBO now boasts of more than 500 members and the membership is increasing.” With the support of the CBO, the community has come together and addressed various issues that they faced- they have streamlined the HIV prevention services, they get the community members for regular medical checkups, and they have advocated with the



police and the media and sensitized them to issues of the community. These efforts translated into better health outcomes for the community. Now the community members have a safe place to voice their concerns without fear of stigma and discrimination.

At 31, Aadi is optimistic about the future of his CBO and the community. "I feel like I just started," concludes Aadi. "Although my CBO has done tremendous work in the past few years, I feel a lot more can be done. We now work in just a few areas but that needs to be scaled up. We need to mainstream our services. Moreover, I would like to make LIFE CBO a district level organization. It will be my dream come true!"

Acronyms

AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral Therapy
CBO	Community Based Organisation
DIC	Drop - in - Centre
FIR	First Information Report
FSW	Female Sex Worker
HIV	Human Immunodeficiency Virus
ICTC	Integrated Counselling and Testing Centre
IDU	Injecting Drug User
KMC	Kilpauk Medical College
KP	Key Population
MLA	Member of Legislative Assembly
MRO	Mandal Revenue Officer
MSM	Men-who-have-Sex-with-Men
NGO	Non-government Organisation
ORW	Outreach Worker
PE	Peer Educator
PLHIV	People who Live with HIV
PPP	Public Private Partnership
RDO	Rural Development Officer
STI	Sexually Transmitted Infection
TB	Tuberculosis
TG	Transgender
VAT	Voluntary Action Team



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