

Note: Programmatic data are from April 2019 to March 2020. For the projects that have ended, the data provided are from project lifetime.

Images by: Parveen Lamabam and Pranab K. Aich for India HIV/AIDS Alliance

Unless otherwise stated, the appearance of individuals in this publication gives no indication of their HIV status.

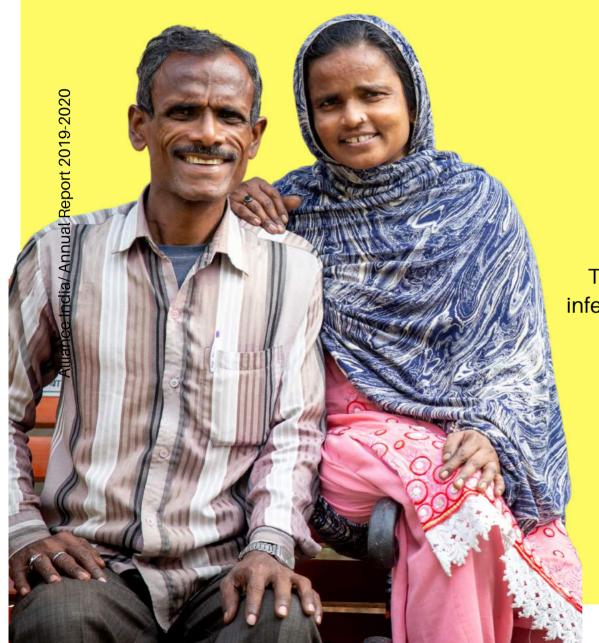
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## Our Vision

A world in which no one dies of AIDS.

## Our Mission

To support community action to prevent HIV infection, meet the challenges of AIDS, and build healthier communities.

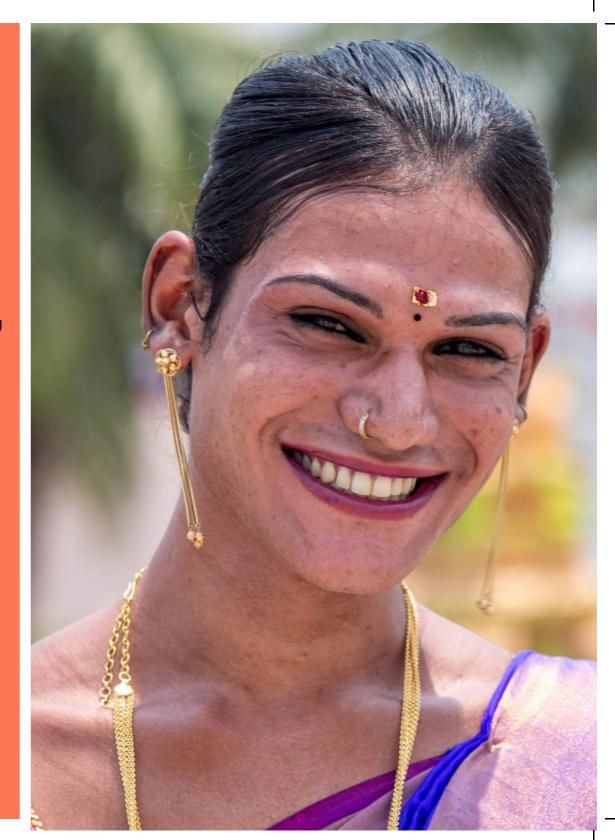
### HIV EPIDEMIC IN INDIA

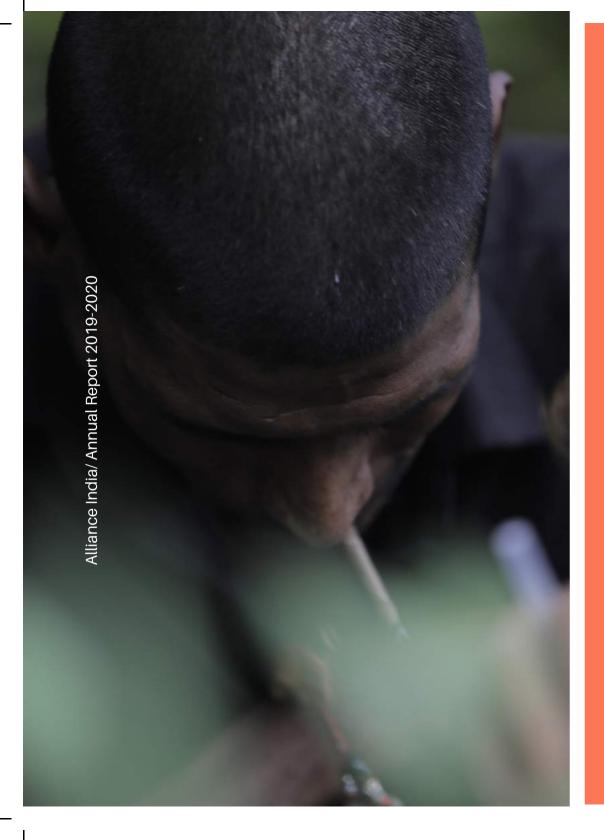
#### **Background**

India has 2.1 million people, the third-largest population living with HIV in the world, of whom, 56% adults are on treatment. While there is no cure for HIV, antiretroviral therapy can control the virus and decrease the transmission to other people. India has made gains in reducing new HIV infections by 27% and averting AIDS-related deaths by half since 2001. It's good progress but the work is far from done. In 2017, 69,000 people died from AIDS-related illness and 88,000 new cases of HIV infection were reported.

The COVID-19 pandemic poses serious challenges and threatens the gains made in HIV and TB response in India. India's national HIV programme is working closely with the civil society, affected communities and state networks to develop guidelines and strategies to tackle the new challenges while ensuring uninterrupted HIV services to the key affected population.

Data source: UNAIDS Data 2018, NACO 2018





#### **Key Affected Population**

The epidemic is concentrated among key affected populations, however the vulnerabilities that drive the epidemic vary in different parts of the country. The main driver of HIV infection in India is unprotected sex in commercial sex work setting, between partners and spouses. However, people who inject drugs in the north and northeast of the country is also pushing up HIV prevalence. Alliance India works with the key populations at higher risk of HIV: transgender people, female sex workers, men who have sex with men, people who inject drug while ensuring care and support services for people living with HIV.

#### **India's National HIV Response**

National AIDS Control Organisation is responsible for formulating policy and implementing programmes for the prevention and control of the HIV epidemic in India. Its most recent programme, NACP-IV (2012-2017, extended to 2020), aims to halve annual new HIV infections by 2020 by providing comprehensive HIV treatment, education, care and support for the general population, along with targeted interventions for key populations at higher risk of HIV transmission.

#### The 90-90-90 Goal

The 90-90-90 goals set by UNAIDS envision that, by 2020, 90% of people living with HIV will know their HIV status, 90% of people who know their HIV-positive status will be accessing treatment and 90% of people on treatment will have suppressed viral loads. India has set the goal of 95-95-95. As per 2017 data, 79% of people living with HIV knew their status and 56% of people living with HIV were on treatment in India.

#### **HIV Response and Interventions**

Civil Society, Organisations led by at-risk communities and networks of HIV positive people have and continue to play a key role in India's HIV response. The decriminalisation of homosexuality in 2018, following a prolonged campaign from LGBTQI+, HIV and human rights activists and CSOs, shows the collective strength of the affected communities themselves. In 2017, through the continuous advocacy of people living with HIV, India adopted 'test and treat' policy, which applies to the entire population testing positive for HIV being eligible for treatment, regardless of their CD4 count. This would mean increased number of people on treatment and fewer who are lost after the initial diagnoses.



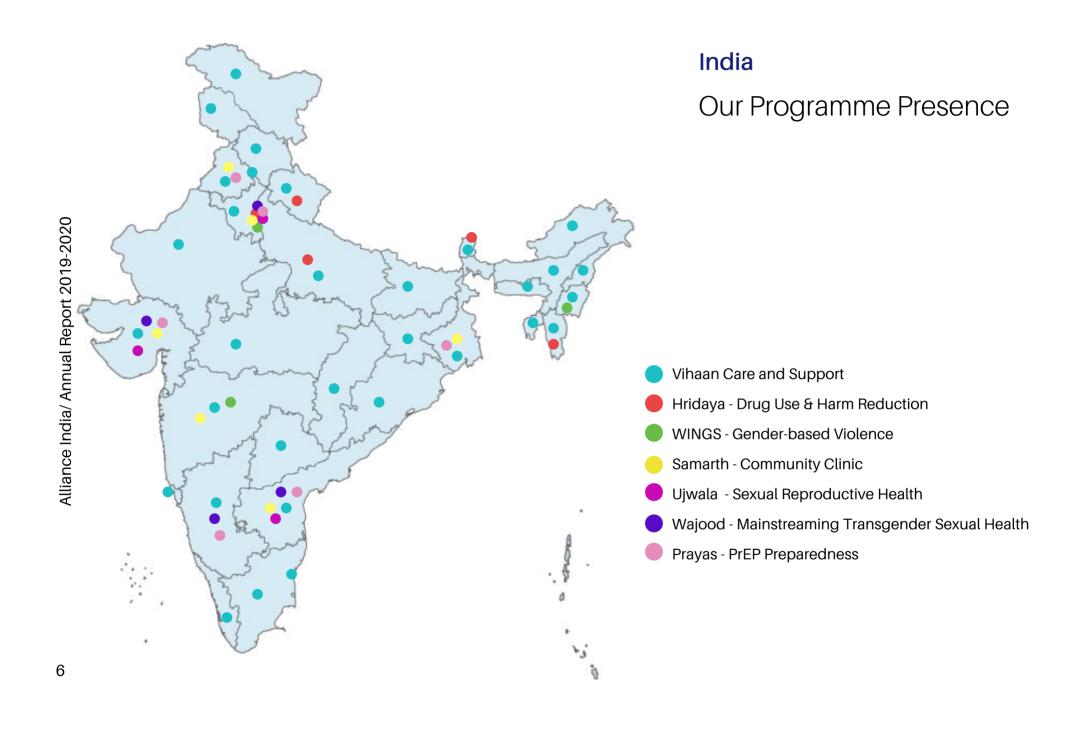
### FY 2019 -2020

### AT A GLANCE

Alliance India has provided grant funding, capacity building, and technical support to 319+ NGOs and CBOs in India and delivered HIV services to 1.4 million people registered with our programmes.

India28 States and 4 Union Territories

Regional
7 South Asian Countries





## Regional

Our Programme Presence

Harm Reduction Advocacy in Asia Grant (HRAsia)

Cambodia

India

Indonesia

Nepal

Philippines

Thailand

Vietnam









### Vihaan Care & Support

Comprehensive HIV care and support services to improve treatment adherence, provide differentiated care and improve the overall quality of life for people living with HIV (PLHIV).

1067776

People reached with HIV care and support services

263 035

Lost-to-follow-up cases tracked back with a definitive outcome

220 004

People linked with social welfare scheme, of which 84 927 people availed the schemes

96 959

Family members tested for HIV, 12 652 found positive & linked with ART treatment

75 229

People provided at least 3 follow up services & retained in treatment

#### Plugging new initiatives into care and support services

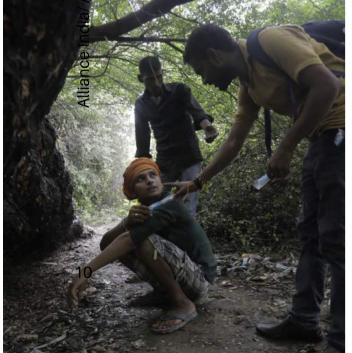
At the heart of our care and support programme is a commitment to improve the wellbeing of people living with HIV and increase the capacity of systems to respond successfully to their needs. We combine the capacity of active partnership with civil society, PLHIV communities and networks to scale up HIV care & support services across India. During the reporting period, out of the 319 Care and Support Centers under Vihaan Care & Support programme, 27 Centers from seven states began community-based HIV screening (CBS). Till March 2020, a total 2143 family members were screened through CBS and 47 people were confirmed HIV positive. The initiative is part of the nationwide upscaling of CBS by the National AIDS Control Organization to increase the number of individual testing, reach a broad set of people who are at risk of HIV and may be less likely to visit the clinical setting for testing.

Our 20 Care & Support Centers, recognized as Link ART Centers, are catering as community-based ART re-filling centres where 1779 people are on active treatment and care

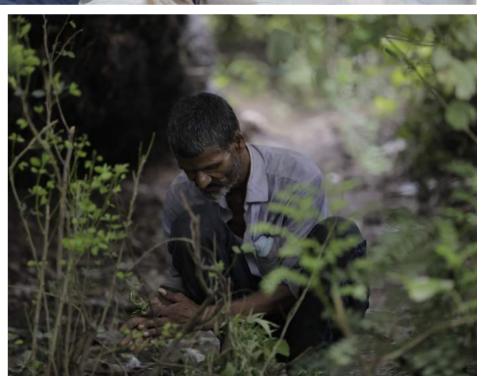
Vihaan Care & Support programme is implemented with 319 NGO/CBO partners in 28 states and 4 union territories.

> Supported by the Global Fund since 2013. The current implementation cycle 2018-2021. 9









### Drug Use & Harm Reduction

Our drug use and harm reduction programme works extensively with marginalized communities on access to health care and rights-based 'HIV and harm reduction' services, and other related services for their overall wellbeing. To realise this, the programme employs a multipronged strategy to focus on creating an enabling environment, addressing service delivery gaps and community systems strengthening.

The programme facilitates policy implementation, sensitization and awareness of drug law enforcement at the national and regional level with advocacy efforts on increased access to service uptake for people who use drugs. For bridging the service delivery gaps, efforts are to provide technical assistance to the national programme for drug prevention, treatment and care including harm reduction with a concentrated focus on groups that have been traditionally underserved and not recognized in the programme, including groups like women, youth and transgender persons who use drugs.

Another aspect of the strategy is to strengthen community systems, towards demand generation leading to service uptake of drug the treatment programmmes, promotion of a community feedback mechanism for quality monitoring of existing services and increase in treatment literacy.

### Drug Use & Harm Reduction - Hridaya

Improving access to harm reduction services and building capacity of frontline workers.

607

Frontline workers from PWID Targeted Intervention and Opioid Substitute Centres received capacity building training

387

Female sex partners (FSP) of PWID enrolled under the programme service package

228

FSP tested for HIV, 3 found HIV and linked to ART treatment

264

FSP educated on gender-based violence issues

#### An intervention for female sex partners of PWiD

Hridaya implemented female sex partner intervention in Delhi and reached 387 female sex partners of PWID with HIV, sexual reproductive health, gender-based violence and other related services reducing their vulnerability to HIV, Heph-C, TB and other health hazards. This segment of women was traditionally not included or catered to in a harm reduction programme.

Two research studies were conducted under the programme:

1) 'Assessment of HIV-related risk behaviours and vulnerabilities among female spouse of male injecting drug users in Delhi' and 2) 'Rates of nonfatal opioid overdose among people who inject drugs in Delhi'. In addition, we supported five state drug users forum from Uttar Pradesh, Sikkim, Mizoram, Manipur and Tamil Nadu on registration and activities to generate demand for harm reduction, HIV, hepatitis-C, tuberculosis and other essential services.

Hridaya project is implemented in five states in partnership with the State AIDS Control Society.

Supported by Frontline AIDS since 2016. The current project cycle is 2019 - 2020.

### Drug Use & Harm Reduction - WINGS

Addressing gender-based violence and reducing the risk of HIV transmission among women who use drugs.

### 265

Women who use drugs received project services such as HIV, TB and HCV testing, treatment linkages, abscess management, and capacity building on accessing legal aid

192

Women who use drugs received sexual reproductive health-related services

39

Women initiated on drug treatment in de-addiction centres

30

**Women initiated on Opioid Substitute Therapy** 

#### Prioritizing the needs of women who use drugs

In November 2019, the project organised a state-level consultation in Imphal, Manipur with the Manipur State AIDS Control Society towards developing focused strategies to work with women who use drugs to address their vulnerability to HIV as well as Hepatitis C and TB. The consultation was organised by the project partner, Nirvana Foundation, to advocate for all the horizontal programmes in the state - i.e., State AIDS Control Society's HIV prevention programme (Targeted Interventions), Department of Social Welfare supported rehabilitation centre for addicts and Women and Child Department supported care homes in reaching out to women drug users with the inclusion of gender-based violence and sexual reproductive health services based on the pilot project through the WINGS model. The project also participated in the workshop on 'Formulation of Manipur Drug Policy' organised by the Department of Social Welfare, Govt. of Manipur and made a significant contribution.

WINGS project was implemented with three NGO/CBO partners in three sites of three states.

### Harm Reduction Advocacy in Asia

The Global Fund-supported regional Harm Reduction Advocacy in Asia programme has been implemented by Alliance India since 2017 and has been extended to 2021. Together with in-country partners in Cambodia, India, Indonesia, Nepal, Philippines, Thailand and Vietnam, the programme advocates for policy & legal reform to create enabling environment for PWUD, engages community towards sustained HIV & drug use response, creates evidence for redesigning of harm reduction response, and advocates for sustainable financing for harm reduction. Here are a few highlights of the programme from the reporting period:

- In Cambodia, under the new HIV National Strategic Plan: 2019 2023, civil society organisations have been recognized as one of the key partners and endorsed for government funding to sustain the HIV response, especially people who use drugs.
- In Nepal and Vietnam, continuous advocacy efforts by the programme partners have led to the government approving takehome dose for opioid substitute therapy leading to improved HIV service uptake and retention for people who use drugs.
- In Vietnam, policy advocacy efforts with the National Assembly by the partner under the grant contributed to the Drug Control Law Amendment which now prioritises community addiction treatment instead of the earlier compulsory detention.
- Our partner Recovering Nepal under the grant was the lead contributors to the process of Universal Periodic Review for Nepal for people who use drugs.
- Advocacy through the grant partner in Indonesia led to an increase in domestic funding at the municipal level with the inclusion of harm reduction in the health budget for two cities.
- Alliance India through the grant participated in the Global Fund's Sixth Replenishment Conference held in Lyon, France and made a case for increasing funding for drug use and harm reduction response.

### Harm Reduction Advocacy in Asia



2nd SAARC Workshop 'Promoting Health, Human Rights and Harm Reduction for People Who Use Drugs in SAARC Countries' in Kathmandu, Nepal, December 2019



Law enforcement and civil society consultation on 'Enhancing Partnership with Programmes that Provide HIV Related Services for People Who Use Drugs' in Semarang, Indonesia, April 2019



Advocacy dialogue between the Narcotics Control Board of Indonesia and community of people who use drugs held in Jakarta, Indonesia, September 2019



Consultation with the network of women who use drugs in Nepal on engagement with CCM to increase access to HIV and harm reduction services in Kathmandu, Nepal, September 2019

**Exposure visit for State AIDS Control** Society from Delhi and Manipur to the women-centric harm reduction model project 'Highlighting linkages with prisons and community of women who use drugs' for provision of OST in closed setting and linkages post release, Kapurthala, Punjab, May 2019



### Harm Reduction Advocacy in Asia



Regional level meeting of country focal points from CCM's of Cambodia for 'Building Synergies to Promote Harm Reduction and Ending AIDS in Asia' held in Siam Reap, Cambodia, November 2019



Capacity building with the community of people who use drugs on the agenda of advocacy and policy dialogue for health and human rights of people who use drugs, Hanoi, Vietnam, June 2019



Engagement with faith-based leaders and organisation to promote health and rights-based approach to drug use in India, Rishikesh, India, October 2019









### Sexuality, Gender and Rights

The programmatic theme - sexuality, gender and rights works on the rights-based approach of ensuring healthcare services to sexual and gender minorities and female sex workers. We emphasize on development of the community-based organisations working with men who have sex with men (MSM), Transgender (TG) and female sex workers (FSW) through projects like Prayas, Wajood, Samarth and Ujwala.

Training and sensitization of community service providers, health care providers like hospitals and targeted intervention programmes are done with the objective to increase demand generation, creation of enabling environment as well as treatment literacy.

Our projects under the thematic area work towards increasing the capacity of the programme staff to reach the unreached, hidden and new population while also increasing capacities of communities to advocate for their access to and scale-up of health and human rights services.

The overarching theme within all the projects is to ensure advocacy at all levels to bolster access to health services in a stigma-free environment.

### Sexuality, Gender and Rights - Wajood

Integrated and right-based approach to HIV prevention among transgender and hijra community.

12008

People reached with the programme services

1835

People recieved sexual health related services

2 5 2 4

People tested for HIV for the first time

67

People found HIV positive, linked to ART for confirmatory test and treatment

#### Bridging the gap

The development and dissemination of IEC materials in regional languages specifically targeting transgender and hijra community has been limited and there has been relatively little documentation or information sharing around HIV prevention, sexual and reproductive health and broader health issues. Under Wajood, a set of information, education and communication (IEC) materials were developed on subjects such as sexual health, legal awareness, gender-based violence and newer prevention techniques. Through these IEC materials, the programme aims to educate, build capacity and alter attitudes and practices to bring about positive changes.

Wajood project is implemented with four NGO/CBO partners in six states.

### Sexuality, Gender and Rights-Samarth

Community Clinics providing health and HIV testing for MSM, transgender and hijra.

9 2 9 1

People from the target population screened for HIV

73

People found reactive to HIV screening

65

People accompanied to testing & treatment facilities, found HIV positive and linked to ART

#### Extensive coverage with the focus on at-risk segments

Samarth demonstrates a next-generation community-led strategy for MSM and TGs in six sites in India while introducing elements of noncommunicable diseases as part of the overall health need of the population. The programme ensures extensive coverage and complete access to services related to HIV prevention, testing and linkages to care for MSM, transgender and hijra with focus on at-risk population segments within the target population: married MSM, young transgender between 18 -35 years indulging in sex work and those with substance use.

Samarth community clinics are implemented with five NGO/CBO partners in seven cities.

### Sexuality, Gender and Rights - Ujwala

Comprehensive sexual reproductive health services to female sex workers (FSW) for retaining them in HIV care.

4 560

Women reached with sexual health reproductive & HIV services

3 9 7 8

Women tested for HIV, 6 found seropositive and linked to treatment

1806

Community leaders, health care providers and other key stakeholders empowered

249

Women received income generation programme support

#### Unmet needs of the hard-to-reach segments of women

Ujwala project gained considerable insights in understanding the shifting patterns of sex work, devised strategies and addressed the structural barriers to reach hard-to-reach women who operate from virtual platforms. In line with the global 90-90-90 target, to enable female sex workers to access health care services, a national level workshop was organised in collaboration with National AIDS Control Organisation (NACO) underlining the need for reaching out to the women who solicit work through phone or online platforms. In the two day national consultation, stakeholders such as NACO, SACS, WHO, USAID, UNAIDS, FHI 360, experts, researchers and community members came together to deliberate on the current situation, listen to the evidence and provide an effective, scalable and efficient framework as well as implementation guidelines to reach out to women on unconventional sites and virtual networks. NACO felt the need for revising the definition of sex work to include this segment of female sex workers into the ambit of the national programme.

Ujwala was implemented with three NGO/CBO partners in three sites in three states.

860

WhatsApp groups of sex workers accessed Ujwala Helpline number

Accumulative data from the project life time.

Supported by Mac AIDS Funds and Tides Foundation since 2017 The project ended in March 2020. Data through project life time. 21

### Sexuality, Gender and Rights - Prayas

PrEP preparedness for transgender people in India

5913

Transgender and hijra community members sensitised on PrEP

23

Healthcare providers completed sensitisation workshops on PrEP

8

Community sabhas (clusters) completed sensitisation workshops on PrEP

#### **Advocacy for PrEP**

The project partners completed the exercise of mapping chemists that are dispensing pre-exposure prophylaxis (PrEP) medicine to serve as the basis for advocacy on reach and availability. The learning and evidence generated through the project have been employed for national-level advocacy to create supply on PrEP for transgender and hijra population in India. An insightful webinar was organised for the partners with Dr Viraj Patel from Albert Einstein University, New York whose research centres around innovative community-engaged approaches to HIV prevention with sexual minority men and gender minority communities and is currently focusing on implementation and scale-up of PrEP for preventing HIV in clinical and community settings. The rich discussion on acceptance of PrEP by the community, the challenges specific to India, and generating demand for PrEP were steps towards achieving better health outcomes for the target population.

Prayas was implemented with four NGO/CBO partners in six states.

Supported by ViiV Health Care Foundation since 2016. The recent project phase concluded in March 2020.

### Research

Alliance India focuses on generating fresh evidence through robust programme data for evidence-based strategic planning and programme implementation. The goal is to develop organizational capacity to design and implement research studies which allow our programmes to devise programmatic pathways based on evidence, contribute to the national and regional knowledge on new and emerging aspects in HIV response and develop a better understanding of the existing issues which affect key affected communities we work with.

Completed research and evaluation studies:

- Long Term Impact Assessment of programme titled 'Pehchan' under 'Piloting Different Ways of Measuring Outcomes'.
- End line evaluation of Wajood: Empowering Transgender and Hijras to access Sexual Health and Human Rights in India.
- Assessment of HIV-related risk behaviours and vulnerabilities among female spouse of male injecting drug users in Delhi – a cross-sectional, observational study.
- Rates of non-fatal opioid overdose among people who inject drugs in Delhi: a cross-sectional study.

## Currently, Alliance India is involved in two major research studies:



Research Title: Study to understand the role of stigma on antiretroviral initiation and retention among HIV positive MSM/TW+W

Collaboration: Albert Einstein College of Medicine, National Institute of Health (NIH), USA and in close coordination with NACO and Ministry of Health & Family Welfare.

Alliance India site: Mumbai and Hyderabad

Sample size: 370 clients (185 MSM and 185 TGW)

Research period: 2019-2021



Research Title: Study the feasibility of Oral TDF-containing PrEP, administered, once-daily orally to men having sex with men (MSM) and transgender individuals (TGW) in India.

Collaboration: ICMR Delhi (Funded), NARI, PUNE, Alliance India and Shaan Foundation in Jalandhar with guidance and close coordination with NACO and SACS.

Alliance India Site: Jalandhar Samarth Clinic

Sample size: 400 MSM and TGW Research period: 2019-2021









#### **Event Highlights**

### Hijra Habba

The annual Hijra Habba (meaning amalgamation of transgender people) is Alliance India's annual signature event that has not only been able to bring together various concerned stakeholders on a single platform to talk about the welfare of the transgender community but also has proved to be a stepping stone in advancing the advocacy efforts of the community over time. The 8th annual Hijra Habba event themed 'All Citizens=Equal Rights' was organized on 21st June 2019 at The Lalit, New Delhi. The event brought together about 250 transgender people and friends and allies of the transgender community from across the country.

The event successfully engaged with newly elected members of parliament for the holistic welfare and development of the transgender community and drew the attention of the policymakers and stakeholders towards changes to be proposed in the Transgender (Protection of Rights) Bill 2018. The public hearing was used as an effective tool to advocate for the rights of the community particularly concerning health, social welfare and entitlements, human rights violations, gender-based violence, poverty and economic development and need for inclusive policy development.

The community leaders expressed their faith that the government would live up to their promise and integrate their demands into their new policies, which would then help affect change and bring about a marked improvement in the quality of life of transgender people in India.

#### **Event highlights**

### World AIDS Day 2019

Communities Make The Difference

India's National Strategic Plan for HIV/AIDS and sexually transmitted infections 2017-2024 provides technically sound & strategic approach to fast track the objectives set to fulfil the vision of AIDS-free India. India's HIV response model, the shared responsibility and accountability among government, communities and civil society organisations have played the prime role in this achievement of the National AIDS Control Programme.

In this context, Alliance India, on the observance of World AIDS Day (1 December 2019) organized a community consultation with key affected population groups i.e. transgender, men who have sex with men, female sex workers, people who use drugs, people living with HIV and young people with the theme 'Communities Make the Difference'.

The focus of the consultation was to bring the community intelligence to recommend solutions to the National AIDS Control Organisation to enhance the community engagement to fast track the global target of 90:90:90. The consultation was attended by experts from all key affected population groups, PLHIV and young people from various states. Key points from the consultation were briefly presented to the esteemed panellists.









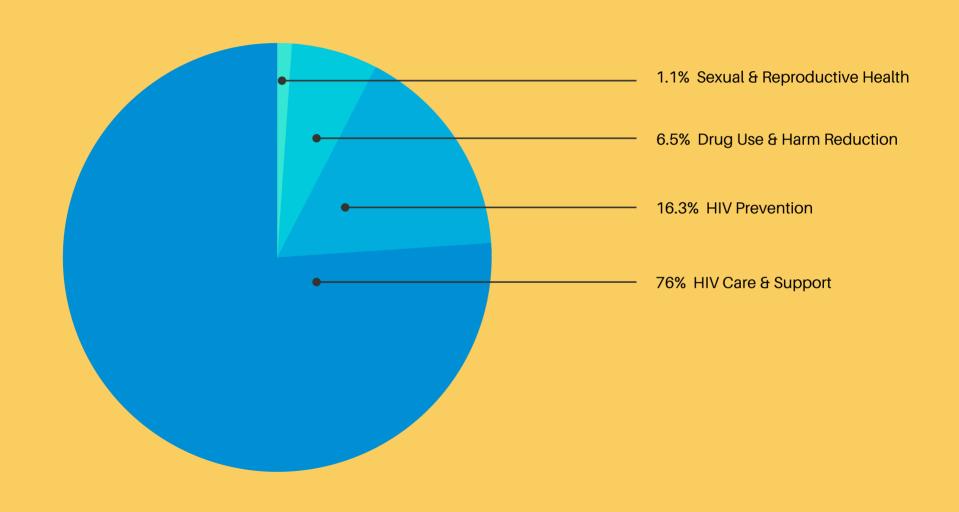
### Finance & Operations

We are grateful to all our donors for their growing commitment to our work. The annual turnover for the year is INR 57.63 crores, supported by multiple donors. The support ranges from less than 1% to as high as 81% which reflects the scale of implementation and interventions. Small funding reflects innovations and pilot testing, while the large scale funding reflects pan-India operations with mainstream organisations at both national and state levels.

The grant fund is utilised for different interventions that range from 1.1% to 76%. The distribution focuses on Prevention at 16.3%, Care and Support being largest at 76%, Sexual and Reproductive Health (1.1%) and Harm Reduction on Drug Use (6.5%). The large scale funding of 92.3% focuses on the prevention of HIV/AIDS, and care and support for people living with HIV.

The application of funds reflects that major portion, 65.86%, is being granted to implementing organisations at the grassroots level all over India. This is a reflection of our community-centric project implementation approach.

## Finance & Operations



## Our Board

Dr Shahabuddin Yaqoob Quraishi Dr Saroj Pachauri Dr Sanjay Patra Dr Shalini Bharat Dr Madhu Bala Nath Mr Krishnamurthy Gopalkrishnan Ms Arati Radhika Jerath



# Thank You!

Our community of passionate outreach workers, peer counsellors, fundraisers, implementing partners, strategic partners, and generous institutional donors, individual donors, and brand partners continue to inspire us. They make it possible for us to work with and for people living with HIV and the key affected populations.



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