

Reducing the impact of HIV on men who have sex with men and transgender populations in South Asia

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-Bhutan –

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A South Asia multi-country Global Fund Project Round 9

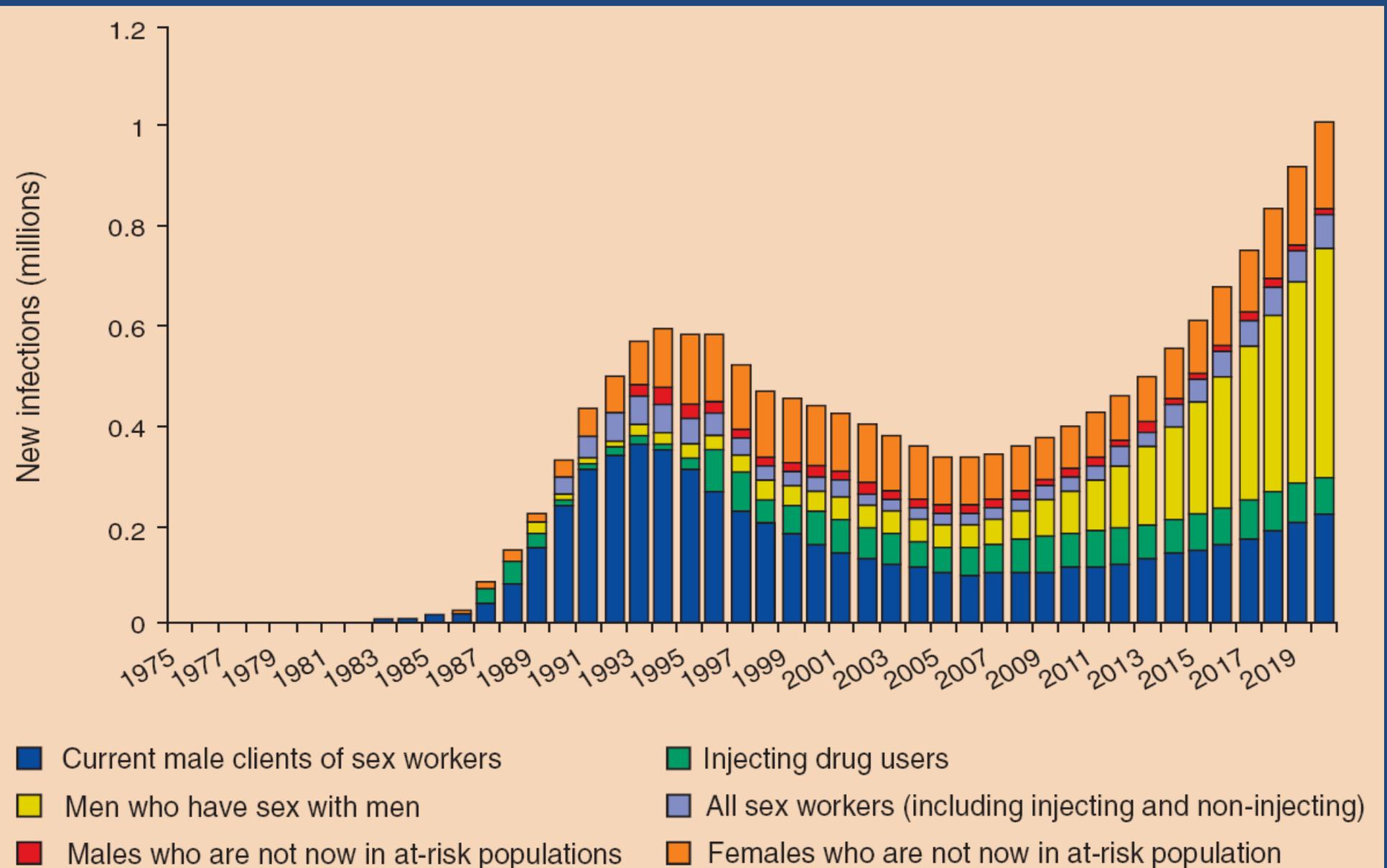


Need for HIV/AIDS Program addressing MSM & TG in South Asia

The **Asian Epidemic Model** estimates that without improved HIV prevention successes

- **the number of MSM becoming infected with HIV will increase greatly** within the next ten years, and that
 - **MSM will form the highest proportion of people being infected with HIV** (Figure 2.16 on page 57 of Redefining AIDS In Asia, the 2008 report by the Commission for AIDS in Asia)
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EARLY SUCCESS, POTENTIAL FUTURE FAILURE AND A GROWING MSM EPIDEMIC IN ASIA



Countries involved

1. Afghanistan
2. Bangladesh
3. **Bhutan**
4. India
5. Nepal
6. Pakistan
7. Sri Lanka

Partners

PSI Nepal	Regional Partners	Grant management
NFI		Regional-level and country-level technical assistance and support
UNDP		Regional-level support on advocacy and policy development
Afghanistan	Country Partners	To be developed. In-country technical assistance, along with MSM and TG CBO development
Bangladesh		BSWS – in-country capacity building and advocacy
Bhutan		Ministry of Health
India		MAAN – in-country capacity building and advocacy
Nepal		BDS – in-country capacity building and advocacy
Pakistan		To be developed. In-country technical assistance, along with MSM and TG CBO development
Sri Lanka		CoJ – in-country capacity building and advocacy

Goal

To reduce the impact of HIV and AIDS on men who have sex with men (MSM) and transgender populations (TG) in South Asia*

*We use the term South Asia here to cover the seven countries specifically addressed in this proposal

This includes reducing vulnerability, and minimising the risk for further spread of HIV among MSM and TG in South Asia

Objectives

To increase capacity and improve the delivery of HIV-related services for MSM and TG in South Asian countries

To improve the policy environment with regard to MSM, TG, and HIV related-issues in South Asian countries

To improve strategic knowledge on MSM, TG, and HIV-related issues in South Asian countries

Why a multi-country approach?

- More **effective**: similarities across countries that affect the risks and vulnerability of MSM and TG to HIV, including sexual and gender identities, social norms, stigma and discrimination, and restrictive legislation and law enforcement. Because of these similarities, knowledge, skills and resources developed in one country can often be applied in other countries.
- It is more **economic** because of economies of scale, as this support can be provided across a number of countries, and therefore fewer resources (financial, human and other) are needed.
- It is a more **efficient** use of resources (human, financial and other), as resources can be shared across a number of countries, gaining greater utility from them.

Issues... Bhutan

- Stigma & discrimination impeding MSM & TG from accessing services
- Available services are not designed to meet MSM & TG issues
- No specific MSM, TG, and HIV-related service provision
- Support required for:
 - addressing policy issues
 - developing HIV-related services for MSM and TG
 - undertaking any necessary research

The Project in Bhutan

Current Characteristics

→ **“Transform”** →

Future Characteristics

Policy environment ?

Understanding MSM, TG issues
and perspectives

Enabling policy environment

Stigma?

Creating enabling policy
environment

Care providers mapped

Access to service ?

Capacity building,
Community Mobilization &
advocacy

Improved access to appropriate
and sensitive sexual health
services for MSM, TG

Services not tailored
for MSM and TG population?

PSI
NFI
UNDP
NACP

Impact and outcomes

Whilst Bhutan does not currently report on the indicators below, advocacy support may be provided to address this gap:

- Impact - % of men who have sex with men who are HIV infected in Bhutan (UNGASS indicator)
- Outcome - % of men reporting the use of a condom the last time they had anal sex with a male partner in Bhutan (UNGASS indicator)

MSM, TG, and HIV-related service provision

Major support proposed:

- Provision of on-going technical assistance and support to develop, and support the work of existing organisations
- Increasing their capacity for advocacy and policy development work, towards developing an enabling environment for MSM and TG HIV-related services, and the provision of HIV-related service to MSM and TG
- BCC resource development
- In-country, and multi-country operational and other research, towards establishing good practice and identifying MSM, TG, and HIV-related issues and needs

Role of PSI/Nepal

Main activities:

Overall grant management

Monitoring and evaluation

Procurement of commodities (condoms, lubricants etc.) for Afghanistan and Pakistan

Organise and manage semi-annual meetings of the GF project executive committee

With NFI, organise and manage semi-annual meetings of the country-level partners

Role of NFI

Main activities:

On-going technical assistance and support provided to country partners through seconded advisors, along with a regional knowledge and training centre

BCC resources development that can be shared, and support for in-country resource development

Work with country partners to develop country specific advocacy strategies on MSM, TG and HIV-related issues, and undertake a range of national policy and advocacy activities, to support national programmes on MSM, TG, and HIV-related issues

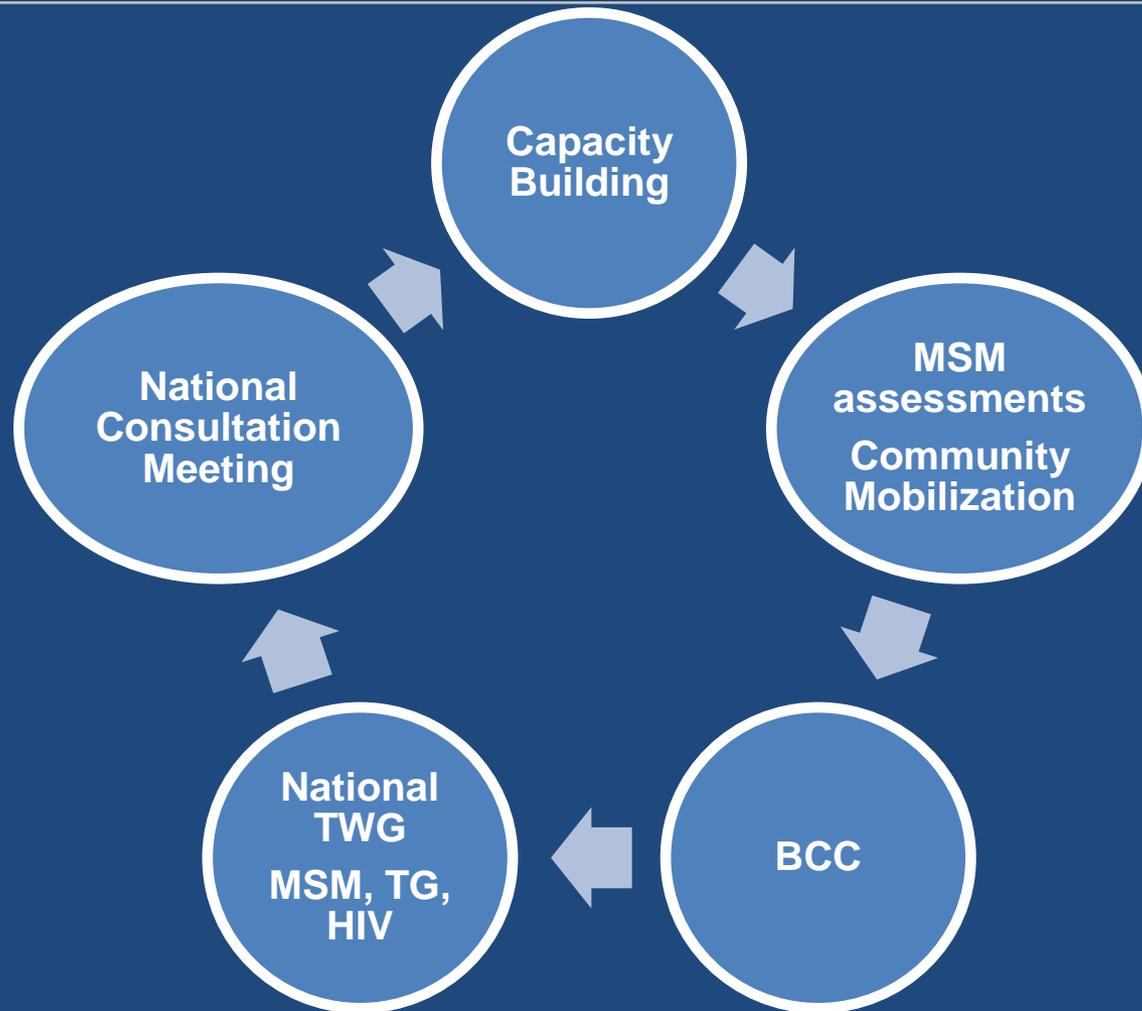
Undertake psychosocial, policy research, and operations research on MSM, TG, and HIV-related issues with country partners and the UNDP

Role of the UNDP

Main activities:

- Increasing regional policy and advocacy efforts and leadership of multi-sector stakeholders, on reducing the impact of HIV on MSM and TG populations
- Developing and disseminating regional and national strategic information on MSM, TG, and HIV-related issues
- Strengthening policy and advocacy support to existing sub-regional and national networks of MSM and TG populations

BHUTAN: Country Plan



BHUTAN: Country Plan

Capacity Building

- Training on policy, advocacy, program design, implementation, etc
- Exposure trips to other SA countries
- Attending national, regional, international meetings, conferences

MSM Assessments Community Mobilization

- Support in conducting MSM assessments
- Design and technical support in community mobilization process and skills

BHUTAN: Country Plan

BCC

- **Support with BCC material design**
- **Local adaptations, translation**

**Technical Working
Group**

- **National TWG on MSM, TG and HIV**
- **To support development & implementation of proposals on MSM, TG and HIV issues**

In Bhutan...

National Consultation Meeting

- Developing & advocating policy
- Coordinating activities
- Developing capacity to implement HIV services for MSM and TG

BUDGET

- | | |
|---------------------------------|-------------|
| • Supportive environment | USD 80,015 |
| • Prevention – BCC | USD 7,530 |
| • National consultation meeting | USD 8,827 |
| • Through UNDP | USD 61,000 |
| • TOTAL | USD 157,372 |

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- Thank you