In contexts where key populations are criminalized, those implementing key population programmes are often at risk of arrest and violence for their work. The risk is multiplied when implementers themselves are also members of key populations. In this IAS ONEVOICE, we diverge from our usual format to share personal stories that cannot be safely attributed to the individuals interviewed. If the IAS identifies these implementers or describes the specific locations of their programmes, it could put their safety, their beneficiaries’ safety and their programmes at risk. To avoid providing identifying information, we present several individuals’ stories through one anonymized composite interview. These are their stories...

THE CURRENT REALITY FOR KEY POPULATIONS

I work with sex workers and men who have sex with men. The police and local government officials criminalize and harass both these populations in my setting, and criminalization has impacted our programme from the very first day of its operation.

“SUDDENLY THE NEWS WAS FILLED WITH STORIES OF THE DANGERS OF HOMOSEXUALITY AND PROSTITUTION.”

Sex workers and MSM cannot safely disclose their behaviours to healthcare workers for fear of arrest; police confiscate key populations’ condoms and lubricant, and threaten to use this against them in court; we must be quiet about our beneficiaries so that our landlords will not expel us. All of this affects our ability to reach key populations with HIV testing and treatment. But we have adapted to each of these challenges. We have a partnership with the Ministry of Health (MOH), and our work is sanctioned and encouraged under the National Strategic Plan for HIV/AIDS.

Nevertheless, these challenges have intensified recently. During a period of political unrest, when new corruption charges were being levelled against the government every other day, officials found a way to distract from these anti-government headlines.

Suddenly the news was filled with stories of the dangers of homosexuality and prostitution. High-level ministers decried the loss of family values and traditional culture, placing these societal ills at the feet of gay men and sex workers, and vowing to crack down on “immoral behaviour”. While no one specifically spoke of transgender women – a population that is not widely understood in this context – they were clearly also targeted.

THE ARRESTS

I saw the impact almost immediately. Some of our staff members were arrested when providing mobile testing. Police and local administrators frequented our drop-in centres, looking for opportunities to accuse us of failing to follow the law.
Our peer educators were arrested and jailed repeatedly for distributing condoms and lubricants. While in jail, they were beaten and had their heads shaved. Those living with HIV were denied their ARVs.

We try to get people out as quickly as possible, but over time we’ve seen that paying bail can cause problems later. We know that the police are making a business of this. They profit from the money for bail, so they keep doing it. After seeing this cycle being repeated again and again, several arrested peer educators said they did not want to pay. They wanted to go through the justice process. We supported the peer educators’ decision, and it was a good one. But it is terrible to wait and wonder what will happen – just sitting on the outside with limited knowledge and very little that you can do to help.

THE IMPACT

When the arrests of implementers intensified, we collectively concluded that our partners should temporarily suspend their activities to avoid mass arrest. The drop-in centre, which offers sensitization, condoms, lubricant and testing, was closed for a month. We reduced mobile testing. Anyone associated with LGBT issues had to refer their clients to a general clinic run by a local partner.

For the months when things were the worst, our programme statistics in the affected area show less uptake of condoms and lubricant, less testing, and less identification of HIV-positive men who have sex with men.

We also know that staff members were forced to spend less time on our main activities. While we were actively advocating for the release of arrested people, high-level staff were often on the phone for hours every day discussing strategy. Some individuals were spending at least a quarter of their time on safety and security instead of testing or prevention. None of this was in our work plan, but we cannot implement at all if no one is secure to do so.

EFFECTIVE STRATEGIES

When dealing with arrests, it is important to hire a lawyer if possible. Yet, sometimes even the lawyers are afraid to get involved as they, too, can land in jail. But we have to provide for those who are arrested, and not only while they are in jail. Our peer educators were arrested, and when they were released, local partners organized a place for them to stay while a liaison person contacted their families. We knew that it was not safe for them to return home immediately. Their families had to understand the situation, and we had to make sure that those arrested would not be further abused at home.
Another local organization provided them with counselling for as long as they needed it.

“WE ARE SPENDING MOST OF OUR TIME FOCUSING ON PREVENTION OF VIOLENCE.”

We are spending most of our time focusing on prevention of violence. We are creating a safety and security plan and bringing in external groups to train our staff. We know we need to do more to keep our peers and others safe and help everyone working on the programme assess the risks of their work.

“ONE OFFICER ATTENDING A WORKSHOP ASKED, ‘WHY CAN’T WE JUST ROUND UP EVERYONE LIVING WITH HIV SO THEY DON’T INFECT ANYONE ELSE?’”

At the same time, we are training police and local administration in many of the provinces where we work. We know that they do not know what the policies or national strategy states. Many of them have an attitude that the HIV epidemic can be addressed by arresting people.

One officer attending a workshop asked, “Why can’t we just round up everyone living with HIV so they don’t infect anyone else?” These trainings give us the chance to explain why this can never be effective and how it violates human rights, including for LGBT people and sex workers. A lawyer comes to these trainings to explain the law and make sure that the police better understand their role.

“I HAVE BEEN INSPIRED BY SOME OF THOSE IN GOVERNMENT WHO UNDERSTAND THE ISSUE AND WANT TO WORK IN PARTNERSHIP. I KNOW THAT THEY ARE ALSO TAKING A RISK.”

We also make sure that in all of our trainings, MOH officials explain the importance of our work for their objectives. Specifically, they explain that it is in line with the National Strategic Plan. Sometimes it is hard to find someone from the MOH who is willing to publicly support us, but there are always brave allies.
I have been inspired by some of those in government who understand the issue and want to work in partnership. I know that they are also taking a risk.

We have also seen these workshops as an opportunity to talk about the rights of all key populations. While the harassment of the LGBT community is more visible — in part because they know that their rights are being violated and speak out against these violations — police constantly harass sex workers, who have come to see this treatment as normal. These workshops let us talk about the rights of all people and highlight the ways that police harassment also keeps sex workers from accessing HIV services.

WHAT’S REALLY NEEDED

I cannot state strongly enough how important it is to solicit the advice of and work hand in hand with local community-based organizations to actually understand the risks and respond to them when beginning a new programme.

As key population programme practitioners, we aren’t doing enough to address the current environment. Our work plans are all about HIV-related indicators and they don’t take into account that you have to have an enabling environment to do HIV programming. Donors and implementers must take this to heart.

More needs to be done to ensure accurate implementation. Policy makers must work with those on the ground tasked with implementing the policies that they have worked so hard to write. They must also help ensure that implementers at every level are better aware of the contents of their policies and laws in order to ensure that they are meeting their intended goals.

“OUR WORK PLANS ARE ALL ABOUT HIV-RELATED INDICATORS AND THEY DON’T TAKE INTO ACCOUNT THAT YOU HAVE TO HAVE AN ENABLING ENVIRONMENT TO DO HIV PROGRAMMING.”

I extend my thanks to those who are brave enough to be allies at the local level and to fight for accurate implementation. I have tremendous respect for those who have been operating in these very difficult environments.

Editor’s note: This interview has been edited for length.

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