



ISRCDE

### GUJARAT AIDS AWARENESS AND PREVENTION UNIT OF ISRCDE

B/01, Siddha Chakra Apts,  
Ellisbridge, Ahmedabad-380 006  
India  
Tel: 91-79-6575282  
Fax : 91-79-6575962  
e-mail : gapad1@sancharnet.in

Reg. No. F/1429 Ahmedabad,  
Foreign Grant Reg No. 041 - 91 - 0162

Printed by : Creative Printers Pvt Ltd.,  
Ahmedabad

Production: Gujarat AIDS Awareness  
and Prevention Unit - ISRCDE

Design: Photographics



# GAP'S Response to HIV/AIDS 1989 - 2002



ISRCDE

GUJARAT AIDS AWARENESS AND PREVENTION UNIT OF ISRCDE  
B/01, Siddha Chakra Apts, Ellisbridge, Ahmedabad-380 006

**Safer Blood Supply to Community**



**Unorganized, organized and migrant labour programme**



**Awareness programme within the Prison**



**Capacity building of Rural NGOs**



**Street Drama**



**Advocacy**



# GAP's Response to HIV/AIDS 1989 - 2002



I S R C D E



## Preface

It was indeed a great pleasure for me to see this compilation of GAP's work and it gives me a tremendous satisfaction, in a sense that, "Is it true that we have done so much work?"

Here, we build upon our past work and experiences, from a phase of complete denial to acceptance. This is a synthesis of critical learning. Behind each open learning, there is some covert learning as well. India is now more than 17 years on its AIDS crisis, we are standing on a cross roads and looking for future directions for more effective AIDS Control programmes based on our past experiences.

AIDS affects many more than it infects therefore, there are no numerical answers. We are all affected and we all do something together to mitigate the spread of this virus on its path.

Radium Bhattacharya  
Director  
GAP-ISRCDE

## What GAP is and what GAP does:

GUJARAT AIDS AWARENESS & PREVENTION UNIT : (GAP) is a unit of International Society for Research on Civilization Diseases and on Environment, (ISRCDE). ISRCDE is a non governmental organization registered under Public Trust Act 1950 & Societies Registration Act 1860 F 1429, Ahmedabad

### **Our Mission**

GAP is the lead non governmental organization for the people and other organizations in the field of HIV/AIDS and sexual health. It works to raise the information level and awareness of HIV/AIDS and sexual health, influence on attitude, opinion, policy, prevention and professional practices. It is a resource center for advise, information, advocacy and expertise. Collaborating with other organizations of India and abroad, GAP aims to create an understanding towards all those affected by HIV/AIDS.

### **Activities**

GAP is Gujarat's first information dissemination centre for the people who are concerned about the spread of HIV and AIDS and also those who are affected by HIV/AIDS . The centre was opened in May 1989. It has been a basic tenet in all the UNIT's work that we aim for a holistic model of working in which strategy development, community work, material production, training and development and counselling and care are the major thrust areas.

Work is undertaken with a wide range of statutory agencies and voluntary and community groups in the city and outside city and GAP has links with many relevant organizations regionally, nationally and internationally.

GAP works to promote sexual health and to prevent the spread of HIV by a variety of methods including :-

- \* Policy and strategy development.
- \* Health needs assessment.
- \* Material development.
- \* Information dissemination.
- \* Group work.
- \* Detached, street and outreach work.
- \* Advocacy.
- \* Training.
- \* Peer Education.



## Background

The first HIV case in India was detected at Christian Medical College, Vellore in 1986, which was around 6 years after the first report in USA (1980). The International Society for Research on Civilization Diseases and on Environment (ISRCDE), is a non-governmental organization working to bring awareness in the field of health and environment. In 1989, a story from a local news paper startled the ISRCDE members - the story was around the professional blood donors who sell their blood for livelihood and who often indulged in high risk behaviour. An agency that carried out HIV blood test on them, found that more than 90% of these professional blood donors were reported to be HIV positive. ISRCDE members responded to this alarming news, immediately showed their concern and initiated the process to collect more information and materials on HIV/AIDS, both from India and abroad. In 1990, Gujarat AIDS Awareness and Prevention (GAP) organized a national workshop on HIV/AIDS, where eminent HIV/AIDS activists took part. This workshop was attended by more than 50 participants from all over India and an action plan emerged at the end of the workshop. The workshop was conducted by Dr. Anthony Klouda, International Planned Parenthood Federation (IPPF - London). Financial support was also received from IPPF-ODA(Overseas Development Authority). The objective of the workshop was to understand more about HIV/AIDS and to disseminate information to different stake holders. The action plan included several intervention areas, and, ISRCDE took up a programme on *Safer Blood Supply to the Community*.

## Milestones

Formation of Gujarat AIDS Awareness and Prevention (GAP)unit of ISRCDE (1989)

Immediately after the workshop, Gujarat AIDS Awareness and Prevention (GAP)Unit was formed under a task force. Finally the task force was replaced by an advisory committee.

## Safer Blood Supply to Community (1990)

In 1990 a programme was launched which was targeted to understand medical blood supply management in India in general and, in Gujarat in particular. It was soon realized that 60% of the blood in Gujarat( and in many other states also) used to come from a group of people who made a living by selling blood. Many other partners are also involved in the nexus. These blood donors are called Professional Blood Donors or Commercial Blood Donors (CBDs). GAP realized that to stop this trade it was necessary to group these people together and bring awareness amongst them, especially in respect to their hazardous life style.

## Creating awareness amongst CBDs and other stake holders in the field(1990)

GAP took up the difficult task of bringing awareness on HIV/AIDS amongst CBDs, pathology laboratories who often used to operate as blood collection centres, Blood Banks, and the medical



fraternity in general. The methodologies used were meetings, workshops and interpersonal communication. The first series of media materials in Gujarati and English were brought out at this stage, e.g. : video cassette *Selling of Blood: An aspect of HIV/AIDS in Ahmedabad*, *What you must know about HIV/AIDS*, for laboratory technicians, *Universal Precautions wall chart*, a small flier on *How to Use Condom* and a set of 20 slides that carries illustrated information on HIV/AIDS.

## Experience on Voluntary Counselling and Testing(1990)

Perhaps for the first time in India, GAP started a Voluntary Counselling and Testing (VCT) Service for CBDs in Ahmedabad. This brought a lot of controversy as the understanding between mandatory testing and

consent testing with counselling support, was not very clear to many. An overall understanding was that testing itself is unethical. GAP carried out HIV tests for CBDs every three months. This became obvious for GAP to do, as many of the blood collecting centers did not adopt compulsory HIV testing on donated blood. GAP tested 1275 CBDs at an interval of three month for many years. The CBDs came voluntarily for testing as they understood the importance of knowing their HIV status. Their coming forward on their own was achieved as the programme was supported by awareness and skill development workshops for the CBD group, and was also supported by trained peer educators. The programme culminated by achieving safer blood supply to the community of Ahmedabad, as almost no CBDs are selling blood in Ahmedabad city now. Most of the CBDs entered alternative income generation opportunities with GAP's support. This programme also inspired GAP to become proactive to motivate young people for voluntary blood donation. CEBEMO - Holland supported this programme.

### **Research (1990)**

GAP is continuously keeping abreast of developments on HIV/AIDS awareness and control, through KAPB studies. The cross section of people covered till date are men & women from urban and rural areas, teachers, students, businessmen and women, housewives and working women, MSM, truck drivers, CBDs, prison staff and prisoners, organized and unorganized labour, laboratory technicians and social workers. GAP has also collected commonly used vocabularies on sex and sexuality with related myths and misunderstandings. GAP's resource centre maintains the materials collected from road side shops that sell local medicines and objects of sexual pleasure.

### **Commercial sex workers programme (1990 -1995)**

GAP initiated the commercial sex workers unification and solidarity programme in 1990 in Surat, where more than 500 sex workers from different regions of India used to work. A group was formed with these sex workers who cultivated the art of saying 'NO' to the clients who

refused to use condom. As subsequently, the work has been taken up by local NGOs, GAP realized that there was no need of duplicating the work for a small target audience.

### **Medical Practitioners and Paramedical Training programme (1990)**

From the very onset of intervention work, GAP recognized the importance of working with the medical and paramedical personnel. Regular workshops are being conducted for the groups and reading materials have been distributed. Support IEC materials, like, a wall chart on Universal Precautions (in Gujarati) and a booklet on "The Need for Information, Compassion and Understanding AIDS" for medical practitioners have been developed.



### **GAP's Capacity Building on Counselling Skills (1992)**



During the interaction with CBDs, GAP understood that counselling skills building is one of the most important components of HIV/AIDS prevention and control programmes. This became imminent, when more than 11% of CBDs turned out to be HIV positive and needed proper emotional support in an era when there was no ARV. Counselling also helps to bring attitudinal and behavioural change. GAP established a partnership with the London Lighthouse (UK), the premier institute of counselling and care. London Lighthouse sponsored the counselling skills development programme for 3 years and 40 skilled Counsellors emerged at the national level. Facilitators and experienced counsellors came from UK to give training. GAP counsellors are also trained through

placements in the London Lighthouse (UK). GAP has published 3 counselling skills development training manuals in English.

### Creating awareness amongst other NGOs and Institutes (1993)

The necessity to sensitize other NGOs became very important when India was passing through the denial phase. GAP initiated the training programmes for Ahmedabad city-based NGOs and, slowly included NGOs from rural areas as well. To bring the information up to the grassroots level through NGOs, a special IEC material in the form of *flip chart story telling* was developed. This book is available both in Gujarati and English and has become one of the most used IEC materials, both in rural and urban areas.



### Training of Trainers (1994)

As soon as the NGOs realized the need of working in the field of HIV/AIDS, requests started coming in from NGOs for capacity building programmes. A training module was developed with components like information dissemination and communication skills. The module is available both in English and Gujarati. 65 NGOs were trained in this program.



### Monthly Bulletin (1994)

For a period of three years, when the information of HIV/AIDS was at its minimum amongst urban and rural population, GAP had published a monthly bulletin carrying information on the subject in the vernacular language. Due to a paucity of funds, the publication was discontinued.

### Counselling and Care Services(1995)

GAP provides emotional, social and administrative support to PLWHA. The programme includes one-to-one counselling, family counselling, group counselling and workshops on Living a Quality Life. People living with HIV/AIDS (PLWHA) developed self confidence, were motivated and extended mutual support. These activities have helped in removing internal and social stigma and discrimination. PLWHA volunteer themselves and get involved in general awareness programmes. Till date GAP has extended emotional support to more than 900 PLWHA and many other affected people.

GAP has developed 7 sets of posters on the theme "*Live and Let Live*" and video films on positive living through a series of interviews with HIV positive people : "*Face to Face*"

### Truckers Project (1996)



In 1996, GAP launched the intervention programme with primary and secondary stakeholders on National Highway No. 8 in Ahmedabad. The project was innovative as the truck-owners were sensitized about the project from the point of view of economic loss on the transport corridor if the spread of HIV/STIs was not mitigated. Later, the project was merged with the DFID-NACO operated Healthy Highway Project, and was extended to two more areas of Gujarat.

GAP published illustrative booklets and other IEC materials which remained very popular even after the introduction of BCC materials by DFID/NACO. During the decentralization process, in 1999 the project was handed over to GSACS by NACO and GAP exited from the programme in March 2002. The project is now ongoing in the name "Men's Responsibility", in Ahmedabad and Modasa.

### **Adolescence Reproductive and Sexual Health Education (1996)**

Sexual health education is a challenging area in India where the discussions on sex and sexuality is a taboo. In this backdrop, GAP started its Reproductive and Sexual Health Education Programme within the school system and with the school drop outs in slum areas of Ahmedabad city. Though the programme initiated the intervention with urban schools, it finally reached to rural schools as well. The programme helped in developing different training modules like teachers training, peer educator training, classroom intervention and life skill development for school dropouts. GAP also developed appropriate IEC materials which include video cassettes, reading materials, games and wall charts.

### **MSM (1997)**

GAP initiated a programme to reach the outreach group like MSM in Ahmedabad. After imparting training to a Peer Educator, GAP united more than 155 MSM of the city from their areas of operation. These people were informed about the risk involved in their profession and an enabling environment to collect condoms and water - based jelly was made available to them. Again, GAP withdrew itself from the programme when another NGO was sponsored to work with the same group of people. The programme is ongoing in rural Gujarat.

### **Unorganized, organized and migrant labour programme (1997)**

Intervention with construction workers which include working with inter and intra state migrant workers, is being carried out in 7 different areas of Ahmedabad. More than 10,000 workers have been reached through this programme.

The organized sector intervention on HIV awareness has been done with drivers, cleaners and mechanics of State Transport Corporation and in some industries as well.

### **Urban To Rural “Safar”(1997)**

This is a programme where general public are contacted at the inter-state and intra state bus terminus - where people are traveling from one place to another. While they are waiting for the buses, the outreach workers establish contact and interact with them.

### **Prison Awareness Programme(1998)**

The awareness programme has been carried out for the inmates of 19 jails of Gujarat. In the Central Jail, Sabarmati, 42 inmates have been trained as peer educators. GAP executes the training on HIV/AIDS which is being regularly attended by prison staff ( administrative and security). HIV/AIDS has been included as a part of the regular training programme.

### **Capacity Building of Rural NGOs (1999)**

GAP has successfully completed the NGO capacity building programme for 24 rural NGOs from 8 districts of Gujarat. Working with different types of organizations is challenging and educative as well. The previous programmes of many of these NGOs' had never included health and HIV/AIDS as priority area. Interestingly, all NGOs have accepted HIV/AIDS prevention as a part of their present work, irrespective of the ideological differences. Through this partnership programme with other NGOs, GAP has been able to reach out to different sections of the society - rural area, schools children, diamond workers, youth, tribal fisher-men and women, communities, organized sector, unorganized sector etc. These experiences are quite enriching and the GAP team has developed sufficient expertise in dealing with such groups. These NGOs have been able to perceive HIV/AIDS as a major developmental issue. Impact on the community is also palpable from several observations of the project.

### **Question – Answer Column (2000)**

The Indian Express, a local English daily, carried a weekly “Question & Answer” column, “AIDS Express line” on HIV/AIDS. For a year GAP answered questions from readers, related to HIV/AIDS/RTI/STIs.

### **Voluntary Counselling and Testing VCT (2002)**

GAP recognized the importance of VCT at a very early stage, while working with the commercial blood donors. (CBDs). The VCT programme has now been launched for general population. GAP's intensive counselling experience is the back bone of this programme. The VCT programme is supported by an extensive awareness campaign.

### **Street Drama Wing(1995)**

GAP has its own street drama wing. The street plays are enacted during mass awareness programmes.

### **Abhiprayas(1998)**

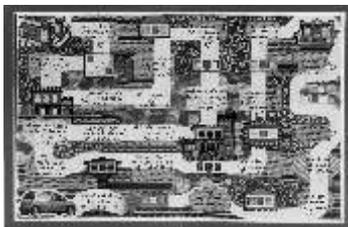
An income generation centre, helps PLWHA to raise additional income for their sustenance. As such it does not generate adequate income, but it helps them to get out of their emotional trauma, while they also earn some additional money. This programme is managed by PLWHA, and, has also helped in involving more people in the GIPA programme. GAP has developed a training module on Skills Development for the Alternative Income Generation activity of PLWHA.

### **Training Wing**

GAP has a well trained core group of educators who can train others in the field through participatory methodology. The modules are set up in a way that can be tailor-made according to requirements. Through the team of trainers, GAP has already trained many NGOs, institutions and individuals.

### **Developing IEC Materials**

GAP has expertise and linkages with organizations, institutes and people who helped in developing appropriate IEC materials. These materials are



constantly added to GAP's programme as and when necessary. All materials are produced after adequate field- testing.

### **Questions on HIV/AIDS : A Monograph**

A book containing answers to 100 most asked questions on HIV/AIDS, has been published in Gujarati.



### **Resource Centre**

GAP has a resource centre where reading materials and Audio- visual materials are available. Regular newspaper clippings from the national newspapers are also being processed. The resource centre has a large collection of posters from all over the world.

### **Participation in Exhibitions**

GAP organizes exhibits for participation in exhibitions locally, nationally and internationally

### **Participation in National and International Fora**

Staff members of GAP have participated in a great number of international and Asia Pacific AIDS Conferences since 1992, including the XIV International AIDS Conference at Barcelona (2002), the 6<sup>th</sup> ICAAP at Melbourne( 2001),XIII International AIDS Conference at Durban, XII International AIDS Conference at Geneva, 5<sup>th</sup> ICAAP at Kuala Lumpur (1999), International AIDS Conference in Yokohoma (1994), 2<sup>nd</sup> ICAAP at New Delhi (1993) etc.

### **Participation in Radio and TV Talk show**

GAP members have regularly participated in radio and TV talk shows, on issues around HIV/AIDS.



### **Advocacy**

GAP has developed the Advocacy Skills Development module which has been used to give training to NGOs/CBOs/ other organizations.

Gap is active in the following advocacy programme -

- Access to ARV for PLWHA
- PLWHA rights
- Implementation of Sexual and Reproductive Health Education in school system
- Female Condom and Microbicides
- Removal of Stigma and Discrimination

### **Important Meetings and workshops organized by GAP**

#### *Counseling skills development workshops*

In partnership with London Lighthouse GAP has already organized three counseling skills development workshops for participants at a national level.

*Conventions of the Indian Network of NGOs* - Three national conventions of the Indian Network of NGOs on HIV/AIDS were organized by GAP in Ahmedabad.

### **UNICEF meetings - Gujarat**

On behalf of UNICEF, GAP organized two important workshops:

- NGO response to HIV/AIDS in Gujarat : Considerations for Mobilizing and Supporting a Broader Response
- HIV/AIDS : Legal and Ethical Issues and Human Rights

### **Networking**

GAP initiated a network in Gujarat with NGOs working in the field. A member of GAP is represented in the Governing Council of Indian Network of NGOs(IN N). The INN secretariat operates from the GAP office. GAP has international networking with many organizations working in the field of HIV/AIDS.

### **World AIDS Day**

Since 1990, GAP observes World AIDS Day, every year. Through a variety of awareness programmes, GAP has been systematically bringing special attention on the World AIDS Campaign activities according to the year’s campaign theme chosen by UNAIDS.

### **Future directions for the organization (GAP-ISRCDE)**

1. Help in building community competence, social cohesion and good governance to strengthen the local support system and lower the risk of HIV/AIDS/RTIs.
2. Scaling up of intervention with adolescents and young people in rural-urban settings.
3. Reduce stigma and discrimination.
4. Social marketing of condoms.
5. Expanding the programme on care and treatment.
6. Advocacy with pharmaceutical companies in collaboration and cooperation with local NGOs and INN to reduce the price of ARV.
7. HIV/AIDS is here to stay, possibly for a long period of time. There is therefore the need to build the capacity and coping mechanism of community, institutions and organizations to accept this fact.

### **Services Provided by GAP**

- Information services.
- Availability of resource materials ( Books, Posters, Slides, Video cassettes, Cds)
- Capacity Building and Training
  - Communication Skills Development*
  - Counseling Skills Development*
  - Sex & Sexuality*
  - Information on HIV/AIDS*
  - Workplace Precautions*
- Counseling and Care Services : Anamika Drop - in Centre
- Voluntary HIV Testing (VCT)
- Free Condom Distribution Services

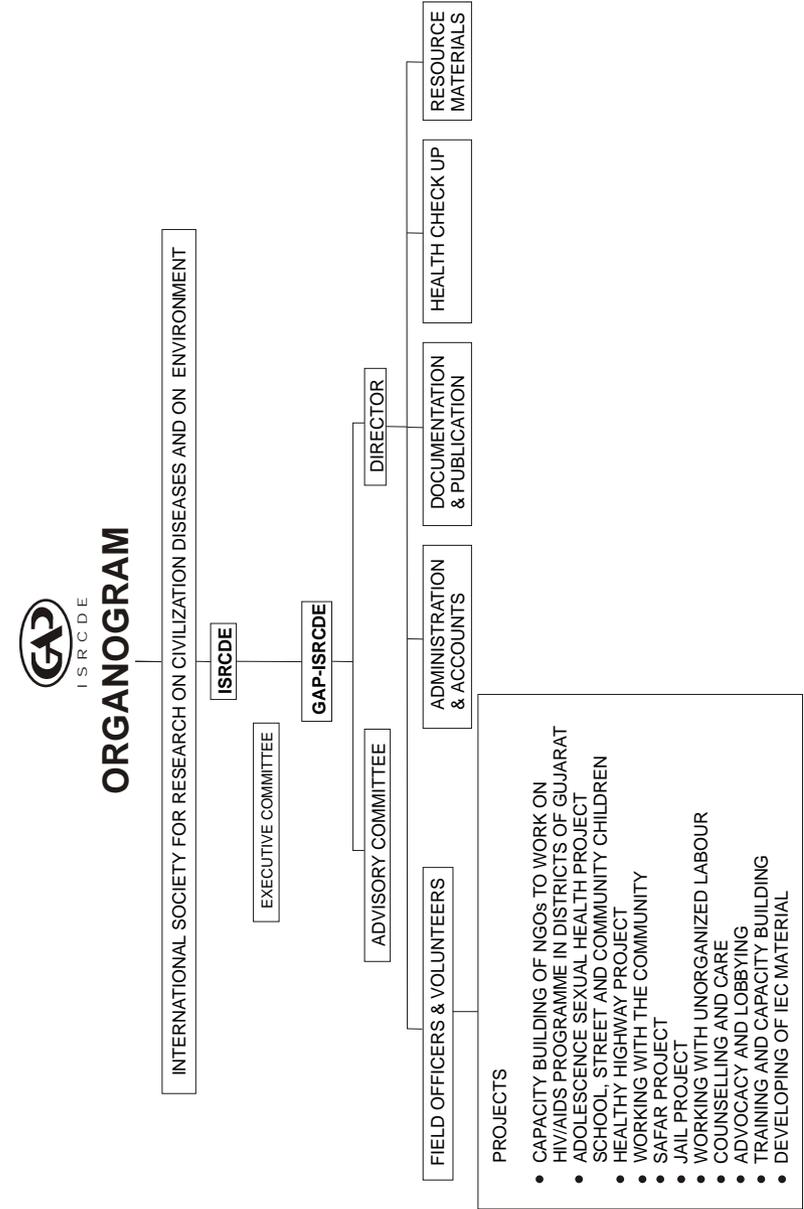


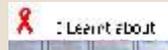
- NGO Networking
- STDs Check up and Treatment

**Thanks to your generosity**

Funders :

- Bilance The Netherlands
- Memisa - The Netherlands
- Cordaid - The Netherlands
- The European Commission
- International Planned Parenthood Federation (IPPF),United Kingdom
- National Lottery Charities Board International Programme, United Kingdom
- London Lighthouse, United Kingdom
- Department for International Development (DFID), United Kingdom.
- Dr. Steve Kerkez Foundation, United Kingdom
- The John D. and Catherine T. MacArthur Foundation, U.S.A.
- British Deputy High Commission Office, Mumbai
- Health & Environment Public Charitable Trust, India.
- Mahesh Bhogilal Charitable Trust , India
- *And many individuals*





Training



Resource Material →



Observing World AIDS Day

