The study findings and recommendations have already been a catalyst for action in the region and around the world. This is a testament to the study design, which — guided by KP members and program implementers — took into account the information needed for immediate action and engaged those who were best placed to act on study recommendations throughout the research process.

**Study Overview**

On a global scale, key populations (KPs)¹ are disproportionately affected by both HIV and violence, including gender-based violence (GBV), compared to the general population. Experiences of violence among KP members increase their vulnerability to HIV and impede their uptake of HIV testing and their initiation and adherence to HIV treatment. At the same time, living with HIV can increase KP members’ vulnerability to violence.

From 2015 to 2017, the Linkages across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES) project and the United Nations Development Programme (UNDP) collaborated with organizations led by and serving KP members — specifically, gay men and other men who have sex with men, female sex workers, and transgender women — in El Salvador, Haiti, Trinidad and Tobago, and Barbados to conduct participatory research on GBV and HIV. As described here, the objectives of the research were to better understand KPs’ experiences of GBV and to explore the connections between GBV, HIV risk, and KP members’ service-seeking behaviors, ultimately producing evidence intended to inform HIV service delivery policies and programming in Latin America and the Caribbean.

In participatory research, the population(s) who are the focus of a study both guide and take part in the research process. This approach acknowledges the expertise and experiences of the communities of interest and builds their capacity to conduct and translate research that supports their advocacy and programming efforts. The study Gender-based Violence, HIV, and Key Populations in Latin America and the Caribbean: A Qualitative Assessment was no exception. KP members were partners in design, implementation, validation, and dissemination, which improved all aspects of the study and helped ensure that the findings answered questions important to the communities participating in the research.

**Organizations Involved in the Study**

LINKAGES is a global project funded by USAID and PEPFAR that focuses on reducing HIV transmission, increasing access to prevention and testing, and increasing enrollment and retention in treatment and care among KP members. It operates HIV service delivery programs in many of the GBV study locations. UNDP supports countries to improve policies and programs on human rights, gender, and KPs for better health and development outcomes. The University of the West Indies HIV/AIDS Response Programme (UWI HARP) was a local partner for the study, while the Global Network of Sex Work Projects (NSWP), Innovative Response Globally for Trans Women and HIV (IRGT), and MPact Global Action for Gay Men’s Health and Rights (MPact) reviewed the research instruments and provided technical input.

**Highlights of Study Results**

The study results, which are profiled in detail elsewhere (see here and here), described the nature of KP members’ experiences of economic, emotional, physical, and sexual violence, in addition to other human rights violations, in the four study countries. These findings are consistent with other research on violence against KP members from around the world and in the region.

GBV was widespread, and perpetrators included family, friends, peers, neighbors, intimate partners, sex work clients, and third parties who facilitate sex work (e.g., managers of sex work businesses). They also included people in leadership positions and those whose mandate was to provide protection and support — health care workers, police, religious leaders, and teachers.

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¹Groups most affected by HIV, such as gay men and other men who have sex with men, sex workers, people who inject drugs, and transgender people.
SUCCESS STORY
August 2019

A finding of especial importance from an HIV service delivery perspective was that health care workers were found to be complicit in acts of discrimination and GBV. In particular, health care workers blamed KP members for their health problems, verbally abused them, gave them lower priority than other patients, and refused them care (see here and here).

The effects of GBV were wide-ranging. Emotional distress — humiliation, fear, and depression — was the most commonly reported impact of all forms of violence. Individuals who experienced GBV reported that it caused them to isolate themselves and avoid going out into public, including for health services. While such isolation has a clear impact on access to HIV prevention, care, and treatment, few participants (less than a quarter) perceived a connection between GBV and HIV risk, and those who did viewed it as limited to being forced to have sex without a condom.

As the study was designed to inform HIV programming, it also explored how KP members dealt with GBV and the implications for their met and unmet needs in violence response. Study participants said that when they shared their experiences of GBV, it tended to be with family and friends. However, in some circumstances, such as when GBV occurred in an educational setting or by an intimate partner, they rarely told anyone what they had gone through. They often did not seek services, because they either understood this to be another opportunity for abuse, did not view their experiences as violence, or did not know that services were available.

Despite the potential for negative experiences when seeking help, study participants saw a role for properly trained health care workers in supporting victims of GBV. The majority stated that they wished health care workers would ask them about violence in their lives and provide appropriate support upon disclosure. Some also recommended working with uniformed services to prevent abuse so that uniformed officers could be of support when violence occurred.

**Applying Research Results to Improve Programming**

To improve programming, the study team’s recommendations based on the study findings called for educating KP members on their rights, what GBV is, the links between that violence and HIV, and GBV response services available. Integrating and co-locating HIV and violence screening and response services were also suggested. In addition, researchers recommended training health care providers, educators, and psychosocial support providers to ask about and support victims of GBV; sensitizing uniformed officers on GBV, HIV, and human rights protections; and setting up peer support to improve immediate access to health, psychosocial, and legal services.

The study findings and recommendations have already been a catalyst for action in the region and around the world. This is a testament to the study design, which — guided by KP members and program implementers — took into account the information needed for immediate action and engaged those who were best placed to act on study recommendations throughout the research process.

In **Haiti**, LINKAGES and UNDP have been working with police, health care workers, and communities to reduce and document violence. Activities with police include a partnership between LINKAGES Haiti and UNDP to raise awareness and build practical skills on lesbian, gay, bisexual, and intersex (LGBTI) rights, HIV, and GBV for new recruits of the Haitian National Police, as well as operational guidance and support for community police structures of the Haitian National Police to engage with KP communities without stigmatization or discrimination. These activities have resulted in improved attitudes toward KPs and a better understanding of stigma,
violence, and their consequences for HIV transmission among KPs. Health care workers from the
public health sector were trained on stigma, discrimination, and violence using the Health Care
Worker Training: Preventing and Responding to Violence Against Key Populations curriculum and
Health4All curriculum. This training resulted in improved perceptions of and attitudes toward
KPs, as assessed by beneficiary mystery clients who were tasked with seeking services at public
health facilities where health care workers had received the training.

To document abuse at the community level, UNDP trained field agents from the Office of Citizen
Protection on LGBTI rights, discrimination, violence, HIV, and improving documentation and
monitoring of human rights. Finally, LINKAGES has helped KP members advocate for their rights,
through sessions where KP members speak to youth and community leaders on the topics of
GBV, HIV, and stigma.

As part of its HIV services, LINKAGES Trinidad and Tobago is assessing KP members’
socioeconomic and emotional needs and providing basic counseling, life skills, and referrals to
long-term interventions. It has also has taken study findings showing the need for improved
violence programming in an artistic direction, which has made LINKAGES programming more
relevant and responsive to the needs of KPs. Through art therapy, KP individuals are working
through their psychological and emotional issues related to sexuality, HIV risk or positive
diagnosis, experiences of violence, and community stigmatization. For example, Photo 1 shows a
tree of life created by a female sex worker that traces her life from childhood to the present and
depicts traumatic incidents she experienced, including sexual violence, violence inflicted by other
sex workers, and her grief over the loss of members of her family.

LINKAGES’ violence response staff, equipped with the new knowledge from the study results
about what KP members need, as well as these therapeutic tools for helping KP members
share their difficult experiences and latent dreams, are now better able to provide the support
KP members need to access health services, as well as to move forward socially, economically,
and emotionally. In Photo 2, a LINKAGES service user who is living
with HIV documented their trajectory of emotions before and after
receiving support from LINKAGES.

In Barbados, LINKAGES collaborated with key stakeholders — the
Ministry of Health and Wellness, National HIV/AIDS Commission,
Barbados Family Planning Association (BFPA), Community Education,
Empowerment and Development (CEED), and Empowerment, Quality,
Unity, Acceptance, Love and Strength (EQUALS) — to develop two
resources: a Directory of Health and Social Services and the Essential
Package of Sexual and Reproductive Health Services.

The Directory of Health and Social Services provides beneficiaries
with user-friendly information on a range of services, including those
calling GBV. The information in the Directory will contribute to
improved linkage to and referrals between services by improving
awareness and uptake of the services in the directory.

The Essential Package of Sexual and Reproductive Health Services
aims to ensure that individuals have access to the services necessary
to achieve the national and global UNAIDS 90-90-90 goals. It
identifies psychosocial, legal, and related support services that
address human rights, violence, safety, and security. The package
also includes national service delivery protocols. The services will
be coordinated by the Ministry of Health and Wellness HIV/AIDS
Programme in collaboration with key stakeholders, private providers,
and civil society organizations working in HIV and related fields.

While LINKAGES is not implementing programming for KPs in El
Salvador, UNDP and other local partners are using the study findings
in a number of ways. For example, the findings are being cited as evidence in an HIV-related proposal to the World Bank; are informing human rights activities through the 16-member Federación Salvadoreña LGBTI; and are being disseminated to local psychologists with the help of the Secretariat for Social Inclusion. In addition, UNDP used the results in a proposal to the Spotlight El Salvador Initiative to advocate for including LGBTI as a beneficiary population in efforts to reduce violence. It also disseminated study findings to the LGBTI unit of the Attorney General’s Office of El Salvador, which is using them to inform the design of a protocol on LGBTI people who are victims of GBV.

At the regional level, UNDP is convening a consultation to share the study results and good practices for strengthening the social inclusion of transgender people. The consultation will highlight good practices from both governments and civil society organizations in Latin America. UNDP recognizes that violence affects access to education, employment, and social services, particularly for KPs. The consultation will allow El Salvador and other countries to benefit from the experiences of countries like Argentina and Uruguay that have not only passed gender identity laws but also developed policies and programs to promote greater inclusion of transgender people.

In addition, in 2018, UNDP is conducting a Legal Environment Assessment in Trinidad and Tobago and Haiti that will review laws and policies that affect the ability of KPs to access HIV and other health services. Based on the results of the Legal Environment Assessments and the GBV study, UNDP will provide recommendations on how these countries can harmonize their legal frameworks with international and regional human rights standards and promote greater access to justice and comprehensive HIV and health services.

Globally, a growing body of evidence suggests that effectively addressing the HIV epidemic among KPs requires that programs also address their GBV-related needs. This is also reflected in international guidance on KP programming. This research allowed LINKAGES, UNDP, and local partners to integrate efforts to address GBV with HIV programming in a way that is tailored to the needs of the KPs in each study country. In countries where LINKAGES is implementing programming, early feedback suggests that these efforts are rendering the programming more responsive and relevant to KPs; the hope is that this will lead to improved outcomes across the HIV cascade. LINKAGES will continue to monitor the policy environment in the study countries for any changes that result from ongoing advocacy efforts and work with decision makers.

The authors would like to thank the study participants who shared their stories and time with us and the data collectors for their hard work and insights. We would also like to thank the many community-based organizations who helped provide input into study design and recruited study participants.

EL SALVADOR
Diké LGBTI+, Asociación Entre Amigos, Asociación Mujeres Flor de Piedra, ASPIDH Arcoíris, COMCAVIS-TRANS, and Movimiento Orquídeas del Mar

BARBADOS
B-GLAD, CEED, EQUALS, and Jabez House

HAITI
Arc en Ciel, ANAPFEH, Facdis, FEBs, FOSREF, GHESKIO, Gran Lakou, Kouraj, ORAH, and SEROvie

TRINIDAD AND TOBAGO
Friends for Life, CARe, Family Planning Association of Trinidad and Tobago, and Trinidad and Tobago Transgender Coalition

Finally, UWI HARP, MPact, NSWP, and IRGT were also integral to the completion of this work.
Process as Product: Implementing Participatory, Rights-Based Research with Female Sex Workers, Men Who Have Sex with Men, and Transgender Women (Poster)

Success Story: Participatory Research Studies Can Help Key Populations Recognize that Gender-based Violence Should Not Be Accepted in Their Lives

Gender-based Violence, HIV, and Key Populations in Latin America and the Caribbean: Trinidad and Tobago and Barbados Country Report

Gender-based Violence, HIV, and Key Populations in Latin America and the Caribbean: El Salvador Country Report (English and Spanish)

Gender-based Violence, HIV, and Key Populations in Latin America and the Caribbean: Haiti Country Report

Resources

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