



## **PROJECT REPORT**

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**Report on Mapping and Needs Assessment  
for Strengthening Non-Government Organisations  
Serving Men Who Have Sex with Men  
(October 2005 – February 2006)**

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**Report on a Joint Project undertaken by the  
Australian Federation of AIDS Organisations (AFAO) and  
Burnet Indonesia**

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## Introduction

At the 7<sup>th</sup> ICAAP Conference in Kobe, Japan in 2005 AFAO initiated discussions with some Indonesian gay men/MSM about the desirability of strengthening HIV prevention activities among Indonesian MSM, including the possible re-invigoration the national MSM network discussed at the first Indonesian National Meeting on Sexuality & Male Sexual Health (SKSL) in November, 2004.

AFAO offered to provide the funding for a comprehensive national mapping of current HIV prevention activities for MSM in Indonesia, considered an essential initial step in establishing the desirability and assessing the need – and support for - the eventual establishment of a collaboration network among organisations working on HIV prevention programs and on providing support and services to men who have sex with men.

Burnet Indonesia was strongly supportive of the idea and a joint project was rapidly established to undertake the work. AFAO provided the funds and overall conceptual advice, while Burnet released staff to undertake the project, provided them with guidance and support and managed the finances.<sup>1</sup>

The major mapping and assessment activities were:

- Collecting information on programs implemented by non-government organisations including information on working areas, estimation of population served, population already accessed, and success stories;
- Collecting information on the needs of non-government organisations to support future program continuity;
- Exploring the effectiveness of re-establishing a national working network including provision of support for program development.

This report presents the summary of the mapping and needs assessment activities, including methods applied, places and organisations visited, findings, and recommendations made. Detailed trip reports and profiles of each organisation visited are available (in Bahasa Indonesia) and can be obtained by request.

## Background

The spread of HIV in Indonesia is reaching an alarming rate. The latest estimate by the Ministry of Health and UNAIDS (2005) shows that the number of people infected by HIV in Indonesia is between 190,000 and 230,000 people. This estimate would probably be much higher if we take into consideration the population with HIV risk behavior (around 7 million people based on the estimation of the Ministry of Health (2004) and FHI), the very limited distribution of information and prevention services for HIV and AIDS.

Men who have sex with men are at high risk to spread and/or be infected with HIV. The population of men who have sex with men in Indonesia (those easily identified and already surveyed by the Central Bureau of Statistics (*Biro Pusat Statistik BPS*), Ministry of Health and FHI in 2004) is estimated to be 300,000, consisting of openly gay men, male sex workers, transvestite sex workers and their customers. The estimate was obtained by extrapolating from observed identifiable men who have sex with men and those frequenting public gathering places. The number of men who have sex with men in private and not with sex workers is estimated to be much higher. In 2003, the number was estimated at 1,300,000. (BPS, Ministry of Health and FHI).

Most men who have sex with men (especially in big cities) are not easily able to access information on HIV. In general, the government (in this case the Ministry of Health) has not been active enough in distributing information on HIV in Indonesia. NGO's, support groups and health service providers can play a very significant role in disseminating information on HIV. However, the number of non-government organisations currently outreaching and providing support to men who have sex with men is very small. Their working area coverage is also limited to big cities. Worse still, in several big cities where the number of men who have sex with men is significant, non-government organisations with a specific focus on serving men who have sex with men do not exist.

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<sup>1</sup> Detailed information about AFAO and Burnet Indonesia can be found on their respective websites at [www.afao.org.au](http://www.afao.org.au) and [www.burnetindonesia.org](http://www.burnetindonesia.org)

## Objectives of Mapping and Needs Assessment

The mapping of the existing programs and services related to STD and HIV prevention, treatment, and support for men who have sex with men<sup>2</sup> focuses on:

- Identifying the existing gaps in male sexual health programs and services in Indonesia. This identification will refer to the work plan of the National Meeting on Sexuality and Male Sexual Health 2004 and the Minimum Service Package for men who have sex with men already used in the Greater Mekong region as the guideline.
- Collecting different opinions and viewpoints of NGOs and other organisations regarding the need to establish a network that could assist in providing answers to the needs of each organisation, including the need for sharing, improving communication among themselves, technical support and program implementation for members organisations.

## Methods

### *A. Needs Assessment*

A participatory approach was applied for this needs assessment. The AFAO/Burnet Indonesia Joint Project strove to involve the highest decision making elements of each organisation contacted and assessed. A semi-structured interview was also carried out with those met in places where men who have sex with men usually gather or those previously contacted via internet or telephone but with no connection with any of the existing organisations.

### *B. Assessment Phases*

There were three phases:

- Collecting information via telephone or e-mail from NGOs and organisations providing support to men who have sex with men.
- Direct visits to NGOs and organisations providing support to men who have sex with men to collect comprehensive information about programs implemented, area coverage, estimation of population served, number of population already covered, success stories together with information on their needs in continuing and supporting their programs in the future. During the visit, the need for establishing a national level network was also explored using a semi-structured interview.
- Compilation of data collected during the assessment, providing a simple analysis, and preparing a report which will later be distributed to all participating organisations.

### *C. Duration of interview*

Three to five hours were spent for an interview at each organisation depending on the time allocated by the organisation visited. Interviews with men who have sex with men outside the organisations were usually for not more than one hour and were based on an agreement prior to the meeting.

### *D. Facilitator/interviewer/Analysis and Report Preparation*

This needs assessment was undertaken primarily by Burnet Indonesia staff member - Mr. Tono Permana; with the assistance of a consultant: Mr. Muhammad Tohir.

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<sup>2</sup>This mapping and needs assessment were limited to collection of information based on numbers, kinds and coverage of the existing STD and HIV prevention programs, medication, treatment and support, supplemented by views on how the situation could be improved. It was not intended to evaluate the quality of programs assessed.

## Assessment Result Analysis

The needs assessment involved NGOs and other organisations working for men who have sex with men in 13 provinces:

No.	Province	Population
01	North Sumatera	11.649.655
02	West Sumatera	4.248.931
03	Riau Mainland	4.957.627
04	Riau Archipelago	1.200.000 (estimate)
05	DKI Jakarta	8.389.443
06	West Java	35.729.537
07	Central Java	31.228.940
08	DI Yogyakarta	3.122.268
09	East Java	34.783.640
10	Bali	3.151.162
11	West Nusa Tenggara	4.009.261
12	North Sulawesi	2.012.098
13	South Sulawesi	8.059.627
	<b>Total Population</b>	<b>152.542.189</b>

NGOs and organisations visited were usually located in big cities, although some were in smaller towns. Those in smaller towns were mostly no longer active because of lack of funds and human resources. The cities visited were Medan, Padang, Pekanbaru, Batam, Jakarta, Bandung, Jogjakarta, Semarang, Solo, Surabaya, Malang, Denpasar, Mataram, Manado and Makassar.

## Cities Visited during the Mapping and Needs Assessment

for Strengthening Non-Government Organisations Serving Men Who Have Sex with Men

1399



■ Site visited

■ Organization serving Men Who Have Sex With Men

## Institutional Needs Assessment

The following NGOs facilitate groups of men who have sex with men:

1. Yayasan Gaya Siak	Pekanbaru	Riau Mainland
2. Ikatan Payung Sehati	Rumbai	Riau Mainland
3. Yayasan Gaya Batam	Batam	Riau Archipelago
4. Abiasa	Bandung	West Java
5. Yayasan Pelangi Kasih Nusantara	Jakarta	DKI Jakarta
6. Lembaga VESTA	Jogjakarta	DI Jogjakarta
7. Lembaga Solidaritas Pelangi Nusantara Indonesia	Jogjakarta	DI Jogjakarta
8. GESSANG	Solo	Central Java
9. Yayasan Gaya Nusantara	Surabaya	East Java
10. IGAMA	Malang	East Java
11. Gaya Dewata	Denpasar	Bali
12. Gaya Celebes	Makassar	South Sulawesi

Besides visiting the above NGOs visits were also made to other organisations implementing programs related to men who have sex with men. They were:

1. Centra Mitra Remaja CMR PKBI Sumut	Medan	North Sumatera
2. Yayasan Galatea	Medan	North Sumatera
3. Warung SaHIVa Universitas Sumatera Utara	Medan	North Sumatera
4. Yayasan Utama	Pekanbaru	Riau Mainland
5. Aliansi Jurnalis Peduli HIV/AIDS Riau	Pekanbaru	Riau mainland
6. Koalisi Perempuan Indonesia Sumatera Barat	Padang	West Sumatera
7. Cemara PKBI Sumatera Barat	Padang	West Sumatera
8. Yayasan Pembinaan Asuhan Bunda	Batam	Riau Archipelago
9. Yayasan Batam Tousirt Development Board	Batam	Riau Archipelago
10. Klinik Informasi & Konsultasi Kesehatan Reproduksi	Batam	Riau Archipelago
11. Yayasan Mitra Kesehatan dan Kemanusiaan	Batam	Riau Archipelago
12. Klinik IMS PKBI Jawa Barat	Bandung	West Java
13. Lentera Sahaja PKBI Jogjakarta	Jogjakarta	DI Jogjakarta
14. Yayasan Mitra Indonesia	Jakarta	DKI Jakarta
15. Klinik Khusus PKBI DKI Jakarta	Jakarta	DKI Jakarta
16. Lembaga Graha Mitra	Semarang	Central Java
17. Yayasan Wahana Bhakti Sejahtera	Semarang	Central Java
18. Klinik Griya ASA-PKBI Semarang	Semarang	Central Java
19. Yayasan Kerthi Praja	Denpasar	Bali
20. PKBI Mataram	Mataram	West Nusa Tenggara
21. Lembaga Kemaslahatan Keluarga NU	Manado	North Sulawesi
22. Klinik Spesialis Yayasan Bahagia Harapan Kita	Manado	North Sulawesi

During each visit, an interview with the Director or Program Manager was conducted. Topics discussed in each interview were:

- Brief history of the organisation
- Vision and mission of the organisation
- Programs currently undertaken and programs planned to implement
- Services provided to their facilitated groups
- Area coverage
- Funding agencies used to and/or currently provide funding support
- Opinions on HIV prevention program at the national level
- Opinions on national level network for men who have sex with men NGOs
- Opinions on the implementation of SKSL 2004 work plan
- Relationship with other organisations providing support for men who have sex with men

- Opinions on the idea to reactivate a networking by establishing a network independent from existing NGOs or organisations
- Expectations towards the network planned to be reactivated

## Findings

Out of the 34 organisations visited in the 13 provinces, there were only 9 NGOs in only 7 provinces that have implemented HIV prevention program for men who have sex with men and received funding support from external funding sources:

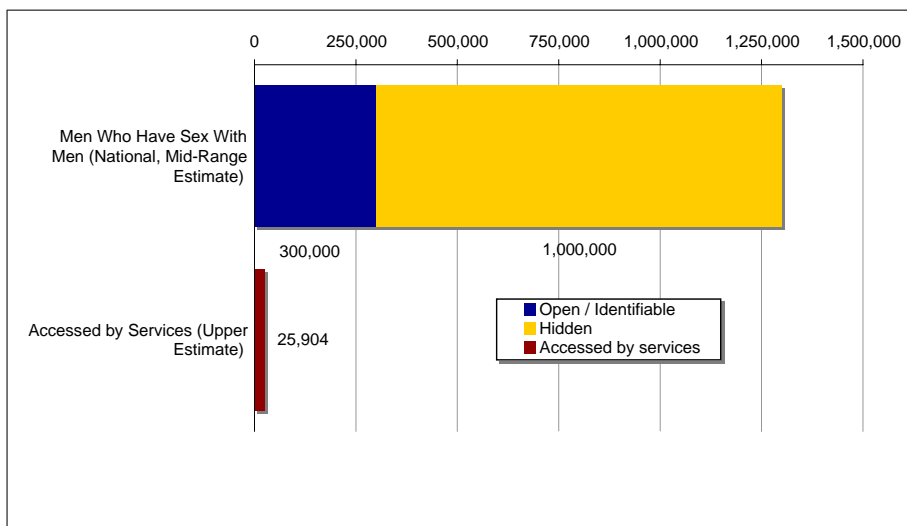
1. Yayasan Gaya Batam	Riau Archipelago	FHI <sup>3</sup>
2. Yayasan Pelangi Kasih Nusantara	DKI Jakarta	FHI, GF
3. Yayasan Mitra Indonesia	DKI Jakarta	FHI
4. Abiasa	West Java	FHI, GF
5. Lembaga Vesta	DI Jogjakarta	GF
6. Yayasan Gaya Nusantara	East Java	FHI, GF
7. IGAMA	East Java	FHI, GF
8. Gaya Dewata	Bali	IHPCP, GF
9. Gaya Celebes	South Sulawesi	IHPCP, GF

Four NGOs still exist but no longer conduct programs for men who have sex with men due to lack of funds:

1. Ikatan Payung Sehati	Riau Mainland
2. Yayasan Gaya Siak	Riau Mainland
3. Lembaga Solidaritas Pelangi Nusantara Indonesia	DIJogjakarta
4. GESSANG	Central Java

Less than 10% of the total estimated number of openly or identifiable homosexual or bisexual men currently have access to HIV and STI prevention, care and/or support services. Compared to the estimated number of men who have sex with men (300,000 based on the 2004 estimate), the 9 NGOs actively working are able to access fewer than 26,000 clients. If we include

closeted or less identifiable men who have sex with men, the number with access to services is less than 2%. Worse still, in a number of cities with large populations of men who have sex with men such as Medan, Padang, DKI Jakarta (Bogor, Tangerang, Serang, Bekasi, Depok), Semarang, Solo, Samarinda, Pontianak and Manado, HIV prevention programs for men who have sex with men are not yet available<sup>4</sup>.



<sup>3</sup> FHI – Family Health International (USAID-funded), GF – Global Fund for AIDS, TB and Malaria, IHPCP – Indonesia HIV/AIDS Prevention and Care Project Phase II (AusAID-funded)

<sup>4</sup> Refer to the attachment comparing the estimated number of population and program coverage.

The characteristics of men who have sex with men in each province were varied. In general, however, in almost all Indonesian cities most men who have sex with men are not easily identified and closeted. They tend to stay away from those more open men and transvestites/transsexuals. This can be understood as they want to hide their identity from their family and community. If in the year of 2004 there were 300,000 openly identifiable men who have sex with men there are now possibly around 1 million unidentified men and not yet reached by any information on HIV prevention.

Programs of NGOs working for men who have sex with men were also varied. Some simply conduct an outreach program and disseminate related information. Others run a clinic for STD and HIV tests. Some pioneer organisations are already well advanced and their programs were acknowledged by the international community, while many others are still less developed because of limited funds and human resources. A number of others are handicapped with internal organisational problems and conflicts, leaving programs unattended.

Of all organisations serving men who have sex with men, there are three organisations directly providing STD tests at clinics in collaboration with local health institutions. There are only two NGOs really active in providing services. However, some limitations still exist, especially for VCT services. These NGOs could only provide some space for pre-test counseling. For blood collection and VCT tests, they refer their clients to hospitals or other referral centers.

A number of NGOs and organisations refer their clients to other institutions that provide STD and VCT tests. However, men who have sex with men often feel reluctant to visit those institutions as they do not feel comfortable. For the closeted clients, visiting such centre is not a viable choice.

"I do not want to visit a clinic, too many transvestite around; I don't feel comfortable!". Kris, Jakarta.  
"I visited a clinic once. But the doctor did not understand my problem. I felt so embarrassed". Ito, bisexual, Denpasar.

A number of organisations participating at the National Meeting on Sexuality and Male Sexual Health (SKSL) in September 2004 said that they have not heard any news about the implementation of the work plan formulated during the event. Gaya Nusantara and Komnas HAM Jakarta are the only organisations that have carried out a number of follow up actions related to the SKSL 2004 work plan.

The main issues discussed during the SKSL 2004<sup>5</sup> included issues on religion, culture, social, media, politics, human rights, health, and estimation for a survey for men who have sex with men. The participants responded by development of a plan of action and other activities. However, follow up of the plan, according to a number of NGOs or organisations attending the SKSL, has not occurred.

"I enjoyed being involved in the SKSL 2004; but I have not heard any follow up to the plans formulated there". Leaders of LKKNU Manado, Gaya Batam, Gaya Celebes, Gaya Dewata

Gaya Nusantara and Komnas HAM were able to conduct information dissemination and advocacy programs because they have strong capacity in those activities. Other NGOs and organisations did not do any information dissemination or advocacy activities related to the SKSL because they were busy with other programs and communication among them was not yet well developed.

Almost all organisations involved in working for men who have sex with men agreed that the difficulty in reaching hidden clients can be overcome by communication via hot line telephone services and internet. In this way, outreach can be expanded and confidentiality can be well maintained. FHI is starting to develop a program to support alternative media such as internet,

<sup>5</sup>Refer to the work plan of the SKSL 2004.

email lists and short message service (sms) networks, working in collaboration with IHPCP, Burnet Indonesia and others.

## Lessons Learned

- Men who have sex with men are a marginalized group in the community and are of high risk of STD and HIV.
- Coverage of HIV prevention programs for men who have sex with men is not sufficient considering the comparison between the estimated number of men who have sex with men and the existing outreaching organisations.
- In a number of cities where organisations serving men who have sex with men are not available, locally existing AIDS care organisations are ready to help establish organisations to provide service to men who have sex with men, but need support to do so.
- The need for correct information on the high potential of STI and HIV spread among men who have sex with men is very urgent; however, those men are reluctant to seek or obtain information from places where they do not feel comfortable.
- There is a strong need for a special integrated place or organisation able to provide complete information on STIs and HIV, STI tests, counseling and HIV tests, medication and support for people with HIV and AIDS. The place can be an integrated clinic or a drop-in center professionally managed by an NGO serving men who have sex with men
- During the assessment, it was clear that there is a need for sharing information among organisations providing services for men who have sex with men; it was also felt urgent to establish a working network among NGOs and organisations working for men who have sex with men that will also function as an information centre. In fact, such a network already exists in name but does not function effectively because those involved are still busy with their own local, immediate needs and demands on their attention and have little time to do any work for the network.
- Outside those described above, a number of issues are currently developing. These include human rights violations for men who have sex with men, biased media coverage and TV programs that tend to discredit men who have sex with men (including exploitation of transvestites/transsexuals).
- Things are changing very rapidly in the field. Data obtained from Gaya Nusantara, FHI-ASA, SKSL 2004 and an assessment carried out by Dede Oetomo in 1997 describe a very different situation from what was observed in 2005 when this current mapping and needs assessment was carried out. In 1997, Dede Oetomo did desk study in 8 provinces (North Sumatera, Riau, South Sumatera, West Java, Central Java, Bali, Moluccas and Papua to make situational assessment on gender and sexual diversity among men, which is related with HIV/AIDS prevention project. At this moment, the situation was very different. Men who have sex with men were still hidden, but Dede found that many potential key persons who had the capability to establish organizations that will service men who have sex with men. Until SKSL 2004, there were only a few such organizations. In 1997, the internet system in Indonesia just started, many men who have sex with men use chat rooms and mailing lists to get new friends and sex partners. Recently use of the internet in these ways has increased rapidly, male sex workers also use the internet to promote themselves. Male sex workers in established massage parlors, Public Parks and other public facilities have increased in the last 8 years, but only 9 NGOs who reach and give them information about HIV prevention. In 1997, data from the Ministry of Health about HIV cases was not really clear but from the last data until March 2006, positive cases reported from MSM was 406 cases

## Conclusions

The tendency to keep their sexual activities secret is a major factor making it difficult to establish an organisation that will specially work for men who have sex with men. Such men are often very

afraid to disclose their sexual identity or behaviour. They are very afraid of being recognized. In addition, being known by more open men who have sex with men can be a threat for disclosing the identity of those who are more hidden. The need to remain hidden arises from the effects of stigma and discrimination in the general community.

From the elaboration above, it can be understood why it is difficult for them to establish an institution that will care about the potential HIV spread among men who have sex with men. Such cases can be found in Padang, Medan, Tangerang, Serang, Bogor, Solo, Semarang and Mataram.

The imbalance between the number of men who have sex with men and the number of NGOs or organisations working for them has also been a big issue. This may cause other problems such as weak information dissemination in programs for preventing STI and HIV spread, narrow area coverage, less available reproductive health services and counseling, as well as difficulty in obtaining HIV testing (Voluntary Counseling and Testing-VCT), treatment service, support and medication for people with HIV/AIDS. The psychological support for men who have sex with men as a whole is very weak.

Such imbalances or shortcomings may not be well identified because of the lack of communication among NGOs and organisations serving men who have sex with men. All NGOs and organisations visited during the assessment expressed positive expectations of the establishment of a network to help them learn more about successful programs and sharing information on funding sources.

## **Outcomes and Outputs Expected From Establishment of a National Network**

- The results of the mapping and needs assessment will be distributed and further discussed with NGOs and organisations as inputs and recommendations for Burnet Indonesia, AFAO, NGOs and other relevant organisations..
- Stronger collaboration among NGOs and other organisations working for men who have sex with men and other institutions caring for the problem of men who have sex with men in Indonesia.
- Clear direction for the development of a national HIV prevention program for men who have sex with men.
- Improved capacity of NGOs working for men who have sex with men and other organisations in developing programs and proposals for requesting funds from donor agencies.
- Development of a data centre accessible to NGOs and any other organisations working for men who have sex with men.
- Enhanced sharing of HIV prevention strategies, programs, information and resources among participating members of the network
- More rapid and wider coverage of best practice strategies and programs across Indonesia
- Improved advocacy, particularly at the national level, for the upgrading and expansion of HIV prevention programs for MSM in Indonesia
- A mechanism for improved liaison with MSM programs and networks in the Asia and Pacific region – and with emerging MSM programs in other Islamic countries

## Recommendations

Based on the mapping and needs assessment, a number of recommendations are made:

1. All NGOs and organisations serving men who have sex with men desire that a network be established urgently where they can work together with shared principles especially on programs for preventing HIV infection.
2. A network of NGOs and organisations serving men who have sex with men is needed to be established very soon considering the urgent need for sharing information on the latest relevant issues such as successful programs and funding opportunities.
3. The network should be independent and separated from any existing NGOs or organisations to avoid potential conflict of interests and limited spread of information. Individuals involved in managing the network should be able to provide most of their time to it. The activity at the network should not be a side job.
4. The network should address the needs of NGOs and organisations in terms of institutional management, staff capacity building in disseminating information, and adding more VCT counselors for men who have sex with men.
5. The network should formulate a mechanism for improved liaison with MSM programs and networks in the Asia and Pacific region – and with emerging MSM programs in other Islamic countries
6. Facilitate establishment of an information centre for NGOs and organisations addressing the needs of men who have sex with men. This centre should be located within the network and connected to the internet. It should include a web site as a medium for communication among men who have sex with men.
7. A meeting involving all directors of NGOs and organisations should be organized as soon as possible to discuss the findings and recommendations of this assessment and to formulate follow up actions. In the meeting, the goals, role and possible structure of the secretariat of the network and staff positions to conduct the work can also be discussed and decided.
8. A high priority is support the establishment of NGOs serving men who have sex with men especially in provincial capitals, considering the significant number of men who have sex with men residing in big cities. The establishment of these NGOs could be supported by the existing local NGOs or organisations sharing common ideas on prevention of HIV spread and also technically supported by those already well established institutions or organisations.
9. Establishing at least one integrated clinic or drop in center is considered very urgent in all provinces, especially where there are NGOs and organisations already actively working for men who have sex with men.
10. A National Meeting should be held not later than November 2006 to consider the establishment of the network and develop a follow-up plan for HIV prevention programs. . The work plan should function as the guideline for HIV prevention program for men who have sex with men.
11. An interim secretariat should be established as soon as possible to plan and facilitate the national meeting and foster on-going discussion of this report's findings and recommendations among the organisations consulted, other key individuals and the possible donor agencies. This interim secretariat could also establish links with the similar developments arising from the Greater Mekong Sub-region MSM network and facilitate Indonesian MSM attendance at the Asia Pacific Regional Consultation on MSM and HIV in Delhi in September 2006.
12. The project co-sponsors, AFAO and Burnet Indonesia, should initiate discussion and consideration of this Project's report and recommendations with potential funding agencies, including AusAID, FHI, and UNAIDS.

## **Follow up Action Plan**

After completing the report Burnet Indonesia will present all the findings in national level strategic meetings with donor agencies and government representatives and also in meetings among NGOs and other organisations serving men who have sex with men.

AFAO will distribute the report to possible funding agencies, including AusAID and UNAIDS.

Burnet Indonesia intends to collaborate with donor agencies in the establishment of the network as well as in developing other programs to answer the needs identified during the mapping and needs assessment.

Burnet Indonesia will also provide inputs to donor agencies for HIV prevention programs among men who have sex with men using the data collected by this program.

AFAO will assist the emerging network establish contacts and relationships within the Asia Pacific region and provide other support within its resources.