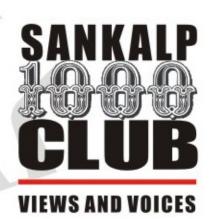
Sachin Tendulkar is always known to use a straight bat; that's why he stands in solidarity with Sankalp and the Narcotics Control Bureau

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Sachin for Sankalp

It was truly a wonderful gesture from Sachin to spontaneously accept to convey anti-drug messages on the occasion of International Day against Drug Abuse and Illicit Trafficking. Mr. Yashodan Wange, Zonal Director of the Narcotics Control Bureau (NCB), had taken the responsibility to bring Sachin into the campaign while I had personally decided to rope in John Abraham.

In the end only Yashodan was successful and Sachin's most popular face adorned 30 bus shelters, 40 foot hoardings, and neon signs on street lights. It was really sad that we couldn't manage to have John Abraham as well since they would have made a great combination with the serious message that Sankalp and the NCB had to give to

the youth of Mumbai.

Sachin Tendulkar is always known to use a straight bat; that's why he stands in solidarity with Sankalp and the Narcotics Control Bureau. There is never any ambiguity associated with him, and he is always associated with thoughtful messages that he gives much thought to. And it is that realm that the gravity of our message is conveyed when associated with a legend like Sachin Tendulkar. Although Sankalp Rehabilitation Trust works only in Maharashtra, our message is universal and was delivered by a person whose stature is universal.

Sachin joins the campaign for the International Day against Drug Abuse and Illicit trafficking



Sankalp Attends the 9th International Congress on AIDS in Asia and the Pacific in Bali, Indonesia

Thomas George

On behalf of the Red Ribbon Award Initiative, the Sankalp Rehabilitation Trust was invited to participate in the Wantylan Community Space at the IXth International Congress on AIDS in Asia and the Pacific (ICAAP) held from August 9th 13th, 2009 in Bali, Indonesia. UNDP (United Nations Development Programme), in partnership with UNAIDS (Joint United Nations Programme on HIV/AIDS) and the Global Fund for AIDS organized this forum to provide a platform for local and regional communities to share their experience and showcase their successes.

More than 3000 delegates from 65 countries came to Bali to participate in the ICAAP, the biggest biennial meeting and second largest forum on HIV and AIDS in the world. It was held in Nusa Dua, Bali and the meeting focused on "Empowering People, Strengthening Network." It aimed to ignite new efforts, bonds, and sanctions in the international response to AIDS with stakeholders coming from across Asia and the Pacific as well as Europe, the Americas, and Africa.

The opening ceremony took place on August 9 at Lotus Pond, Garuda Wilnu Kemcana (GWK) Cultural Park. The president of the Republic of Indonesia, H.E.H. Dr. Susilo Bambang Yudhoyono officially opened the Congress. Sankalp Rehabilitation Trust was happy to be represented by Eldred Tellis, the Director, and myself at the Red Ribbon Award Winners Plenary Dialogue session. It was a one hour dialogue session on "People Who Use Drugs, Harm Reduction, and HIV." The session was moderated by Sankalp and Bali-based Yakeba, and discussed the



Eldred Chairing a Harm Reduction Session

innovative approaches to harm reduction. It included two recently formed regional networks: The Asian Network of People Who Use Drugs (ANPUD) and the Women's Harm Reduction International Network. Christian Kroll (UNODC Director for HIV/AIDS) introduced the session while representatives from the pre-conference forum on injecting drug users (IDUs) contributed to the discussion.

We also had the opportunity to screen the newly launched documentary film "Suee" which focuses on the issue of drugs, HIV, discrimination and a needs-based approach. The response to the film was wonderful with Congress stalwart Mr. Oscar Fernandes saying it "brought tears to my eyes and needs to be shown to all Parliamentarians."

The other interesting facet of the Congress was the exhibition stalls, displaying a variety of incomegenerating materials. These stalls played a vital role in the ICAAP, symbolizing the activities and movements of Asia as well as the world. Also noteworthy, there was a participant protest against the 'Abbot Global AIDS Care' for its patents on medicines.

The IXth International Congress on AIDS in Asia and Pacific ended with a spirit of hope for HIV/AIDS prevention, better care, treatment, and support themes of direct relevance to civil society representatives from different backgrounds.



Thomas at the opening ceremony of ICAAP

Meena Walked In

Madhura Padwal



Meena with Staff and Colleagues

Meena walked in, dressed in white, her long black tresses tied back in a ponytail, carrying an assortment of files, folders and registers. 18 month old Armaan was at her knee giving her an imploring look. "I hope he wasn't too much trouble," she said to the members of the Women's Drop-in Centre at Grant Road. She took her little bundle of joy into her arms and planted a few kisses on his plump little cheeks.

"Sorry madam," she addressed me, "But I have to administer the medicine to these women, if you're not in a hurry."

"Oh no. Please carry on, I can wait."

I watched her at her desk, diligently filling out her register and giving out the dosages of the drug control medicine. "I really hope I wasn't an inconvenience. Come sit." She smiled, her face betraying her violent past and her courageous road to recovery.

Meena spent her childhood in Goa. Her family made a living by selling homemade liquor, which exposed her to drugs and alcohol at a very tender age. Disturbed by her unsupportive family, shocked by an uncle who attempted to rape her, frightened by the prospect of being married off and distraught by the onset of puberty, she left home one night, never to return.

She came to Mumbai and spent her teenage years on the streets.1993, she started smoking ganja (marijuana) and soon enough got addicted to the effects it had on her troubled life. To fuel her habit she worked as a domestic servant, indulged often in petty thievery. What started out as a few trade transactions now advanced to full fledged peddling of a variety of substances. The sharp person that

she was, she learnt the tricks of the trade in no time and was practically carrying on an independent business of her own. It was by accident that she developed an addiction to garda (Brown sugar, which is a crude and cheap from of heroin) after someone mixed it in her dose of ganja.

She found love around this time, in a man from the streets like herself and they got married. Meena hoped to start afresh but the couple split shortly following the death of their first born child. The trauma of it all pushed Meena to the edge until she got a call from a rehabilitation NGO. She pulled through the treatment and therapy fairly well. She began domestic work with a family in the Northern suburbs, who supported her in spite of knowing all about her addiction and her successful recovery. But this was not to be. Her family members came back to disrupt her life that she had so laboriously put back together from pieces.

It was the year 2000. Meena had a relapse. This time, her addiction was frightfully intense. She believed that nothing could break this vicious cycle of addiction but the substances themselves. She resumed her previously lucrative business and had built a dependence and tolerance of an incredibly alarming level. It was the year 2005. In this grim scene of despair entered Sankalp. Having already gone through a similar experience of failure and relapse, Meena was not very keen on getting involved in rehabilitation again. But the counselling and sharing at Sankalp infused in her a new hope, an eagerness to pave the way to recovery. She knew that none of this was going to be easy by any stretch of imagination. But her willpower and hard work got her through the treatment. The effort did not go unnoticed, her honesty and integrity was already an example to many of her counterparts at Sankalp. Consequently she was appointed a peer counselor at Sankalp. She has been working here ever since, trying to change lives in the same way that Sankalp changed hers.

"It's my duty now to inspire others to find their path to recovery. This is my life now, this is my goal. Of course there is also my family, my little boy Armaan and his father, my husband." She said, referring to the man, also a recovering addict himself, whom she fell in love with and got married to after much deliberation and consent from her counselor.

Taking 13 turbulent years of addiction in her stride, with a new life and new hope, Meena goes on. Her story is an inspiration indeed.

"I hope Jesus is on my side and gives me strength to raise my son well and fulfill my goal" she says.

Amen!

The Making of Suee

Sai Paranjpye

The World Bank along with a few partners like UNAIDS, SIDA, the Government of Norway etc. launched a scheme to combat the stigma issue generated by HIV/ AIDS. They invited communicators to participate in this scheme by offering original and innovative campaign ideas. Our Project, to make two short 5 minute films on different specific aspects of the HIV/AIDS issue, was selected under this South Asia Regional Development Marketplace (SARDM) scheme.

One of these films is about HIV-positive drug users braving their dual predicament of addiction and affliction. It was a challenging task and needed much in-depth research and interaction with people from the world of narcotics. I asked about ten social activists, field workers, NGOs and so on for advice as to who would be the best possible experts to advise us in this challenging task. They all pointed in one direction. The Sankalp Rehabilitation Trust and its dynamic director Eldred Tellis, someone who has been tirelessly working in the field for years.

Our first meeting was rather formal. I have a feeling that Eldred was somewhat suspicious of my motives. Perhaps one more media maverick trying to sensationalize a very sensitive and poignant issue! He did, however, impart much information and arranged for me to visit their care shelter in a very dilapidated building at Islampura, and their drop-in centre at Mumbai Central.

The shelter visit was quite an experience. About 12 young men were on the floor, bent over sheets of newspaper. They were making paper bags. Many of them had an arm or a leg missing. This, I was told was the result of gangrene and drug induced accidents. The teacher a reformed drug user was an amazing person. With just three fingers left on a single arm, he expertly fashioned wonderful works of art as he narrated his personal saga. He figures prominently in 'Suee' as himself. I interacted with the other young men, who also shared their experiences, their backgrounds. The stories narrated at the start of the film by motivators are these very stories. Real stories out of the Sankalp repertoire.

I was reading and surfing a lot alongside, and wrote the first draft of the script. Eldred rejected it outright saying it was somewhat elitist, not probing enough and a few other discouraging things. Give it more time, he said.

Nivara soon shifted to a much roomier place at Charni Road. My visits there and to favourite drug joints of IDUs (Injecting Drug Users), Nishaat Talkies, Mumbai Central rail tracks, and under various flyovers continued. I was usually accompanied by Sankalp outreach workers who made these trips time effective.

My second (and final) draft was now enthusiastically

approved by Eldred. Many of the dramatic episodes were directly narrated by him. The Government/Civic Hospital scene is his very own bitter experience. "You have to act in this scene yourself," I told him, "Relive your experience on the screen." He did!

Nivara was to become our Karma Bhoomi during the making of 'Suee'. We rehearsed, we discussed, we auditioned, we planned, and executed much of our creative activity on the Sankalp premises itself.

One Sankalp client attached to our unit was Prasad Revankar, a very bright guy who had been through the ropes himself, and was now an avid motivator. Prasad had an extraordinary sense of what was required from our point of view the cinematic vision. He provided endless anecdotes, taught us the drug jargon, the rhymes, the special terms and the highs and lows of a drug user's life. Many of these words supplied by him have been woven into the songs used in 'Suee'. Prasad has also performed a role in the film.

So much of what went into the film came straight out of Sankalp. Apart from the consultancy and subject expertise, Nivara had so much else to contribute. About 60% of the people in Suee are Sankalp people. Patients, doctors, nurses, reformed IDUs, peer counselors, guests, the Director himself, and even the kitchen staff grace our film. We also shot many of the scenes on the Sankalp premises. We required a very special swivel chair for the dramatic start and end of the film no problem! Eldred's people procured the exact item from the neighboring office upstairs. I am happy to say that while shooting was going on, the daily work of the shelter continued without a break

Nivara and Sankalp gave so much to the film, that the final duration turned out to be 29 minutes, instead of the 5 minutes contracted for. Every minute of the film to my mind has been worth it!



Sai and Eldred discussing SUEE

A Little Help from my Friends: Reflections from a Volunteer

Talya Gillman

Last January, I traveled to India to embark on a ten month volunteer experience with Sankalp as a part of American Jewish World Service's World Partners Fellowship program. American Jewish World Service (AJWS) is a non-profit organization based in the United States that does amazing work with NGOs throughout the Global South. Indeed, AJWS is one of the organizations that support Sankalp, particularly in the Arthur Road Jail Therapeutic Community program.

In addition to financial support, AJWS sends volunteers to its "partner organizations" so that they may contribute skills, time and energy, build meaningful relationships with people outside of their own communities, and learn a great deal about issues ranging from international development, to human rights, to the specific concerns of their organization. In the past, AJWS volunteers have usually stayed with Sankalp for 2-3 months, but the World Partners Fellowship is set up for 10 months. This enables the program's participants to have longer-term experiences in India, and the opportunity to really integrate into the organizations that they work with and the communities that they live in.

Over the past year, I've gotten to know Sankalp's staff and several clients very well, and it is the relationships that I've developed that I will carry with me for the rest of my life.

Talya with Project Hunar



About half-way through my fellowship, I was involved in a serious accident that resulted in my being away from the office for a month-and-a-half. During this time, Sankalp became like family, providing logistical assistance, making important decisions and offering wonderful moral support.

From Mr. Eldred Tellis, Sankalp's executive director, to Thomas George, coordinator of the Mumbai Central DIC, to Sayed Rahim, our administrative officer, to some of Sankalp's peer educators, to all of the clients participating in Project Hunar (Sankalp's new vocational training initiative), it felt as though everyone involved with the organization was providing the positive thoughts and encouragement that enabled me to recover so quickly and well. I will forever value the thoughtfulness that the Sankalp community showed when this happened to me, and I hope that the time I've spent working on various projects can somehow show how important and transformative this experience and these relationships have been to me.

In fact, my time with Sankalp has shown me just how powerful relationships can be; it is familiar faces, former drug-using peers who act as role models and the consistent presence of staff that keep our clients coming back each day. And returning to Sankalp's DICs and/or programs every day is the most critical step in a drug user's struggle to make more positive life choices. It is the relationships that a client develops over time with his peers, coordinator and counselor that can often mean the difference between life and death. So when I return to the United States in the spring, the stories I will tell of my time in India and with Sankalp will be about the wonderful people I've met here. Talking about the human connections I've made, across languages and cultures, are the stories that will draw people into listening about India, and the important work that organizations like Sankalp are doing.

Sankalp Opposes Patent for Pegasys

Julie George

Sankalp Rehabilitation Trust is presently involved in a case to ensure that people have access to treatment for Hepatitis-C. The drug in question is Peg-Interferon α2a, marketed by Swiss global health-care company La Roche Limited as Pegasys.

Hepatitis C represents a huge public health problem in India. An estimated 12.5 million people in India are infected with the Hepatitis C virus (HCV). Left untreated, it can lead to other complications such as liver cirrhosis, liver cancer, or liver failure. Those who suffer from an HIV-HCV co-infection have an increased rate of disease progression. Injecting drug users are especially vulnerable to co-infection; figures from Manipur show a high co-

infection rate of up to 93% among injecting drug users. However, partly due to its high cost, treatment for HCV is not available in government hospitals in India. Thus, an ironic tragedy unfoldspeople living with HIV are able to obtain treatment for HIV, but are dying because of their HCV-related complications.

In 2006, the Indian Patent Office granted a patent to Roche for Pegasys, the first product patent for pharmaceuticals granted in India under the new World Trade Organization Intellectual Property Agreement, which essentially grants a monopoly to Roche. Patients with chronic HCV, who need a six-month course of treatment of Peg-Interferon q2a, must purchase it at a cost of approximately Rs. 4,

36,000 [8,752.38 USD] (sometimes available at a discounted price of Rs. 3,14,496 or 6,313.28 USD). Again, Pegasys has to be taken in combination with anti-viral drug Ribavirin, which alone costs Rs. 47,160 [946.70 USD].

As we know, a patent grants a monopoly to the patent holder to prevent others from making or selling the same drug without its permission. If there is no patent, other companies can make and sell the drug. The resulting competition helps lower the prices of drugs, as has been clearly shown by the falling prices of HIV drugs.

Therefore, in May 2007, Sankalp filed an opposition to challenge the grant of patent to Pegasys. Wockhardt, an Indian company, had also filed a post-grant opposition against the patent granted to Pegasys.

Roche's patent for Pegasys involves combining interferon a naturally occurring protein which has been known for several years to be effective against HCV with a structure called polyethelyene glycol (PEG), an inert substance. PEG helps to prevent the interferon from being broken down immediately by the body and thus allows it to remain in the bloodstream longer. This technology of combining interferon and other biologically active proteins with PEG had also been known for many years.

Under the law, a patent can only be granted to inventions that are new and involve an "inventive step." Sankalp argued that the patent was wrongly granted as Roche's "invention;" in fact, combining interferon with PEG was neither new nor inventive. Sankalp also opposed the patent based on other public health safeguards, which disallow patenting of "mere admixture" of known substances and patenting of a "new form of a known substance" without increased efficacy.



HCV Protest at Plenary Session

In a decision delivered in March 2009, the Indian Patent Office rejected the post-grant opposition filed by Sankalp against the grant of Roche's patent for Pegasys.

Under the Indian law, an Opposition Board was constituted. It appears that the Opposition Board, after reviewing the oppositions and the evidence on record, concluded that Roche's patent ought to be revoked. However, after a hearing, Mr. T. V. Madhusudhan, an Assistant Controller of Patents and Designs at the Chennai Patent Office, disagreed with the findings of the Opposition Board, and dismissed the post-grant oppositions and upheld the Roche's patent.

Sankalp has filed an appeal before the Intellectual Property Appellate Board against this decision. Director, Eldred Tellis participated in a demonstration at the recent AIDS Conference in Bali to protest against apathy shown by governments in assisting with access to medicines.

The patent case certainly has not been settled, and Sankalp continues to work to end Roche's monopoly, decrease pricing of HCV medicines, so that we can provide affordable and necessary treatment for their clients.



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