

"All said and done the dedicated staff of Sankalp with hands on leadership from their Director went the extra mile to provide regular and extra Covid essential services to keep clients safe."



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Sankalp Rehabilitation Trust during Covid-19 Lockdown – Shalom D'Souza

In March of 2020, the world faced an unprecedented crisis. The Novel Coronavirus impacted lives worldwide, especially the marginalized and destitute living on the streets. The pandemic had adverse effects on Mumbai, leaving organizations helpless, leading many to close shop, but Sankalp Rehabilitation Trust kept going. The Sankalp team has been ceaselessly in the forefront to assist and provide services to those in need by adapting their services to cater to the needs of their beneficiaries in these trying times.

Earlier during the strict lockdown of 2 ½ months our Executive Director who had set up his stay at the Charni Road office (for almost 9 months) was at the centre of the interventions, doubling up as ambulance driver and handing out protective gear to clients on the streets besides managing 3 centres with Skeletal staff.

To ensure safety among the staff, to provide appropriate care to patients during the pandemic, Sankalp complied with the rules and regulations set by the Government during the lockdown. Due to the strict vigil from the Mumbai Police, the centre was kept open all 6 days, from 9 am to 1 pm, to reduce the risk of infection. The staff at Sankalp were thoroughly trained on the guidelines and recommendations while handling patients amidst COVID-19 and were provided with protective gear that included gloves, sanitizers, and masks. Additionally, markings of circles 1 meter apart were made on the floor outside the Drop-in-Centre (DIC) to ensure social distancing and safety while distributing medicines. Furthermore, to further reduce the risk of infection, staff members were given the option of residing at Sankalp's centres to avoid travel. As a result, a nurse stayed at the detoxification centre.



Distribution of soaps for regular handwashing from our vehicle

For maintaining availability of appropriate treatment during the COVID-19 lockdown, Sankalp took several steps. The DIC was kept open for around 80 clients who come daily to take Buprenorphine and other medicines. Home deliveries of the same were provided for the beneficiaries, to ensure reduced missed dosages. Moreover, after advocating with the Mumbai District AIDS Control Society (MDACS), Sankalp was permitted to give 7-day take-home doses for clients. Additionally, clients on Opioid Substitution Therapy (OST) were issued ID cards to help them get through police checks and reach centres during the lockdown. As a result, Sankalp was able to provide services to 91% of clients on OST.

Sankalp ensured regular Antiretroviral Therapy (ART) for HIV-positive clients during the lockdown. Having 53 HIV-positive clients active on ART, Sankalp made sure that adequate medicines were made available and clients adhered to their medication. During the lockdown, two clients at the Rehabilitation Centre in Pune had run out of HIV medicine.

Patients shouldn't skip or miss doses as this makes it easier for HIV to change its form, resulting in the medication being ineffective. Hence, to prohibit this from happening, Sankalp acquired special passes, enabling them to make a 200km trip from Mumbai to Pune to deliver the medicines.

For safety of the clients and staff, infrared thermal guns and oximeters were made available at all centres. Needles and syringes were made available for clients injecting medication, either by picking it up from the DIC or delivering it to them in the start. An ambulance would go out in the field once a week to distribute needles, syringes, and condoms. During the initial days

of lockdown, on average, 48 needles, 23 syringes, and 36 condoms were distributed daily since it was only within a walking distance from the centre. Additionally, clients were made aware of the precautions needed to protect themselves from the COVID-19 virus and the importance of wearing masks. To increase the availability of masks, over 1500 masks were distributed by Sankalp.

For nutritional needs, a major concern for clients during the lockdown, Sankalp reached out to social organizations distributing food to the needy, ensuring that their basic nutrition needs were met. Moreover, soaps were distributed to clients and they were educated on the importance of good handwashing practices and hygiene. Over 4000 soaps were distributed to the needy, sourced from Reckitt and Colman through UNAIDS, New Delhi.

Guidance and counselling were provided to clients even during the lockdown, which was made possible by Sankalp's family counsellor reaching out to past and current clients either through telephonic counselling or Zoom meets. She has contacted 143 families and clients and has guided them about keeping safe from the virus and following up on their sobriety. During the follow-up calls, many of the clients were sober and doing well, which is proof of Sankalp's dedication and hands-on treatments.

All said and done the dedicated staff of Sankalp with hands on leadership from their Director went the extra mile to provide regular and extra Covid essential services to keep clients safe. As a testament to the success, only one client and two staff from almost a pool of 800 tested Covid positive.



Masks given to clients on OST

Advocacy for TB Preventive Treatment for Drug Users

With about 2.64 million people developing TB in 2019, India has the largest number of Tuberculosis cases in the world. Comparable large countries such as Indonesia and China have 845 thousand and 833 thousand respectively, a fraction of India's. While the national TB elimination programme has made several efforts to reach those who require services, significant gaps remain. Some of these gaps are of special relevance to Sankalp, our work and our philosophy. Prevention, especially among some more vulnerable populations and among children is not as widespread as required. Contact-tracing, especially to take into account marginalised communities, is not rigorous. Latent TB, that is infection with the bacillus but no symptoms or illness manifest, is fairly widespread and continues to be one of our country's big problems. Access to treatment is also not as comprehensive and inclusive as required, especially for latent TB, where TB Preventive Treatment or TPT is recommended. This is of concern to Sankalp as the population we work with, especially street based drug users, and persons infected with HIV are more likely to have active as well as latent TB. Their poor nutrition, low immunity due to repeated infections, and difficult living conditions exacerbate the situation, and they are less likely to complete courses of medication, or to have their contacts treated.

Given our commitment to comprehensive care for drug users, advocacy for universal access to treatment, and out-reach to those who are often left out of the health-care system, Sankalp, with financial support from the Treatment Access Group, TAG, has undertaken a project to improve access to prevention and treatment for TB among drug users. The project is an advocacy initiative, aimed at increasing the body of evidence about TPT and creating momentum for a change in policy to include TPT, specifically the 3HP or 12 dose regimen into harm-reduction services for drug users, along with HIV and TB treatment.



World TB Day Memorial Service

Due to the lock-down and overall conditions around Covid, the work under this project was initially delayed. However, significant progress has been made, and existing relationships with the Health Department as well as with the Revised National Tuberculosis Control Programme have been strengthened. In person meetings were held with the Deputy Executive Health Officer (DEHO) & City TB Officer (CTO), MCGM where they reiterated their support to Sankalp, agreed to test our clients and to provide treatment.

In order to better understand the issues faced on the ground, a consultative meeting was organised with stakeholders such as TB survivors, treatment activists working on TB, Civil Society Organisations (CSOs) working in the area of child rights, women rights and treatment providers such as MSF. Information, confidence in services, implementation and diagnostics all present challenges. The meeting provided a platform to share updated information, bring partners together and to identify areas that require further work.

Advocacy as well as improved treatment and prevention require a strong evidence base. Generating the needed information requires focussed Operational Research on different aspects of TPT. A virtual workshop was held to stimulate operational research. The speakers were from Sankalp, WHO, Humsafar Trust and the Access campaign of Medicin Sans Frontiers (MSF). The workshop was very informative and had 48 participants. To further gain insights into treatment, a focus group discussion was conducted to examine the public-private mix in treatment.

The project has already succeeded in collecting relevant information for improving treatment for drug users and for advocacy. It has also created avenues and strengthened relationships with national and district TB authorities to improve access to treatment and pave the way for a change in policy.



Active case finding with x-ray van at hotspot

ICMR-NARI - Study of Network Dynamics among People who inject drugs (PWID) in context of HIV and access to services in India: a multi-centric study

Since its inception Sankalp has been providing much needed and otherwise non-existent services. After a 5-city Rapid Situation Assessment in 1999, Sankalp began its Harm Reduction and HIV prevention and treatment activities in Mumbai and has till date engaged more than 85% of the Injecting Drug User (IDU) population in the city with its activities. However, effective Harm Reduction requires knowledge of the structure and dynamics of the social networks through which diseases are transmitted. A large body of research demonstrates that injection network characteristics play an important role in the spread of HIV and shape risk/protective behaviors among PWID. Among people who use or inject drugs, network data can provide essential information for assessing the context in which risk occurs, examining transmission patterns and dynamics, and using those learnings to develop interventions and policies.

Although there is a large literature on how aspects of social networks contribute to HIV infection and risk behaviors among substance-using populations, recent research demonstrates that there is still much to be learned about how we can utilize network information to improve harm reduction and public health responses to HIV. In line with this, ICMR-NARI is undertaking a “Study of Network Dynamics among People who inject drugs (PWID)

in context of HIV and access to services in India: a multi-centric study” in Mumbai. Sankalp Rehabilitation Trust partnered with NARI to undertake the study for the Mumbai region.

The objectives of the study is to understand the social and sexual network dynamics of PWIDs (network size, density, stability, structure, relationship of the members), to explore contextual network (social and sexual) factors influencing HIV transmission vulnerability among PWIDs (High risk behavior, treatment seeking and accessing HIV prevention services), to assess factors contributing in switch over from non-injecting to injecting drug use among PWIDs and to understand needs of PWIDs and social and structural barriers in accessing health services [including opioid substitution therapy (OST)] among PWIDs.

The study used qualitative methods in the first Pre-Assessment phase and RDS methodology in the second phase to reach out to the hidden PWID population. We hope the findings of this study would help us gain insights into the PWID network in various high prevalence settings of India for the first time and thus would help support the health and rights of substance-using populations and ensure the development of high-impact HIV programs and policies.



Interviewing Key Informant for Qualitative Phase

Reinstatement of Targeted Intervention programme in Thane district

In the year 2015-16 we were forced to close down 3 Drop-in Centres that were financially supported by Maharashtra State AIDS Control Society. We had successfully brought down the number of injectors in the drug using population; however, we were told that the work can only continue if there is a sizeable injecting drug using population. The project was then handed over to an NGO that already implements a Targeted Intervention project for Female Sex Workers. They were to provide Harm Reduction services to Injecting Drug Using Population as well, but with no prior networking or relationship with the current Injecting Drug Using population in the area and reluctance among HRGs to access non community TIs, the project was a flop. We heard from our networks, that the cancellation of our targeted Intervention programme had led to a disruption on health services including HIV Testing, and Needle Syringe and Condom distribution among IDUs. A proposal was then sent to Maharashtra State AIDS Control Society, which saw two joint visits and a positive response due to which the Targeted Intervention programme was reinstated in the month of February 2021.

Currently we are providing Behaviour Change Communication, HIV screening, STI detection &

treatment, distribution of risk reduction material, treatment of general medical conditions as well as abscess management, counselling and referral services to over 115 Injecting Drug Users and looking at registering more in the coming months.



Community Based Testing at Mumbra, Thane

Repositioning our Rehabilitation Centre due to COVID-19

The Covid-19 pandemic had its effect on people and programs. In the 3 months of initial lockdown from March 25th to 15th June we had innumerable problems from staff being unable to take leave to our own inability to admit new residents with threats from locals who feel that we were likely to bring "Covid concerns" from Mumbai to Pune. It was without any justification since Pune seemed to have more cases than Mumbai.

Our Executive Director, who had been handling all

the projects, Drop-in-centre, Detox and Rehab including driving of the ambulance, found it very taxing and stressful and it was only to manage things efficiently that the Rehab in Pune and Detox in Vasai were merged. It was truly a loss to Covid, and was done with a heavy heart. The picturesque Mulshi will always be remembered as a wonderful place for Rehabilitation and we will all miss going there. We are even grateful to the Lords Ranch Trust and the De Veiga family. God Bless them.



A Thousand Thanks



You joined the Sankalp One Thousand Club and pledged One Thousand rupees a year to put more bite into Sankalp's effort to reach out to marginalised street drug users who are desperately in need of help.

It is time to repeat your generous act. We need every rupee and are counting on a thousand from you again. We look forward to your renewal of your membership and bringing in new members as well.

A Thousand Thanks in advance.

SANKALP REHABILITATION TRUST

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