

From the Ground Up – Community-Led HIV Response in Bhutan, Mongolia and Sri Lanka

In 2019, an HIV outreach worker and two colleagues from Pride Bhutan founded the Red Purse Network – Bhutan’s only sex worker-led collective – after repeatedly encountering sex workers with no network, no shared voice and no safe way to report abuse or access services. The Network is one of several community organisations across Bhutan, Mongolia and Sri Lanka that Health Equity Matters has helped grow from informal, ad hoc efforts into credible, lasting institutions. Together, these organisations reach sex workers, men who have sex with men, transgender people and people who use drugs, groups that still face stigma and exclusion from mainstream health services.

Since 2022, as part of a wider HIV program across the three countries, Health Equity Matters has backed a set of practical, ground-level changes. The Red Purse Network now has its own five-year roadmap, built from the lived experience of its members, mapping out how it can grow its reach and its role in Bhutan's national HIV response. A new accreditation pathway also lets informal outreach workers train and qualify as certified peer educators.

In Mongolia, Health Equity Matters helped the community-based Solongo Clinic to secure formal government registration. As the country shifted more of its HIV testing into community settings, community-based testing found HIV in 1.9% of people tested, compared with just 0.003% through routine facility testing.

In Sri Lanka, organisations received hands-on support to strengthen how they manage money and raise funds. And across all three countries, community groups began using a shared toolkit to collect their own data on gaps in HIV services, turning what they were already seeing on the ground into evidence they could use to push for change.

‘Having data on marginalisation and discrimination in my communities has contributed to HIV prevention programs, as well as community programs. And based on that data, we hope to do advocacy work and raise our voices for the loss of human rights in our community.’

– Program Coordinator, Key Population Organisation, Sri Lanka

When community organisations run their own registration, their own outreach workforce and their own data, HIV programs in Bhutan, Mongolia and Sri Lanka become something these countries can carry forward themselves. Continued support allows Health Equity Matters to keep building that independence, one organisation at a time.