



Experiences and Tips on Community-led Monitoring

Accounts from SWAN Members

2023

About this Resource

This resource has been prepared in the framework of the project “Moving Together Towards Quality and Equality: Improved Sustainable Services for ISPs in EECA”, implemented by the Consortium of EECA networks - Eurasian Harm Reduction Association (EHRA), Eurasian Women's Network on AIDS (EWNA), Eurasian Coalition for Health, Rights, Gender and Sexual Diversity (ECOM), Sex Workers' Rights Advocacy Network (SWAN), funded by the Robert Carr Foundation, 2022-2024.

The document includes materials of SWAN members – Legalife-Ukraine and Tais Plus, Kyrgyzstan, who have been implementing community-led monitoring for a long period of time. These materials were presented at experience exchange webinars in 2022.

This material will be of interest to organisations led by the sex worker community and will help to develop community-led monitoring initiatives. NGOs providing services to sex workers will benefit from a better understanding of sex workers' community priorities and perspectives. International partners will get insights about the actual challenges and needs of the sex workers-led organisations to plan further supporting CLM initiatives as well as will realise the actual scale of CLM which is often underestimated and its results are not taken into account carefully.

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Introduction

Community-led monitoring is an important component of programs with sex workers. The main idea of this resource is to provide impetus to extend CLM in programs with sex workers in our region, to inspire SWAN members with the experience gained, and to inform partners and donors. We are committed to ensuring that the CLM is implemented on a regular basis and becomes an integral part of program planning along with other monitoring and evaluation data.

This material is based on materials from a series of webinars held in 2022 and dedicated to the experience exchange of SWAN members with many years of CLM practice - Legallife-Ukraine and Tais Plus, Kyrgyzstan.

ВЕБИНАРЫ ДЛЯ ОБМЕНА ОПЫТОМ
«Мониторинг силами сообщества: опыт членов SWAN»

ВЕБИНАР 1
28 октября 2022
10:00 - 11:30 время по Будапешту
Опыт «Тайс Плюс» в мониторинге силами сообщества в Кыргызстане

ВЕБИНАР 2
4 ноября 2022
12:00 - 13:30 время по Будапешту
Опыт БО «Легалайф-Украина» в мониторинге силами сообщества

EXPERIENCE EXCHANGE WEBINARS
“Community-led Monitoring: SWAN Members’ practice”

WEBINAR 1
October 28, 2022
10:00-11:30 CET
“Tais Plus” community-led monitoring experience in Kyrgyzstan

WEBINAR 2
November 4, 2022
12:00-13:30 CET
CO “Legallife-Ukraine” community-led monitoring experience

SWAN

CO "Legallife-Ukraine"

The long-term experience of the organisation in conducting CLM and various studies demonstrates that involving sex workers at the stages of developing research protocol and tools, collecting data and interpreting them qualitatively, improves the final result. Despite the possibility of technical errors in the process, the understanding of the problem from the inside by the CLM participants and the trust of the respondents make it possible to obtain more reliable, in-depth and high-quality information about the studying issue.

NGO "Tais Plus", Kyrgyzstan

Experience in SWIT-based community-led monitoring. SWIT is the guide to implementing comprehensive HIV/STI prevention programs with sex workers. “For us, SWIT is a benchmark, and we strive to ensure that programs with sex workers live up to it, constantly comparing what we have today and how we want to see the situation tomorrow.”

CLM Definitions

You might come across several different CLM definitions - by UNAIDS¹, Global Fund², ITPC³ and others. EECA's regional networks agreed on the definition this year during a consultative meeting, and the overall position is available online⁴:

Community-Led Monitoring is the monitoring of issues, phenomena and processes **important to the community**, which is carried out by the community and led by the community on an ongoing basis until the desired result is achieved, and in which the fundamental principles of CLM are observed. The data obtained through CLM is used as the basis for decision-making in order to achieve positive changes for the community. CLM is an integral part of community-led advocacy, cohesion, mobilisation and strengthening of community systems.

Issues and processes that are important for the community are those that affect quality of life in the community, including services, human rights, legislation and compliance, policies, systems and practices to address epidemics, stigma and discrimination, gender equity, governmental and other procurement, budget formation and use, program funding, implementation of treatment, diagnosis, prevention and care, and other issues, phenomena and processes that communities consider important.

SWAN member's experiences

Tais Plus has been developing CLM activities during the last 8 years following this definition:

- community-led monitoring is a process whereby communities gather information:
 - about service provision
 - about conditions which influence the quality and accessibility of services
 - about legal barriers, etc.
- and later use this information to
 - Improve the quality of services
 - achieve positive legal change
 - Influence project implementation, etc.

Data collected during community-led monitoring should become an integral part of the national monitoring and evaluation system.

Summary: what is CLM?

- **Who** makes decisions and performs: communities
- **How**: regular and systematic quantitative and qualitative data collection on services and context (general situation)
- **Why**: to improve the quality of services and its accessibility, including the removal legal barriers, stigma and discrimination
- **Accountability and advocacy**: collected data is analysed and communicated to the decision-making level

¹ <https://www.unaids.org/en/resources/documents/2021/establishing-community-led-monitoring-hiv-services>

² https://www.theglobalfund.org/media/9622/core_css_overview_en.pdf;
<https://www.youtube.com/watch?v=rZEPWGPm5jl>

³ https://itpcglobal.org/wp-content/uploads/2021/12/1205_ITPC_CLM_Design_FullReport06_compressed.pdf

⁴ <https://ehra-uploads.s3.eu-central-1.amazonaws.com/1584d89e-2f5e-4319-89fc-acdee4f0af08.pdf>

What CLM is and what it is not

The table below describes the very basic differences between CLM and non-CLM, and is taken from Global Fund materials⁵. CLM framing is still continuing - each country's experience uncovers nuances about what should be considered CLM and what should not be. You can see these insights in the table below, revealing new developments in CLM understanding.

What CLM IS NOT	What CLM IS
Focused on priorities defined by external stakeholders (donors, governments, research institutions)	Focused on community priorities
One-time survey or report, a single “snapshot”	Recurring, routine feedback *Note: the recent regional networks position paper states that CLM can be permanent, periodic and one-time
Resulting data is published but “sits on a shelf” – data collection is the ‘end point’	Data and feedback obtained is used to advocate for change and accountability. The end goal is to find solutions that improve the lived experiences of service users accessing health services. Data collection is just one step in that whole process
Rigid definition of what kind of data “counts” and “doesn’t count”, tends to favour quantitative data and dismiss qualitative data as ‘anecdotal evidence’; priority given to epidemiological trends (prevalence rates, testing targets) with little interest in the lived experiences that underlie those numbers	Feedback can be measured by numbers (quantitative) and by people’s descriptions of their lived experiences (qualitative). It is imperative to ensure that both types of feedback and data actively informs decision making alongside facility and national data sets
Routine M&E data collection by national disease programs/ministries. This includes collection of program data from civil society and communities engaged in project implementation	Communities design, implement and carry out routine, ongoing monitoring of the quality and accessibility of services that they receive through disease programs. *Note: a) not only services are monitored by the community, but all issues affecting lives of the community - human rights, legislation, stigma and discrimination, gender equity, governmental and other procurement, budget formation and use, etc; b) Routine of CLM depends on funding availability and available capacity, so CLM is not always ongoing, but can be periodic and one-time

⁵ Community-led Monitoring for HIV, TB and Malaria programs and to address the impacts of COVID-19. CEECA regional webinar, 07 December 2021. Available at https://eecaplatform.org/wp-content/uploads/2021/12/clm_ehra-webinar.07122021.pdf

Community-led monitoring cycle

You can find information about the classic CLM cycle in many sources: education - evidence – engagement - advocacy. Here we give an example by ITPC⁶.



In order to follow the recommended CLM cycle, you should need ongoing sustainable funding, but it is a rare case when it comes to sex worker-led organisations. When target CLM funding is available the organisation is able to implement something specific within a limited timeframe and it is hard to plan some further CLM activities.

Most often, organisations undertake to carry out CLM in the framework of small projects in order to study a problem using methods with which they are familiar. Collecting various data year by year and building its own capacity, the CLM is gradually becoming a routine and reliable system for monitoring changes, tracking new phenomena and advocating.

The CLM cycle implies that data collection should be repeated at a certain frequency. For example, can large-scale community-led research be considered part of CLM? Definitely yes, as the frequency may vary for different types of studies or assessments.

Community-led monitoring can be carried out using a variety of research methods and techniques, and can include data collection, either by interviewing a certain number of respondents in specific locations (sampling), or via a survey in which people participate at will, for example, when documenting human rights violations.

⁶ <https://itpcglobal.org/blog/resource/how-to-implement-community-led-monitoring-toolkit/>

CLM problem areas

Ideally, CLM is carried out comprehensively and covers the key areas, but in reality, this is difficult to do, so each organisation chooses which is a higher priority. As the CLM system develops, capacity increases and funding becomes available, the CLM will cover all key areas:

- Meaningful community engagement in decision-making at various levels - from organisational to national
- Services: quality, availability, accessibility, affordability, acceptability, appropriateness
- Human rights violations
- Stigma and discrimination

Data collection methods

- Surveys of sex workers – structured and in-depth interviews, focus group discussion
- Surveys of sex workers' immediate circles
- Surveys of service providers
- Monitoring of the mass and social media to assess public opinion
- Requests for information to organisations and departments whose activities are related to communication with sex workers
- Monitoring the participation of the sex workers' community in national processes
- Observation

CLM training and capacity building

Acquiring CLM knowledge and skills is a gradual process. When CLM began to be implemented, some sex workers' community representatives already had research experience in different roles - interviewers, focus group facilitators, and research team members involved in the analysis and interpretation of data. The best **CLM trainer is a community representative** with experience in these roles and this skill set. In practice, the first CLM trainings were aimed at conducting certain research led by the community, rather than implementing a CLM system as a whole. Implementing any monitoring and research tasks allows capacity building step by step. Friendly specialists - community allies - can be invited as co-trainers.

Many SWAN members could call to mind the SWAN project on documenting human rights violations. Community representatives were trained, both in person and on their own, using the [SWAN guide for sex workers human rights defenders](#) issued in 2014. This guide is still an available resource and can be used in training CLM teams. A 10-year-long documentation of human rights violations project is exactly what the CLM became, although we did not use this term at that time.

Options to get skills on CLM could be the following:

- If you plan to apply to conduct the research or CLM, you should include in your application budget covering expenses of the whole cycle of the research /CLM - design, planning, training, implementation, analysis, report development and advocacy by a team consisting of sex workers. Training is an obligatory part of building the capacity of inexperienced sex workers as well as updating the knowledge of those who already have experience. If you feel that your own resources are not enough to train a research / CLM team, invite a specialist who shares the values of the sex worker rights movement.
- If research, initiated by any stakeholder, involves sex worker issues, the sex worker community must be engaged in the process meaningfully. Even if such research is not community-led, there is an opportunity to get and advance research skills as well as other ones - data analysis and interpretation and advocacy.

- Recently, more and more CLM trainings are being conducted. Before accepting an invitation to such a training, try to learn who the trainers are and whether community representatives are among them.

Key topics to be covered at any training related to a research or CLM cycle

- the research / CLM cycle's goal and how it was designed to be in line with current community priorities
- the composition of the research / CLM cycle team, and whether it consists of only sex workers, if any ally specialists are invited and why; roles in the research team
- research / CLM cycle stages and timeline, along with discussion of necessary adjustments
- how the research team is paid for their work
- information and knowledge about research / CLM topics - human rights, violence, stigma and discrimination, sexual and reproductive health and other issues.
- research methods and tools: participants practice with these tools and advance their skills - interviewing, focus group facilitation, note taking, observing, communication, etc.
- The arrangements related to quality assurance of the collected data, data entering and safety, analysis, interpretation and report writing along with clarification of how research team members will participate in it.

Advocacy of CLM results

It is necessary to bring CLM or research results to a decision-making level in order to implement their recommendations. This task might turn out to be quite difficult, as decision-makers may choose not to acknowledge them, arguing that these results are unreliable or biased.

Once the report is finished, consulted and agreed upon by the research / CLM team, the dissemination plan should be developed. This outlines to whom and how to present the report, along with further negotiation of who will do what to improve the situation. Understanding who your allies are among the audience to whom the report is disseminated is very helpful. A good option is to conduct a meeting to communicate CLM results and develop action plans.

As many activities with and services for sex workers are provided by NGOs one effective method to achieve faster change is to build equal partnerships with them and combine the CLM with mutual education and technical support. In this case, the main CLM method is a focus group discussion with NGO staff, during which difficulties and potential solutions might be identified. An NGO, even if it is not community-led, could follow the approach of meaningful community engagement and other SWIT principles.

CLM or community-led research results usage should be advocated for in the development of national documents like HIV national programs, gender equality action plans, funding requests to Global Fund, etc. It could take a considerable period of time before you see your results taken into account.

It is not rare that CLM or community-led research results are too difficult to disseminate within their own country at a certain stage - sometimes they are not acknowledged at all, and even allies are afraid to support you publicly. This data can still be used in another way, for instance, by disseminating results outside the country through submitting alternative reports to UN human rights committees - then your data will come back to the country in the form of UN Committees' recommendations. For this purpose, two resources developed jointly by IWRAW-AP and NSWP with SWAN participation are very helpful in developing and submitting alternative reports to CEDAW: [Framework on Rights of Sex Workers & CEDAW](#) and [Shadow Report Guidelines on CEDAW & Rights of Sex Workers](#), both are available in English and Russian.

Sources of funding for CLM

Now many donors are ready to fund community-led monitoring, but the conditions may be different, including those that do not correspond to the CLM essence, for example, the donor may immediately stipulate which areas need to be monitored, without taking into account the priorities of the community.

The new Global Fund funding cycle for 2023-2025 provides funding for CLM activities. They are listed in the module “Resilient and Sustainable Systems for Health” (RSSH)⁷, in the subsection Community Systems Strengthening, interventions (a) CLM and (b) Community-led research and advocacy. These activities are included in the RSSH Module because Sustainable health systems are not only health institutions, but also a key role for community systems.

If your country is applying to the Global Fund or has already applied, you would need to find out what funding is available for community-led monitoring.

Building CLM system: barriers and opportunities

One of the barriers to implementing community-led monitoring is the **lack of trained community members** to take leadership roles. Training on CLM and acquiring practical skills is a long process and requires resources. For example, in Kyrgyzstan, during the period 2016-2022, about 40 sex workers’ community representatives were trained in research techniques and CLM, including capacity building training, training prior to research and CLM visits. Due to turnover in NGOs, newcomer staff need training, and maintaining skills requires practice and updating knowledge. In addition, sex workers who are CLM experts at the same time continue to be employees of NGOs providing services, and this sometimes affects their position: people would not say something that could harm them at their main place of work. The only option is to continually engage new people and build the capacity of those already doing CLM, and to form an **advisory group or community council** whose task is to discuss the CLM results, research findings and concrete actions to change the situation.

The position of state agencies that do not take into account the CLM results, for example, openly saying: “You collected this data on your own, so it is biased and unreliable. You only asked sex workers about rights violations, but such research should be carried out together with the police.” It means that government agencies do not understand the essence of the CLM, do not see the benefit for themselves and reject this data. It is necessary to **reform** national M&E systems so that they include CLM as one of their essential components.

Another problem occurs while conducting large-scale studies, which require calculation and sampling, and subsequent statistical data analysis using different software. This means that outside specialists or organisations are invited to the research team. In this situation, it is very important to build **equal partnerships**. Quite often, specialists take the lead only because they have special knowledge about what and how to count. As a result, the study, conceived and initiated by the community, is in fact led by sociologists. Actually, it is a myth that complex calculations cannot be explained in plain language.

Some data collection systems are **declared as CLM**, but in fact, **they are not**. For example, in our region, REAct has become virtually the only system for documenting human rights violations. Many of the paralegals who document cases and provide support are indeed community members themselves, but subsequent analysis is done without meaningful community engagement, documenting results are only available in the form of short reports, and access to all data is closed, requiring a special request to obtain additional information. As a result, community-led organisations cannot obtain funding for

⁷ https://www.theglobalfund.org/media/4309/fundingmodel_modularframework_handbook_en.pdf

monitoring human rights violations because all donors know about REAct and do not consider it worthwhile to support “duplicating activities.”

Sex workers community-led organisations are taking advantage of various opportunities to conduct research on their own, following community priorities, gradually increasing their capacity to use different research methods and expanding their advocacy opportunities. Below you will find a schematic representation of the CLM systems of Legalife-Ukraine and Tais Plus, Kyrgyzstan, which reflect the accumulated experience, as well as CLM examples of certain problem areas.

CLM system example in Tais Plus, Kyrgyzstan

This is the accumulated experience of the last 10 years.

Topic of research and/or monitoring	Type of study / monitoring / tool	Periodicity
Knowledge, skills and access to HIV and STI services	<ul style="list-style-type: none"> Quantitative study using a structured questionnaire according to a sample (500-550 sex workers), country scale Focus groups for obtaining qualitative data (2018) <p>Links 2013 report in Russian 2018 report in Russian and English, infographics</p>	2013 UNFPA funding 2018, Bridging the Gaps project, AIDS Fonds
Compliance with human rights of sex workers	<p>Quantitative study, tool – structured interview questionnaire, cluster sample (590 sex workers in 2012 and 514 sex workers in 2015)</p> <p>Link to the report 2015 in Russian</p>	2012 and 2015, funding Soros Foundation-Kyrgyzstan
Documenting Sex Worker Human Rights Violations and violence	<p>Tool is a questionnaire; collecting data from everyone who agrees. See Annexes 1 and 2</p>	2012-2021, funding Soros Foundation-Kyrgyzstan, Global Fund
Community-led monitoring of activities and services, as well as work approaches, for compliance with SWIT principles	<p>Focus groups with NGO staff, meetings and interviews with sex workers, a feature the search for solutions to improve work efficiency is carried out immediately during the visit in the format of consultations and exchange of experience. From 2023, a routine survey of sex workers will be launched throughout the year</p>	2016-2022, support to SWAN (RCF), NSWP (Global Fund, Communities, Rights and Gender), Global Fund country project

CLM system example in Legalife-Ukraine

*The list is based on the webinar's materials

Topic of research and/or monitoring	Type of study / monitoring / tool	Periodicity
Documenting Human Rights Violations	The main tool is a questionnaire, collecting data from everyone who agreed to tell their story Link to the report for the period 2015-2017	2013-2017
Exploring Barriers, Service Quality and Needs of Sex Workers in HIV Prevention and Treatment	<ul style="list-style-type: none"> • Semi-structured interviews with sex workers based on a representative sample (175 people). Survey tool - see Annex 3. • In-depth interviews with experts from among administrators, NGOs, and medical institutions (14) • Focus groups with sex workers (3) Link to the report	2017
Study of Social inhibitors of decriminalization of sex work in Ukraine	<ul style="list-style-type: none"> • Structured face-to-face interviews with a population (800 people) • Structured face-to-face interviews with sex workers (200 people) • Online survey of clients - users of sex services (100 people) • In-depth interviews with experts from among administrators, NGOs, medical institutions, police (20 people) Link to the report in Ukrainian, English and Russian	2019
Evaluating accessibility and quality of services for sex workers during the war in Ukraine	<ul style="list-style-type: none"> • Structured interview with sex workers (100 people). Tool - see Annex 4. • Snowball sampling Links to the report in Ukrainian and Russian	2022 funded by Global Fund, initiative "Community, Rights and Gender" through EHRA and SWAN
Assessing the sex workers' needs in the conditions of war and impact of support projects to sex workers	<ul style="list-style-type: none"> • Structured interview with sex workers (137 interviews at the 1st stage and 100 interviews at the second stage in 12 regions of Ukraine) • Snowball sampling Links to the report in Ukrainian and English	2022 - stage 1 2023 - stage 2 ActionAID funding

Legalife-Ukraine. Monitoring of human rights violations

Period: 2013-2017

Geography: Kirovograd, Vinnytsia, Rivne regions and Mariupol City in Donetsk region

- **Data collection – documenting human** rights violations using a questionnaire as well as using other methods, for example, observation:

“Going to the highways we would spend hours in the bushes to document cases of violence and rights violations.”

- **Data analysis** - on their own, without involving consultants
- **Reaction** to the facts of violations
 - Training sex workers to protect their rights: *“We educated sex workers by explaining which of their rights were violated by police and why they should not agree to sign illegal detention protocols.”*
 - Complaints to the Prosecutor's Office
 - Training of police, doctors, partners
 - Hotline for sex workers
 - Lawyers team
- **Finding solutions** to change the situation
- **Informing** partners, the public, relevant authorities ([publication of an analytical report](#))
- Usage received data in **advocacy** for the purpose decriminalization of sex work , for example development of the [shadow report to CEDAW](#), submitted on January 23, 2017 for the 66th session.

Example of results in the Kirovograd region

- In 2015-2017, it has seen no cases of:
 - Forced sexual services
 - Confiscation of documents and personal belongings
 - Extortions
 - Beatings and rape
- These violations made up 47% of all the cases of sex workers’ rights violations in 2013.

**Note:* Currently, documentation of human rights violations is carried out within the framework of REAct and DataCheck. Legallife-Ukraine does not take part in the work of REAct, and within the framework of DataCheck, paralegals - leaders of the sex worker community - record appeals from sex workers about violations of their rights and provide paralegal assistance. At the same time, both data collection systems are not community-led monitoring, since the community does not have free access to the data, does not participate in the analysis and interpretation of the results, and, therefore, cannot use them for advocacy.

Tais Plus. Monitoring human rights violations

Period: 2012-2021

Geography: nationwide

- **Data collection - documenting human** rights violations using a questionnaire (Annex 1). Since the launch of the documentation, the questionnaire has been revised several times due to changes in legislation, in addition, a questionnaire was later formed to document violence from clients (Annex 2), as well as a form to document violence from other individuals - apartment owners, administrators, neighbours, relatives, intimate partners.
- **The data analysis** was carried out by Tais Plus for the first 2-3 years, then the Shah-Ayim Network continued to analyse data throughout the country, combining cases documented by paralegals throughout the country within the framework of projects supported by the Global Fund and the Soros Foundation-Kyrgyzstan. Tais Plus continued to monitor the links between human rights violations and sex workers' access to HIV services. The latest such analysis is available for 2020 at [this link](#).
- **Reaction** to the facts of violations
 - Training sex workers to protect their rights: Tais Plus has developed videos, but at the moment they are no longer relevant due to changes in legislation: (1) Video [We know our rights](#) - relevant until 2019 (2) Video [If the police try to enter the premises](#), video [If the police approached on the street](#) - relevant in the period 2019-2021 .
 - Legal assistance: paralegals provided counselling during documentation, and accompanied sex workers with a lawyer if the case was considered in the court.
- **Informing** partners - regular mailings with the results of documentation
- Use of collected data in **advocacy**, including submission of alternative reports to UN Committees⁸:
 - Joint Alternative Report submitted in 2015 for the 60th session of CEDAW.
 - Joint Follow-up Alternative Report submitted to the CEDAW Committee in 2018
 - Material to generate a list of issues on the situation of women with intersecting forms of discrimination. The document has been prepared for consideration at the 76th Pre-session Working Group of CEDAW (November 11-15, 2019).
 - Alternative report. The situation of women facing intersecting forms of discrimination in Kyrgyzstan (2020)
 - Additions to the alternative report for the 80th session of CEDAW (October 18, 2021 - November 12, 2021).

**Note:* since 2022, human rights violations and violence against all key populations have been documented only in the REAct system, but this data collection is not CLM, as the analysis and interpretation take place without the participation of communities.

⁸ Reports in Russian and English to the CEDAW Committee
https://www.dropbox.com/sh/oywasamxb9kbc2n/AADWkx_X63C-ugNX8w8Mi7Z1a?dl=0

Legalife-Ukraine. Assessing the sex workers' needs in the conditions of war and impact of support projects to sex workers

Period: April 2022 - stage I, April 2023 - stage II

Geography: 12 cities - Vinnytsia, Dnipro, Zhytomyr, Kyiv, Kryvyi Rih, Kropyvnytskyi, Nikolaev, Poltava, Rivne, Sumy, Kharkiv, Cherkassy.

- **Data collection:** Structured interviews (137 interviews in Phase 1 and 100 interviews in Phase 2) with sex workers. Interviewers are leaders of the regional initiative group "Legalife -Ukraine". Recruitment of respondents was carried out using the "snowball" method.
- **Tool:** questionnaires for the 1st and 2nd stages, including the following blocks of questions (see Annex 5):
 - The socio-economic status of sex workers, experience of receiving humanitarian assistance and identification of current needs for receiving humanitarian assistance and other types of material support in war conditions;
 - Assessment of the psycho-emotional state, the need for psychological assistance in war conditions and the experience of contacting psychologists "Legalife -Ukraine";
 - Assessment of human rights capacity, needs of sex workers for legal assistance, experience of contacting lawyers
 - Assessment of satisfaction of sex workers with the services received from the CO "Legalife-Ukraine"
- **Respondents** - people who provide sex services during the war or who provided them before the start of the war in Ukraine, regardless of their sexual orientation and gender identity - men, women, trans people aged 18 years and older, including cross-groups of sex workers – LGBTIQ sex workers, sex workers living with HIV, sex workers who use drugs, etc.
- **Data analysis** - independently without external specialists
- **Information:** [analytical report](#) is available on the organisation's website, distributed to the community and partners, the results of the study are announced in the media:
 - [Sex workers in Ukraine: what problems did the war bring?](#)
- Use of obtained data in **advocacy** locally, nationally and regionally

Tais Plus. Community-led monitoring of activities and services, as well as work approaches, for compliance with SWIT principles

Period: 2016-2022

Geography: nationwide

Approach: The basis of community-led monitoring is SWIT - Sex worker Implementation Tool. SWIT is the benchmark against which programs with sex workers should be implemented. To ensure effective programming, SWIT recommendations need to be translated into action by adapting them to local conditions.

Data collection is carried out through regular visits to NGOs that work with sex workers. Tools are focus group discussions with NGO staff, interviews with medical specialists, and conversation plans for meetings with sex workers that involve more informal communication. Tools have been developed for each of the 6 sections of SWIT.

CLM visit model: the visit is aimed at jointly identifying challenges in applying SWIT in practice. CLM visits to NGOs are based on **partnership**, these are not inspections, so an essential part is mutual training and technical assistance on the issues identified during focus groups with staff and interviews with sex workers.

Composition of the CLM team

The team is made up of members of the sex worker community who are trained prior to each visit. Allies and representatives of other communities are also sometimes included in the CLM team. The participation of other communities as part of the team is a good opportunity to develop solidarity and understanding between communities. For allies, participation in the CLM helps to develop sensitivity and understanding of what community leadership is and how equal partnerships can be developed.

CLM visit arrangement

1. Training of the CLM team prior to the visit, including data collection tools, and training materials on the topic of the visit.
2. The program of each CLM visit includes:
 - a. focus group with staff of organisations on a specific section of SWIT
 - b. development of recommendations to improve NGOs' work, as well as recommendations for government agencies and international organisations
 - c. learning component: a detailed discussion of a specific section of SWIT, experience exchange about specific ways to implement SWIT recommendations in the conditions of a given city.
 - d. meetings with sex workers on the topic of the visit
 - e. interviews with medical specialists, and representatives of the AIDS service
3. Preparation of a CLM results report, which is then sent to agree with an NGO where the visit was made
4. Sending an agreed report to stakeholders: international organisations that fund or provide technical assistance for programs with sex workers, government agencies - so far this is mainly the AIDS service.

Results

- The NGO work approaches with sex workers have been changed and become more partnership-based rather than based on treating sex workers solely as the programs' beneficiaries.
- Mutual learning and experience exchange between organisations, for example, in obtaining state funding, arrangement of STI service on the condition of reduced external funding
- Common understanding of priorities for programs with sex workers and their inclusion in the GFATM country proposal and national documents
- Trained CLM team of sex workers' community experts

Annexes

[Annex 1. Form for Documenting Human Rights Violations, Tais Plus, Kyrgyzstan](#)

[Annex 2. Form for Documenting Client Violence, Tais Plus, Kyrgyzstan](#)

[Annex 3. Assessment of the quality of services for sex workers, Legalife - Ukraine](#)

[Annex 4. Questionnaire for assessing the availability and quality of services for sex workers in times of war, Legalife -Ukraine](#)

[Annex 5. Assessment of the sex workers' needs in additional services in the conditions of war, Legalife -Ukraine](#)

[Annex 6. Experiences in community-led research. CO "Legalife-Ukraine". Experience Exchange Webinar Presentation 2022.](#)

[Annex 7. Tais Plus experience in community-led monitoring. Experience Exchange Webinar Presentation 2022](#)