



T-WINGS (TRANSGENDER WOMEN INITIATING NEW GOALS FOR SAFETY):

Adaptation, feasibility and effectiveness of a community-engaged mobile health (mHealth) intervention to identify and address gender-based violence and enhance access to justice among transgender women in Indonesia

Monash University, Indonesia in partnership with the Indonesia Transgender Network, Sanggar Swara, Kebaya Foundation, and the Community Legal Aid Institute.

CONTEXT

Transgender (trans) women experience disproportionately high levels of gender-based violence (GBV), including intimate partner violence (IPV), discrimination, and persecution. Compared to cisgender women, trans women have a higher prevalence of GBV and are 2.5 times more likely to experience sexual violence.^{1,2}

GBV contributes to increased HIV risk, poorer physical and mental health, suboptimal HIV care outcomes, riskier substance use, non-medical hormone and silicone use, and reduced access to healthcare and resources for trans women.^{3,4}

In Indonesia, trans women face heightened violence from both intimate partners and state actors, accounting for over 70% of all documented cases of violence against the LGBTQIA+ community⁴ Despite this, there is no coordinated GBV response for trans women, who remain largely excluded from violence prevention, health, and harm reduction services.

Since 2016, proposed laws criminalizing LGBTQIA+ identities have further worsened conditions,⁵ underscoring the urgent need for tailored GBV and human rights interventions.

OBJECTIVES

This study evaluated the preliminary effects, feasibility, safety and acceptability of T-WINGS, a one-session digital intervention to address GBV and improve access to justice, social support, and healthcare for transwomen in Indonesia, using a waitlist randomized trial design with 254 trans women.

The study assessed the incidence of psychological, physical, and sexual IPV and GBV experienced by transgender women in the past six months. Secondary outcomes included the proportion of participants who disclosed experiences of IPV, GBV, discrimination, or persecution; the percentage who accessed IPV or GBV-related services; and levels of social support, self-efficacy, and help-seeking behaviours among trans women.

INTERVENTION

What is T-WINGS ?

T-WINGS (Transgender Women Initiating New Goals for Safety) empowers transgender women and other key populations at elevated risk of GBV through evidence-based screening, a trauma-informed brief intervention, and linkage to supportive services. The program helps participants **identify, reduce, and respond** to IPV and other forms of GBV.

Designed to address the unique vulnerabilities faced by trans women—such as discrimination, social exclusion, and barriers to healthcare—T-WINGS promotes safety planning, self-efficacy, and access to affirming care and community resources.

Originally developed by the Social Intervention Group at Columbia University for women in the U.S. criminal justice system, WINGS has been adapted in over 10 countries for key populations of women including women living with HIV, sex workers, and women experiencing poverty or conflict. In **Indonesia**, T-WINGS was tailored to address forms of GBV and discrimination experienced by trans women, and to support safety planning, goal setting, and connections to essential health, legal, and social services.

The intervention comprises **8 core components**:

1. Psycho-education
2. Screening
3. Motivational interviewing
4. Safety planning
5. Social support network enhancement
6. Identification and prioritization of service needs
7. Goal-setting
8. Linkage to services.

How is the program facilitated?

T-WINGS, a one-session digitized motivational interviewing intervention, can be delivered as a one-hour long, self-paced computerized model on tablets or smartphones, a digitally-assisted model, or a traditional Screening, Brief Intervention and Referral to Treatment (SBIRT) model delivered by a case manager, outreach worker or trained peer advocate in 3 steps.

1. Screening

Raise awareness about different types of IPV and GBV, including discrimination and persecution among women in key affected communities, identify IPV/GBV trans women may be experiencing or perpetrating using validated screening tools, and give individualised feedback on risks.

2. Brief Intervention

Elicit motivation to address IPV/GBV and discrimination/persecution and reduce risks of exposure by setting safety goals, increasing social support, and conducting safety planning.

3. Service referrals

Identify and prioritize service needs and provide linkage to IPV, GBV, access to justice and legal aid, and other related services.

METHODS

COMMUNITY-ACADEMIC PARTNERSHIP

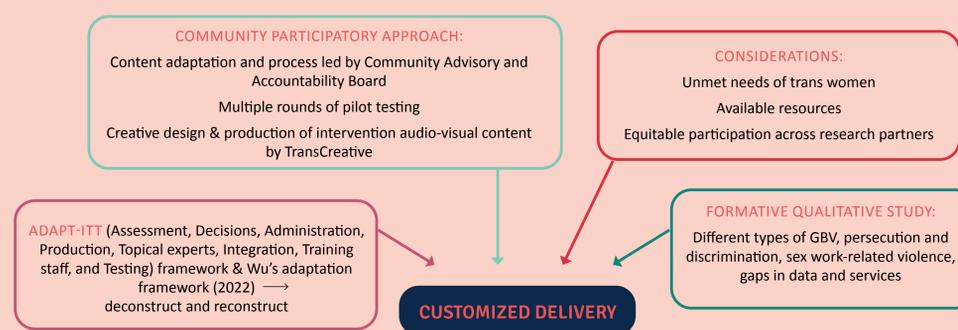
Using community-based participatory methods, the study was co-designed with transgender-led organizations as part of an academic-community collaboration led by Monash University, Indonesia. The research design, instrument development, and implementation were guided by a Community Action and Accountability Board (CAAB) comprising of transgender organizations in Jakarta and Yogyakarta, namely Kebaya Foundation, Sanggar Swara, and Indonesia Transgender Network, and the Community Legal Aid Institute. CAAB members provided ongoing feedback on the design and implementation of the study and research protocols to ensure that the research was adequately tailored to the local context and was ethical, appropriate, and acceptable. Findings from this study were validated by the CAAB.

ADAPTATION

We used the ADAPT-ITT (Assessment, Decisions, Administration, Production, Topical experts, Integration, Training staff, and Testing) framework, a Community Advisory and Accountability Board, and community-based methods to systematically adapt an evidence-based program to address gender-based violence developed for women who use drugs in criminal justice settings in the United States to transgender women in community settings in Indonesia.



T-WINGS ADAPTATION PROCESS AND APPROACH



WAITLIST RANDOMIZED CONTROLLED TRIAL

A waitlist randomized controlled trial was conducted between December 2024 and August 2025 in two cities in Indonesia: Greater Jakarta, which includes Jakarta, Bogor, Depok, Tangerang, and Bekasi; and the city of Yogyakarta, to capture diverse contexts shaping trans women's experiences of GBV.



Participant inclusion criteria included: self-identifying as a transwoman, aged 18 years or older, residing in Jakarta or Yogyakarta, having an intimate partner in the past year, and being able and willing to provide informed consent. Eligible individuals were recruited through community-led NGOs, the Community Advisory and Accountability Group and their community networks in the study settings.

FORMATIVE RESEARCH AND MIDTERM EVALUATION

Qualitative research was collected pre-intervention to inform adaptation, as well as during implementation to understand multi-level factors that impede or facilitate adoption and sustainability of using a community-engaged approach to deploying T-WINGS.

RESULTS

We screened 301 trans women, of whom 294 were eligible, 254 participated in the study and were randomized to either receive the T-WINGS intervention or the waitlist control, and 249 completed the 6-month follow-up. Approximately 204 (80.3%) were recruited in Jakarta, and 50 (19.7%) were recruited in Yogyakarta.

Although data analysis is ongoing, this research is expected to demonstrate that the **T-WINGS intervention** positively impacts the safety, wellbeing, and empowerment of transgender women.

It is hypothesized that, at six-month follow-up, participants who receive the intervention will be:

- Less likely to experience psychological, physical, or sexual IPV and other forms of GBV than those in the waitlist control group.
- More likely to disclose experiences of IPV, GBV, discrimination, or persecution, reflecting increased awareness and trust in support systems.
- More likely to access IPV- or GBV-related services, including health, legal, and psychosocial support.
- More likely to report higher levels of social support, self-efficacy, and help-seeking behaviours compared with the control group.

If these hypotheses are confirmed, T-WINGS will contribute important evidence for the **adaptation and scale-up of trauma-informed GBV interventions** for transgender women in Indonesia and other Southeast Asian contexts, strengthening **inclusive, rights-based public health responses** to violence and discrimination.



REFERENCES
 1 Arayasirikul, S., Turner, C., Trujillo, D., Siro, S. L., Scheer, S., McFarland, W., & Wilson, E. C. (2022). A global cautionary tale: Discrimination and violence against trans women worsen despite investments in public resources and improvements in health insurance access and utilization of health care. *International Journal for Equity in Health*, 21(1), 32. <https://doi.org/10.1186/s12939-022-01632-5>.
 2 Peitzmeier, S. M., Malik, M., Kattari, S. K., Marrow, E., Stephenson, R., Agénor, M., & Resner, S. L. (2020). Intimate partner violence in transgender populations: Systematic review and meta-analysis of prevalence and correlates. *American Journal of Public Health*, 110(9), e1–e14. <https://doi.org/10.2105/ajph.2020.305774>.
 3 Teresa, K. G. (2019). *Sexual minority groups exposed to human rights violations: Monitoring and documentation*. Community Legal Aid Institute.
 4 Human Rights Watch (2016). "These political games ruin our lives": Indonesia's LGBT community under threat. Human Rights Watch. https://www.hrw.org/sites/default/files/report_pdf/indonesia0816_web_2.pdf
 5 More information available from: <https://projectwings.org>.

NOTABLE IMPACT OF RESEARCH

Programmatic & Practice-Level Impacts

- First of its kind: To our knowledge, T-WINGS is the first intervention globally tailored for transgender women to address multiple forms of gender-based violence GBV and improve access to justice.
- Evidence generation: This adaptation and evaluation expand the evidence base on effective GBV and IPV prevention and response for underserved populations of women in Southeast Asia and globally.
- Culturally adapted and digitized: The T-WINGS intervention demonstrates strong potential in identifying and addressing IPV and GBV victimisation while enhancing linkages to health, legal, and social support services.
- Knowledge translation: Multi-media training and awareness materials from T-WINGS are being integrated into partner organizations' programs to raise awareness, build staff capacity, and improve referral pathways for trans women experiencing violence.

Organizational-Level Impacts

- Community empowerment: Training of 11 transgender peer community workers strengthened participatory engagement, GBV screening, safety planning, and service linkage capacity.
- Sustainability: The project has enhanced the capacity of transgender-led organizations to deliver peer-led GBV response services, ensuring continuity and ownership beyond the study period.
- Scalability: The team secured additional UNAIDS funding to expand and scale up T-WINGS implementation across Indonesia.

