



CQUIN 5th Annual Meeting

Virtual: November 16-19, 2021

Community-led Differentiated Services for Female Sex Workers in Uganda

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17 November 2021



HIV Learning Network
The CQUIN Project for Differentiated Service Delivery



Presentation outline

❖ **Brief overview about AWAC**

❖ **Community Prevention: Innovative Models**

- Peer to Peer/Enhanced Peer Outreach Approach (EPOA)
- Drop-in Centres
- Community Empowerment:
- Community Outreach / Door to Door Drugs Delivery (CO4Ds)
- Mental Health Services (MHS)
- Needle and syringe exchange programme for FSWs injecting drugs;
- Community Safe Spaces & Interpersonal Group Therapy (IPT)

❖ **Recommendations**

BRIEF ORGANIZATION BACKGROUND

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The Alliance of Women Advocating for Change (AWAC), an umbrella network of grass root emerging female sex worker (FSW) led organizations established in 2015 by FSWs to support collective organising and strengthen a resilient movement of FSWs that advocates for sustainable integrated universal health care, promotion of human rights and social protection, economic justice for FSWs and those with intersecting vulnerabilities in Uganda.

AWAC's core targets are, Female Sex Workers (FSWs) & those with intersecting & compounded vulnerabilities such as: ***FSWs living with disability; FSWs Using & Injecting drugs; Indigenous FSWs in hard to reach areas; Refugees FSWs in urban setting; FSWs living with HIV/AIDS; Elderly FSWs; Children of FSWs and Adolescents Surviving in the Sex Work settings*** in Uganda.

AWAC's core purpose:

- a) Challenging Stigma, Discrimination & Criminalization of all forms at all levels;
- b) Championing access to integrated quality HIV/SRHR/GBV/Mental Health & Harm Reduction Services;
- c) Advocating for Social Protection, Socio-economic Resilience;
- d) Conducting Operational Research & Evidence Based Advocacy;
- e) Capacity Strengthening for Feminist Transformation Leadership for Grassroot Advocacy & Movement Building in Uganda.

AWAC's Vision: An inclusive policy and social environment where grassroots FSWs and those with intersecting vulnerabilities live healthy and productive lives that are free from human rights abuse, in Uganda.

Peer to Peer/Enhanced Peer Outreach Approach (EPOA):

Under EPOA peers use the Social Network Strategy (**SNS**) to deliver prevention services: needle and syringe program (**NSP**) kits, condoms, self testing kits, self injectable family planning services and responsive behaviour change **IEC** materials for FSWs and those with intersecting & compounded vulnerabilities.



Drop-in Centres (DiC)

- DiCs offer a wide range of prevention services for HIV and other STIs services to AGYW engaging in sex work; FSWs and those with intersecting & compounded vulnerabilities.
- Services include:
 - ✓ PrEP talks to clear the myths and misconceptions
 - ✓ PrEP screening and initiations
 - ✓ HIV testing and referral/linkages services
 - ✓ Post-exposure prophylaxis (PEP)
 - ✓ Emergency contraceptives
 - ✓ Commodities and supplies (lubricants, condoms, PrEP refills)
 - ✓ Management of injuries
 - ✓ Reducing stigma and discrimination
 - ✓ STI services -syndromic screening and referral for treatment



Photos during Adherence support group and community Viral load bleeding at AWAC DiC



Community Empowerment:

- Community tailored safe spaces where FSWs and AGYW commune **Community Health Livelihood Groups (CHLEGS)** and **Girls Action Clubs (GACs)**, **DREAMs** to share challenges, opportunities and positive behavior change practices to reduce their health and socio-economic risks and challenges
- Expansion of the range of choices through socio-economic empowerment schemes including life skills, business startup etc.
- Safe spaces also provide them with peer-led psychosocial support and counseling services for effective coping mechanisms.

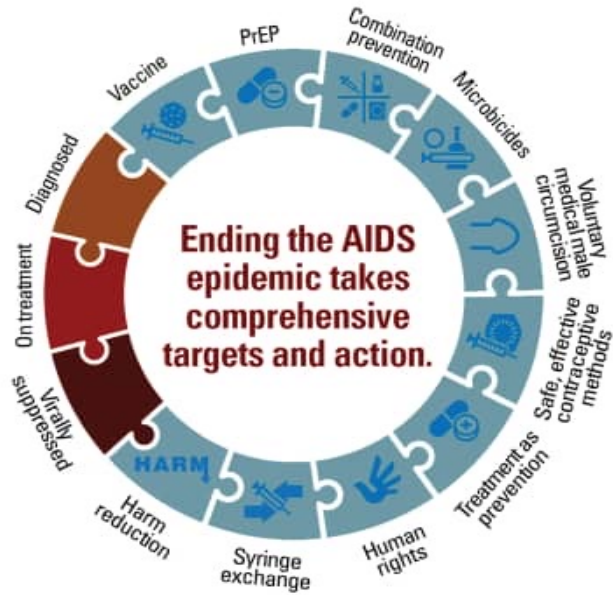
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ENDING THE AIDS EPIDEMIC TAKES COMPREHENSIVE TARGETS AND ACTION BEYOND 95-95-95. THE AMBITIOUS TREATMENT TARGETS

Treatment Target



1. By 2030 95% of all people living with HIV will know their HIV status
2. By 2030 95% of all people living with diagnosed HIV infection will receive sustained antiretroviral therapy
3. By 2030 95% of all people receiving antiretroviral therapy will have viral suppression

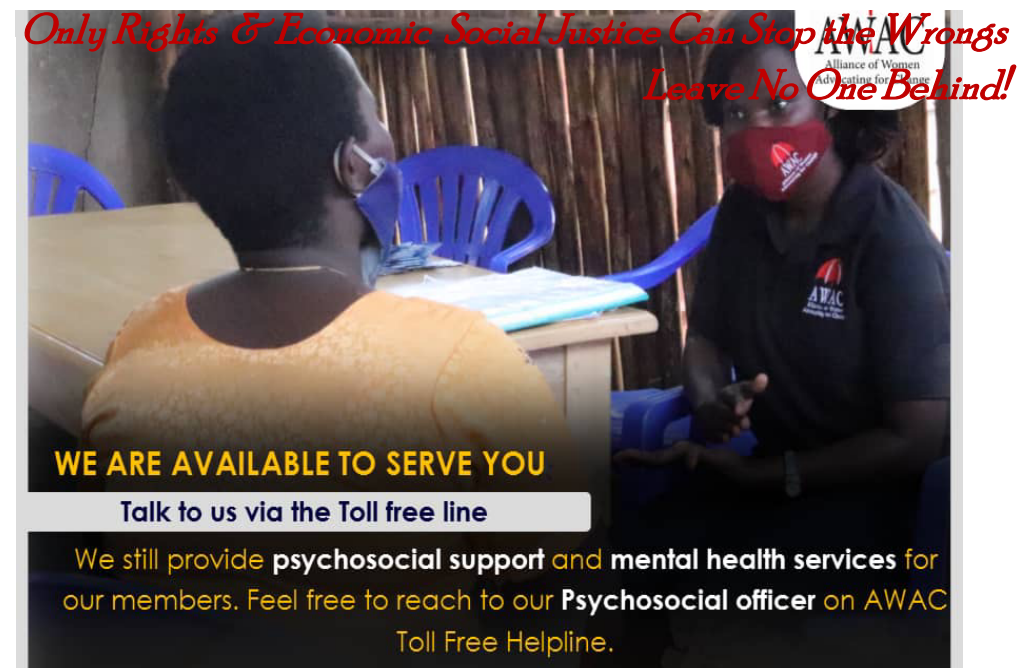


Community Outreach / Door to Door Drugs Delivery (CO4Ds)

Use of motorcycles, bicycles and safe bodas to conduct test and treat, distribute needle and syringes kits and other commodities such as condoms, lubricants and IEC materials

Mental Health Services (MHS)

- ❖ Provide integrated HIV prevention, SRH and care services through **AWAC Malaika Toll-Free Line:0800 333 177.**
- ❖ Provides psychosocial support services for symptoms of common mental disorders (CMDs), including to survivors of gender-based violence (GBV) and sexual violence against children (SVAC) upon first contact.
- ❖ Referrals for shelter, legal services, nutrition support services other service providers.



Needle and syringe exchange programme to FSWs injecting drugs;

- ❖ Community harm reduction interventions – **safe distribution of clean needles and syringes and collection of used needles –NSP Pack Kit** for HIV prevention to FSWs who use and inject drugs.

- ❖ Kit includes: alcohol swabs, water injection, mixing container, spoons, tourniquet, cotton wool, condoms, IEC materials about safe injecting practices, needles and syringes

- ❖ **Provision of psychosocial support and referrals for further management** including Methadone Assisted Therapy (MAT), shelter and legal services.



Community Safe Spaces & Interpersonal Group Therapy (IPT)

- ❖ Problem solving therapy delivered by trained FSW peers as community health counsellors/experts.
- Safe spaces also provide them with peer-led psychosocial support and counseling services for effective coping mechanisms.



Service provided/ Activities/ intervention response	No. of Service recipients/participants reached	Notes <i>Only Rights & Economic Justice Can Stop the Wrongs Leave No One Behind!</i>
HIV prevention services	6450	Recipients FSWs, their clients, partners and their children, AGYW engaged/ surviving in sex work settings in (Kampala, Wakiso, Masaka, Bukomansimbi, Kyotera, Rakai and Luweero)
Oral PrEP care services	5333	FSWs, and AGYW and their partners received the service and are currently in PrEP care
ART	424	FSWs, and AGYW and their partners received the service and are currently on ART
HIV Viral load Services (status)	373	FSWs, and AGYW and their partners have virally suppressed
STIs treatment	629	FSWs and AGYW and their partners were screened and received STIs treatment
GBV related services	1615	FSWs and AGYW received screening, Counselling, safety and security, PEP, referral for legal aid and shelter and health support.
Family planning services including post abortion services	484	FSWs received Sexual Reproductive Health and Services Including Prevention of Unsafe Abortion through Community-Based Organizations.
PAC related services	122	FSWs received PAC related services

Mental health screening and services	1731	FSWs and AGYW received mental health screening and services (75% of these had depressive symptoms, 62% Generalized anxiety symptoms, 35% PTSD symptoms) The mental health challenges were largely attributed to violations experienced and the effect of COVID 19 restrictions on their sources of livelihood. The services included; counselling , group therapy management and referral for moderate and severe cases.
Children of FSWs reached with HIV prevention and RMNCAH related services including PSS	159	Children of FSWs were reached with HIV prevention and RMNCAH related services including PSS (80 Children of FSWs) received OVC services
FSWs with disability received HIV prevention and SRHR services	40	FSWs with disability received HIV prevention services 10 FSWs with disability in Kampala received PSS, life and vocational skills training and income generating activity support .



AGYW engaged in sex work / Surviving in sex work settings reached with SRHR and HIV prevention services including PSS	1340	AGYW supported to establish 12 GACs 323 AGYW including pregnant teenagers and teenage mothers were equipped with life skills using the stepping stones. 202 AGYW benefited from individual and group income generating and vocational projects As result there was reported improvement in coping, denial of live sex for high pay, improved self- esteem and ability to fend for themselves, and their children, enhanced adherence to ART and PrEP care esteem, improve health seeking behaviours, reduced distress and exposure violence situations including going in search of clients on the streets during curfew hours
Health and livelihoods enhancement for adult female sex workers	314 Adult FSWS 15 CHLEGS established supported	Adult FSWs supported and mentored on establishment and management of PrEP and ART CHLEGS .The CHLEGS have helped boost case-finding, linkages and referrals, stigma reduction and coping adherence, retention in care,
SRHR and HIV Prevention services for Clients and partners of FSWs	422	Partners and clients of FSWs received SRHR and HIV prevention services including HIV, parenting , GBV, Family planning , STIs screening ,



Challenges

- ❖ **Loss of livelihood** for FSWs due to COVID.
- ❖ **Stigma, discrimination and systemic exclusion of FSWs** from funding, social protection programs and opportunities including COVID relief.
- ❖ **Punitive laws and violence**— fueling; victimization, arbitrary arrests, police raiding of sex worker brothels, bribes and extortions by law enforcement officers.

Challenges

- ❖ **Limited or no emergency** shelters for sex workers and the children of sex workers during crisis moments e.g., GBV, after raiding of sex workers' brothels.
- ❖ **Influx of children and adolescents with multiple and intersecting vulnerabilities** in sex work industry due to COVID, yet there are no technical guidelines and SOPs for responsive programming for children and adolescents surviving in the sex work settings.

Challenges

- ❖ **Lack of educational, promotional and behavioral change awareness raising materials** to address the negative impact of criminalization of sex work and other KPs.
- ❖ **Shrinking space and resource envelop for civil society organizing and action** (stringent eligibility requirements and targeted non-renewal, suspension and deregistering of FSWs and human rights oriented CSOs)
- ❖ **Inadequate funding of structural and behavior interventions as compared to medical interventions and commodities for prevention.**

Challenges

- ❖ **Lack of well documented innovative FSW-led models that enhance access to and uptake of Universal Health Care (UHC) services**
- ❖ **Limited or no government commitment and investment in UHC integration** as well as inclusion of all UHC services indicators in the KP tracker
- ❖ **Lack of adequate capacity to support and facilitate communications and feedback platforms;** participate and leverage media opportunities for rural and peri-urban FSWs and other KPs marginalized women and girls.

Recommendations

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- ❖ **Strengthen differentiated community-based prevention interventions** e.g. EPOA, door-to-door testing in hotspots; needle and syringe programmes, as a means to improve identification of HIV-negative sex workers.
- ❖ **Invest in grassroots FSW-led initiatives to strengthen their leadership and resource capacities for their organizations/networks**
- ❖ **Strengthen structural interventions in sex worker response**, including pushing for the review and reform of punitive laws, policies and practices which are key barriers to access to services
- ❖ **Develop and rollout technical guidelines and SOPs for responsive programming for children of sex workers and adolescents surviving in the sex work settings.**
- ❖ **Generate investment case and push for adequate and balanced funding for behavioral, structural interventions**, legal, policy and regulatory reviews to facilitate an enabling environment for access and uptake of responsive prevention services

Recommendations

- ❖ **Develop educational, promotional and behavioral change awareness raising materials** to address the negative impact of criminalization of FSWs and those with intersecting and compounded vulnerabilities.
- ❖ **Invest in research, documentation and scale up** of innovative FSW & other KP-led models/ community structures that enhance access to and uptake of UHC services.
- ❖ **Data collection & analysis**; Ensure adequate quantitative and qualitative standard data is collected and disseminated on population size, HIV incidence, attributable risk and structural risk factors among sex workers and other key populations



PrEP stands for HIV prevention.



PrEP stands for Pre-Exposure Prophylaxis. PrEP can help prevent you from getting HIV if you are exposed to the virus. PrEP is an HIV prevention option that works by taking one pill every day

- People who use PrEP should take the medicine every day and return to their health care provider every month for follow-up and more medication.
 - You are in control of your health.
- Are you ready for PrEP?
STOP HIN. START TAKING PrEP.

Supported by: **AVAC**
Alliance of Women Advocating for Change

It provides a high level of protection against HIV, and is even more effective when combined with condoms and other prevention tools.

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Wadde ndi ku PrEP nkozesa kondomu



Ekkerenda limu buli lunaku likwongera obukuumi eri siriimu

For more information Call toll free 0800100066



Obulumu?



PrEP + CONDOMS
PLAY SURE BE HIV&STIs SURE

If you are HIV Negative, PrEP reduces the risks of HIV Infection. Condoms add more protection against HIV and help prevent other Sexually Transmitted Infections (STIs). Combine these tools to stay healthy and prevent the spread of HIV and other STIs.

STAY SAFE: Call Malaika Call Centre 0800-333177 or visit AWAC Drop in Centre (DIC) in Masaka, Mbarara, Kampala, Iganga, Luwero and Telega for more information.

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Global Advocacy for HIV Prevention

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Twitter: https://twitter.com/awacuganda

omanyi ebikwata ku PrEP nga enkola eyambako okuziyiza akawuka ka mukenenya?



PrEP dagala elimiribwa omuntu yena nga talika kawuka ate nga ali mukatyabaga kokufuna akawuka ka mukenenya.

PrEP alina okukozesebwa wamu ne Kondomu okusobola okutangira okufuna endwadde endala ezekikaba.



Buuzza omusawo ebisingawo ku PrEP



PrEP y'enkola empya ey'okwewala siriimu

Ekkerenda limu buli lunaku likwongera obukuumi eri siriimu

For more information Call toll free 0800100066



Obulumu?



Nfaayo eri Obulumu bwange. Siyosa PrEP



Ekkerenda limu buli lunaku likwongera obukuumi eri siriimu

For more information Call toll free 0800100066



Obulumu?



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Photos during AWAC's Community dialogue addressing the myths misconceptions on other HIV Prevention options- specifically Dapivirine Vaginal Ring



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