

# AWAC TRAINING REPORT ON RISK REDUCTION, COPING AND RESILIENCE MECHANISMS CONDUCTED ON 11/12/2020

# IN RESPONSE TO THE IMPACT OF COVID-19 ON HIV PREVENTION AND PrEP SERVICES FOR FSWs & AGYW IN ISINGIRO DISTRICT –KIKAGATE BORDER



December 2020



Supported by



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### Acknowledgments

We are deeply thankful AVAC their invaluable support both technical and financial, without which this training wouldn't have been executed.

In the same breath, we appreciate the efforts Alliance of Women Advocating for Change team, the community mobilizers, the facilitators for organizing and coordinating the training.

We equally congratulate and appreciate the commitment of the trained sex workers peer leaders upon having successfully completed the training.

We also appreciate the support of the DHO and the CAO Isingiro district who officiated at this training workshop.



#### **Executive Summary**

On 11/12/ 2020, AWAC conducted a one-day training in Isingiro district on risk reduction, coping and resilience mechanisms in response to the impact of COVID19 on HIV prevention and PrEP services in Isingiro. The training attracted 25 FSWs and AGYW from Kikagate border Isingirro district. The training aimed at equipping FSWs and AGYW with risk reduction, coping and resilience enhancement skills in response to COVID 19 impact on HIV prevention services and develop an advocacy brief with key recommendations for the presented and shared areas of concern of sex workers and AGYW in Kikagate border. The techniques and approaches used were; slide presentations, brainstorming, buzzes, FGDs, panel discussions, questions and answer sessions, and experience sharing. The main sessions included: sex workers' risks and vulnerabilities in context of HIV, Human rights and COVID-19; Barriers, challenges and enablers to HIV prevention services access- including PrEP services access and uptake by FSWs and AGYW; adaptive coping and resilience skills: -communication, stress management, conflict resolution, stigma reduction, adherence and psychosocial enhancement support, social mobilization, networking, documentation, reporting and community monitoring; key advocacy issues and strategic mitigation measures.

Among the major **risks and vulnerabilities, and barriers** shared were; Operating in a criminalized environment, rampant violence perpetrated by state and non-state actors, arbitrary arrests and detention, lack of means of livelihoods, starvation, stigma, discrimination and systemic exclusion; low literacy levels, drug stock outs, very limited access s to HIV prevention services such condoms, PrEP, STIs, and Family planning, safe space psychosocial support structures not in existence, lack of comprehensive and responsive services for children of FSWs, high levels of psychological distress and substance use, poor documentation, referral and linkages, networking, lobbying and coordination system. **Challenges encountered** during the training; the FSWs felt 25 participants was a small number, participants had very low levels of literacy, the trainers lacked abridged versions of IEC and BCC materials in form of brochures of the areas trained on.

**Key lessons learned** include; criminalization of sex work fuels violence, stigma, discrimination and systemic exclusion; the burden of mental health challenges, biting poverty, low levels of literacy, commodity stock outs, lack of integrated package of responsive services for FSWs and their children, poor linkages, coordination and a psychosocial support system all constrain access, uptake and retention on treatment and care.; Extreme deprivation, starvation, lack of shelter and psychological distress compromise the abilities of the FSWs and AGYW to exercise risk reduction to live healthy and dignified lives in times of outbreaks.

The Advocacy issues and mitigation measures were: Advocating for; establishment and strengthening of a DiC and CHLEGs; inclusion of sex workers in the National Social Protection System, meaningful involvement of FSWs and AGYW in design, implementation and monitoring of health social economic and emergence programs at all levels, designing and roll out of comprehensive, integrated package of responsive services for FSWs and children of sex workers. Other issues were: Developing SOPs to guide efficient delivery of integrated responsive services to children of FSWs and AGYW surviving in sex workers' settings; integrating literacy, human rights and digital skills in sex workers service delivery, decriminalization of sex work.

In conclusion, the training was well timed and met the purpose for which it was organized.



#### **ACRONYMS**

**AGYW** - Adolescent Girls and Young Women

AIDS - Acquired Immune Deficiency Syndrome

**ART** - Antiretroviral Therapy

**AWAC** - Alliance of Women Advocating for Change

**AVAC** - AIDS Vaccine Advocacy Coalition

BCC - Behavioral Change Communication

**CAO** - Chief Administrative Officer

**CBO** - Community Based Organization

**CDC** - Centre for Disease Control and Prevention

CHLEGs - Community Health and Livelihoods Enhancement Groups

**CSOs** - Civil Society Organizations

**DHO** - District Health Officer

**DiC** - Drop in Center

**DPs** - Development Partners

**FGD** - Focused Group Discussion

**FSWs** - Female Sex workers

**GACs** - Girls Action Clubs

**GBV** - Gender Based Violence

H/C - Health Centre

**HIV** - Human Immunodeficiency Virus

**HTS** - HIV Testing Services

IPs/ - Implementing Partners

**IEC** - Information Education and Communication

**MoH** - Ministry of Health

NGO - Non-Governmental Organization



PEP - Post exposure Prophylaxis

**PLHIV** - People Living with HIV

**PrEP** - Pre –exposure Prophylaxis

**PSS** - Psychosocial Support

PTSD - Post Traumatic Stress Disorder

**PWUID** - People Who Use and Inject Drugs

**SDGs** - Sustainable Development Goals

**SOPs** - Standard Operating Procedures

**SRHR** - Sexual and Reproductive Health Rights

STIs - Sexually Transmitted Infections

**TASO** - The AIDS Support Organization

**TB** - Tuberculosis

**UAC** - Uganda AIDS Commission



#### INTRODUCTION

On 11/12/2020, with financial support from AVAC, AWAC conducted a one-day training in Isingiro district with a focus on the risk reduction, coping and resilience mechanisms in response to the impact of COVID19 on HIV prevention and PrEP services among female sex workers and Adolescent girls and young women in Isingiro district. The training workshop was attended by 25 FSWs and AGYW from Kikagate border Isingiro district.

#### **Objectives**

#### Main objective

To equip FSWs and AGYW with risk reduction, coping and resilience enhancement skills in response to COVID 19 impact on HIV prevention services and develop an advocacy brief with key recommendations for the presented and shared areas of concern of sex workers and AGYW in Kikagate border.

#### Specific objectives

- 1. To equip 25 FSWs and AGYW from Kikagate border Isingiro district with risk reduction, coping and resilience enhancement skills in response to COVID 19 impact on HIV prevention services.
- 2. To develop an advocacy brief with key recommendations for the presented and shared areas of concern during the risk reduction coping and resilience enhancement skills training

#### Approaches and Methodology

The training workshop objectives were achieved using the following techniques and approaches; slide presentations, brainstorming, buzzes, FGDs, panel discussions, questions and answer sessions, and experience sharing.

#### Introductory session

The AWAC Community engagement and Quality Assurance officer gave the welcome remarks. In her remarks, she warmly welcomed the participants, thanked them for having honored the invitation and made it for the training in time. She equally appreciated the DHO for all the support and for having taken time away from his busy schedule to officiate at this training workshop. In closing, she facilitated the process of reviewing and adopting of the training agenda and wished the participants a successful enriching training.

The meeting was opened with a prayer led by Ms. Namuli followed by self-introduction of participants, sharing of expectations and setting of the ground rules. AWAC communications and advocacy officer presented the objectives of the training and invited the DHO Isingiro district to give the opening remarks. In his remarks, the DHO welcomed the sex workers and the AGYW who had travelled from Kikagate border to the training venue and thanked them for having kept time. He also commended AWAC for having extended services for sex workers in the previously neglected and underserved border areas especially Kikagate border. The DHO shared that AWAC activities complement the efforts of the district towards ending AIDS in Isingiro district by 2030 and assured AWAC of the support of the district especially the department of health. The DHO encouraged the participants to continue observing COVID-19 guidelines, reassured the sex workers that the district was aware of their unmet need for PrEP and other HIV prevention services and is working closely with the new IP in the district to ensure services reach them as and when they need them. He also asked



participants to not only pay keen interest in whatever knowledge and skills they will have acquired at the end of the training but also apply and share it with those who had not been privileged to attend. Shortly before declaring the workshop officially open, he wished the participants fruitful and enriching deliberations

#### Overview of AWAC Background, Vision Mission, Objectives and Models

#### **AWAC Overview**

In giving the overview of AWAC Vision, Mission, Objectives and Models, AWAC Communication and Advocacy officer the shared the following;

AWAC is a registered NGO an umbrella network of over 10.000 individual members and 47 grass root female sex worker organizations in 47 districts cutting across the 6 regions of Uganda. Established in 2015 by FSWs to advance health rights, human rights, socio-economic rights & social protection for FSWs and other marginalized women and girls and their children. AWAC core primary constituency includes: FSWs; Women Using/Injecting Drugs; FSWs Living with HIV/AIDS and TB (PLHIV/TB); Female Urban Refugees; FSWs Living with Disability; Children of FSWs and Women Who Use/Inject Drugs; AGYW survivors of violence, torture, exploitation & conflict in peri-urban & rural areas. Our geographical areas of implementation are: slum areas, Islands, landing sites, transit routes, mining, quarrying, plantations, road construction sites and boarder areas in Uganda. AWAC geographic areas of implementation include; Kampala, Wakiso, Mukono, Busia, Tororo, Kabale, Isingiro, Kyotera, Masaka, Rakai, Lyantonde, Mbarara, Kasese, Kabarole, Kyegegwa, Kamwenge, Kyegegwa, Bundibugyo, Mbale, Jinja, Arua, Yumbe, Adjuman, Hoima, Gulu, Nakasongola, Kiryandongo, Masindi, of Kiryandongo, Lira, Arua, Kitgum, Pader, Amuria, Kaberamaido, Moroto, Soroti, Kotido, Nepak, Luwero, Kabongo, Napiripiti, Mityana, Buikwe, Iganga, Bugiri, Namayingo and Kalangala.

#### Vision

An inclusive policy and social environment that enables peri-urban & rural female sex workers and other marginalized women and girls to live free from human rights abuse for healthy and productive lives in Uganda"

#### AWAC's Mission statement

To build a resilient female sex workers' movement that advocate for sustainable integrated health, promotion of human rights, social and economic wellbeing of female sex workers and other marginalized women and girls in Uganda"

#### Strategic Objectives

- 1. To enhance access to integrated universal health care services among female sex workers and other marginalized women and girls.
- 2. To contribute to attainment of Sustainable Development Goals (SDGs)- 17 ,16 ,8,10 .6 ,5 ,4 ,3 ,2 ,1by enhancing social mobilization and promotion of human rights among female sex workers and other marginalized women and girls.
- 3. To strengthen the economic security and social protection of female sex workers and other marginalized women and girls.



- 4. To strengthen a resilient female sex workers' movement to leverage on their capacities to demand for an enabling environment, equitable services and hold duty bearers accountable on existing development programs.
- 5. To strengthen the institutional capacity of AWAC and her network members to effectively deliver the strategic plan

#### **AWAC Innovative models**

- 1. Peer Strengths Footsteps (PSF) Model: This taps into a peer's latent strengths and challenge her to mobilize, lead, mentor, breathe faith and radiate the same competence to those who come to walk in her footsteps. With AWAC's support, these peers evolve from emerging peer leaders to group leaders to CBO leaders who later strengthen other groups to become CBOs.
- 2. The Community Health and Livelihoods Enhancement Groups (CHLEGs) & Drop in Centre (DiC) Model is instrumental in increasing targeted HIV/AIDS testing yield, supporting linkages, adherence, disclosure, index contact tracing as well as reducing stigma and discrimination against Female Sex Workers (FSWs) at individual, community and national levels. This is also a cocktail of health, socio- economic support in one safe space network in the community or hotspot level. They are useful in demand creation for HTS, supporting adherence, index contact tracing, disclosure, retention into care and saving through CoSLAs (Community Saving and Loans associations). The Drop-in Centre: This is a responsive friendly services facility located in the community where female sex workers drop by to relax, share personal stories/experiences access basic health information including PrEP, PEP, Family Planning, and commodities such as HTS, SRH services, condoms, lubricants and ART.
- 3). Community Human rights & Sustainable Development Goals Accelerators (CHuSA); The model seeks to empower grass root Rural and Peri-urban FSWs as Champions of Human Rights & SDGs Acceleration to initiate & implement well-coordinated, innovative rights-based interventions that fast-track SDGs in their respective communities, using the SDG Squeeze Dance concept. The 'Squeeze Dance' evokes visions of partners dancing in perfect synchronization, their bodies moving together every step of the way, in harmony with the music. The "SDGs Squeeze Dance Campaign" through the CHuSAs spreads the vibe of working in unison cross all levels leaving no one behind in quest for hastening of the SDGs. CHuSAs are challenged to contribute to acceleration of 2030 targets including Good Health and Wellbeing, reduced poverty, hunger and inequalities, quality education, peaceful and inclusive societies, sustainable and resilient environment. The above are achieved through the following; mentorship and feminist transformation leadership trainings for emerging & grass root for FSW leaders; National Annual Sex Workers Dialogue (NASWD) and National SDGs Squeeze Dance Campaigns Review Meetings; Safe Space dialogues or inception meetings with strategic stakeholders; research & documentation, policy briefs, developing and disseminating assorted IEC materials. Aware that creating an enabling environment is critical to acceleration of SDGs, priority is equally given to challenging criminalization which fuel stigma, discrimination and human rights violations among female sex workers, sexual partners and third parties; tackle gender inequalities and all forms of genderbased violence; advocate for comprehensive sexuality educations and decriminalization of Sex Work in Uganda.



- 4. *Kitobero Holistic Literacy Programme (KHLIPs) model* target grass root female sex workers to equip them with basic Reading, Writing, arithmetic, human rights, digital literacy, first aid, life skills, journaling, reflection, creative self-express and social mobilization and social mobilization.
- 5) Girls Action Clubs (GACs) are tailored safe spaces where adolescent girls and young women at high risk living in high burden areas such as slums, landing sites, transit routes and boarder areas commune to share challenges, opportunities and positive behavior change practices to reduce health and socio-economic risks and vulnerabilities. In the GACs safe spaces, marginalized AGYW are able to expand their range of choices through socio-economic empowerment schemes including life skills, business startup, life and entrepreneurship, talent development, innovation and creative arts, apprenticeship, leadership and advocacy movement building initiative and human rights trainings. These spaces also provide them with peer led psychosocial support and counseling services.
- 6) The Her-Legacy Initiative: In a bid to strategically sustain and accelerate investments towards fulfilling AWAC's mandate even after donor funding is no more, AWAC established the Her Legacy Fund (HLF) initiative. HLF initiative is aimed at financing the construction and furnishing of AWAC Institute of Holistic Transformation (IHT)—Heritage that will be comprised of a Mental Health Wellness Centre; Economic Empowerment Centre; Research and Innovation Centre of Excellency, facilities for Trainees & Volunteers, Conference/training halls and Shelter for survivors of Gender Based Violence (GBV) in Uganda The initiative sets to champion innovation and to economically empower FSWs to diversify their income, since female sex workers do not have opportunities to access Government social protection benefits such as National Social Security Funds (NSSF)-therefore these savings can help female sex workers cater for their basic needs after retirement. Among the avenues for raising resources to this initiative include; staff contribution, consultancy services, donor contribution, membership fees and Donations both on line and in-kind contributions, Car washing, expos/exhibitions, Dinners and Marathons

#### Main training sessions proceedings and content

The main sessions were as follows:

Sex workers' risks and vulnerabilities in context of HIV, Human rights and COVID-19; Barriers, challenges and enablers to HIV prevention services access- including PrEP services access and uptake by FSWs and AGYW; adaptive coping and resilience skills: -communication, stress management, conflict resolution, stigma reduction, adherence and psychosocial enhancement support, social mobilization, networking, documentation, reporting and community monitoring; key advocacy issues and strategic mitigation measures.

#### The major risks and vulnerabilities, and barriers

Criminalization, violence, economic deprivation, stigma, discrimination and systemic exclusion

The participants shared that operating in a criminalized environment with rampant violence perpetrated by state and non-state actors, economic deprivation, starvation, stigma, discrimination and systemic exclusion negatively impacted on their access, uptake and retention in context of HIV prevention, treatment and care.



The COVID -19 restrictions that caused the shutdown of lodges, bars and hotspots aggravated the stigma and violent attacks on sex workers labelling them as vectors of COVID-19. They were targeted for extortion of sex and money. Many sex workers were evicted from the lodges and ended up with no means of survival, no food, no shelter and no access to HIV treatment and preventive care. One sex workers were forced to accommodate 10 other sex workers in her small room where they could. In coping with the situation sex workers risked by going to meet clients in the bush, often without condoms. In the process some ended up getting raped, used without pay, arrested and beaten up, getting STIs and getting unwanted pregnancies. Five of the trainees were still grappling with the fact that they had gotten pregnant but couldn't account for the men who were responsible.

The participants also complained of having been excluded during relief food distribution on grounds that they are not deserving stable residents yet face attacks from security for sitting back with folded arms and leaving their children in the grip of starvation.

Here is what one of the participants shared on systemic exclusion, starvation and attacks from authorities

One evening I went to the bush hoping I would get one of these truck drivers to give me something to buy porridge for my four starving children, unfortunately I found this man from the neighborhood and we negotiated four UGX 4000. When I asked for my money after offering my sexual services, the man checked all the pockets which had holes and then, he broke the cold news that he actually didn't have any money with him. I felt like strangling him, of course I couldn't. He was huge and visibly strong. He promised to send the money by mobile money. I walked back with my head down with a deep wound on my heart. I had given in to live sex because I didn't have a condom and ended up not being paid. I struggled hiding the tears which had started welling up in my eyes as I approached my room. I could hear my children crying from a distance.

As soon as I arrived, the security picked me accusing me of child neglect and failing to provide for the children. I explained my situation how I had been excluded from accessing relief food. But they could not listen. They slapped, kicked and beat me up. Took me to customs. I spent the night in an overcrowded police cell with many other women. I was sexually harassed by a police officer who told me to mobilize some small money for the other officers that as for him, he had been sorted for an in-kind payment. In the morning my friends came and paid UG X 20000 for my release.

A sex worker from Kikagate border

#### Other risks, vulnerabilities and challenges shared include;

Low literacy levels, drug stock outs, very limited access s to HIV prevention services such condoms, PrEP, STIs, and Family planning, safe space psychosocial support structures not in existence, lack of comprehensive and responsive services for children of FSWs, high levels of psychological distress and substance use, poor documentation, referral and linkages, networking, lobbying and coordination system.



Here is what one FSW shared about access to shelter, food and HIV prevention services

I am a Congolese FSW refugee operating in Kikagate border. My landlord chased me out of the house because I could no longer afford the rent of UG X 50000 per month. Currently, I have to struggle alone to fend for my 8 months old baby girl because I cannot access the father who was a trucker driver and arrested in Tanzania. One of the local leaders introduced me to a group of sex workers who are accommodating me in one room. Sometimes I look at my baby girl starving and break down in tears. She needs milk, food, clothing and decent accommodation. But the lodges are closed. No customers, directives. If I get a client, I just take him in the bush which is extremely risky. Anytime I can be arrested or struck by a venomous snake. Also I was initiated on PrEP in January 2020 by AIC and given for two months, but now I have taken five months without taking PrEP and yet I sleep with some of the clients who don't want to use condoms in the bush and even there is no condoms at the border, lubricants, no HIV testing services and STIs screening and treatment.

Refugee sex worker operating in Isingiro district

In aptive coping sex workers and AGYW have basically resorted to substance use, fighting with clients and occasionally among themselves. Some sex workers have been able to cope by utilizing the peer support network, utilizing social media platforms and phone calls to share their challenges on WhatsApp, and AWAC Malaika toll-free line. They shared that AWAC was able to mobilize food and network with leaders and other organizations to ensure they access services. Of recent, AWAC coordinated with TASO which organized testing, refills and initiation of sex workers on PrEP.

#### Challenges encountered during the training;

The FSWs felt 25 participants was a small number.

Participants had very low levels of literacy.

The trainers lacked abridged versions of IEC and BCC materials in form of brochures of the areas trained on.

The participants also felt duration of the training was very short.

#### Key lessons learned include;

• Criminalization of sex work fuels violence, stigma, discrimination and systemic exclusion.



- The burden of mental health challenges, biting poverty, low levels of literacy, commodity stock outs, lack of integrated package of responsive services for FSWs and their children, poor linkages, coordination and a psychosocial support system all constrain access, uptake and retention on treatment and care.
- Extreme deprivation, starvation, lack of shelter and psychological distress compromise the abilities of the FSWs and AGYW to exercise risk reduction to live healthy and dignified lives in times of outbreaks.

#### The Advocacy issues and mitigation measures were:

- Advocating for; establishment and strengthening of a DiC and CHLEGs-
- Inclusion of sex workers in the National Social Protection System
- Meaningful involvement of FSWs and AGYW in design, implementation and monitoring of health, social, economic and emergence programs at all levels,
- Designing and roll out of comprehensive, integrated package of responsive services for FSWs and children of sex workers.
- Developing SOPs to guide efficient delivery of integrated responsive services to children of FSWs and AGYW surviving in sex worker's settings;
- Integrating literacy, human rights and digital skills in sex workers service delivery, decriminalization
  of sex work.

#### Closing remarks from the CAO

In his remarks, the appreciated and congratulated the participants for having successful completed the training and tasked them to share what they learned in their respective hotspots. He thanked AWAC for having chosen Isingiro district and pledged the support of the district. Additionally, the CAO promised to support the sex workers to benefit from the government programs like the emyoga to boost their livelihoods. Shortly before declaring the training workshop officially closed CAO urged sex workers to continue keeping safe, and maintain discipline and wished them a Merry Christmas and Happy new year.

#### Conclusion

Sex workers and Adolescent girls and young women at border districts grapple with compounding and intersecting risks and vulnerabilities aggravated by the criminalized environment in which they operate. The rampant violence, stigma, discrimination, economic deprivation, low levels of literacy, systemic exclusion, high levels of psychological distress, commodity stock outs, lack of a robust safe space and psycho social support system, poor coordination and linkage mechanisms, lack of a comprehensive range of responsive health, social and economic services targeting sex workers and their children constrain access, uptake and retention on treatment, and care.

The training enabled the participants to share adaptive coping risk reduction and resilience skills such as basic stress management, communication, social mobilization, negotiation, conflict management, documentation, monitoring and reporting strengthening linkages and referral, networking and lobbying.



The training further yielded the following strategic advocacy asks; Establishment and strengthening of a DiC and CHLEGs-, inclusion of sex workers in the National Social Protection System, meaningful involvement of FSWs and AGYW in design, implementation and monitoring of health social economic and emergence programs at all levels, designing and roll out of comprehensive, integrated package of responsive services for FSWs and children of sex workers.

Other issues were: Developing SOPs to guide efficient delivery of integrated responsive services to children of FSWs and AGYW surviving in sex worker's settings; integrating literacy, human rights and digital skills in sex workers service delivery, decriminalization of sex work.

In the final analysis, the training was well timed and met the purpose for which it was organized.

#### Appendix A training timetable

TRAINING REPORT ON RISK REDUCTION, COPING AND RESILIENCE MECHANISMS CONDUCTED ON 11/12/2020 IN RESPONSE TO THE IMPACT OF COVID-19 ON HIV PREVENTION AND PrEP SERVICES FOR FSWs & AGYW IN ISINGIRO DISTRICT –KIKAGATE BORDER

Day One of the Training				
Time	Activity Details	Person(s) Responsible		
08:00 AM- 8:20 AM	Arrival and Registration of Participants	Aidah:		
08:20 AM - 08:25 AM	Welcome Remarks	Jenifer		
08:25 AM - 08:30 AM	Opening prayer	volunteer		
08:30 AM - 10:00 AM	<ul> <li>Self-introductions</li> <li>Participants Expectations</li> <li>Suggesting Ground Rules and Standards</li> <li>Objectives and Snapshot of the training</li> </ul>	Rio		
10:00 AM - 10:20 AM	Tea Break	All		
10:20 AM – 10:30 AM	Opening remarks	DHO		
10:30 AM- 10:50 AM	Overview AWAC background, Vision , Mission, strategic objectives & models	Facilitator – Rio		
10:50 AM -11:40 AM	<ul> <li>Sex workers' risks and vulnerabilities in context of HIV, Human rights and COVID-19;</li> <li>Barriers, challenges and enablers to HIV prevention services access- including PrEP services access and uptake by FSWs and AGYW</li> </ul>	Group work- Mukwaya		
11:40 AM- 12: 30 PM	; Adaptive coping and resilience skills	Jenifer		



12:30 -PM 1:00 PM	Plenary presentations	Mukwaya
01:00 PM - 02:00 PM	Lunch Break	All
02:00 PM – 3:30 PM	Key advocacy issues, Strategic mitigation measures and way forward	Rio
3:30 PM- 3:50 PM	Closing Remarks	CAO
3:50 PM- 4:10 PM	Training evaluation	Mukwaya
4:10 PM- 4:20PM	Administrative and welfare communication	Aidah
4:20 PM-	Closure and Departure	All

# Photo Galary;













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