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THE ESTABLISHMENT OF AWAC CHLEGS AND DiC, A LAND MARK IN FEMALE SEX WORKERS' FRIENDLY SERVICES DELIVERY:

The saying that new seasons come with beautiful things came true for the female sex workers' fraternity in Uganda on **9th January 2018**, when they witnessed the opening of AWAC Drop in Centre (DiC) and roll out of female sex workers Community Health and Livelihoods Enhancement Groups (CHLEGs) Models of service delivery. The DiC is housed at AWAC secretariat 1st Floor MW building next to Gapco petrol station Central Division, KCCA. Many could hardly hold back their sentiments including AWAC Executive Director -Ms. Kyomya Macklean who had this to say;

" If there is one thing the female sex workers' (FSWs) fraternity in Uganda has always craved for like the dry ground craves for water, its attaining a responsive friendly services sanctuary of their own, where female sex workers drop by to ; relax, grow in self-worth and dignity through meaningful involvement, and utilize basic health information, commodities, socio-economic, recreational and health services. The opening of AWAC DiC with support from Baylor College of Medicine Children Foundation–Uganda (Baylor Uganda) – early Jan 2018 was not only a land mark in the ending of the above craving, but also beautifully re-shaped the terrain of the female sex workers' contribution to the acceleration of the 90. 90. 90 targets using the community facility framework".



In addition to availing IEC materials, condoms and lubricants, AWAC DiC provides the following; HIV testing, treatment of sexually transmitted infections, encouraging ART adherence, disclosure, family planning, gender based violence, nutrition and risk reduction counseling to female sex workers, their sexual partners and their children. The service delivery units under this DiC include; the Counseling and Lab areas, edutainment and recreation unit- furnished with board games which include; *Ludo, Snakes and Ladders, Mweso and Chess*, a pool table and a TV screen, the clients' waiting area, the clinicians' examination room, the dispensing unit, the data management unit and the training area.



Achievements

Here is what AWAC DiC Manager and Medical Clinical Officer Mr. Mukiibi Grace Nicholas reported on the progress of AWAC DiC. *"Since the opening of this DiC in January 2018 to 31st March 2018, a total of 892 female sex workers were reached with comprehensive HIV prevention services; of these, 513 were tested for HIV and 96 were newly identified with HIV and linked to care while 71 of those newly diagnosed with HIV have been started on ART."*

Responding to how AWAC team has been able to register such a tremendous progress, the DiC manager said; *"It is important to note that behind the bringing forth of the above mentioned fruits of the DiC is a team of highly committed, creative, passionate and friendly services providers operating from within the DiC setting and in the sex workers hotspots utilizing a diversity of models and service delivery structures. These range from female sex workers peer leaders who mobilize sex workers for services and link them to care. Community Health and Livelihoods enhancement groups (CHLEGs) are safe space networks where sex workers living with HIV commune to save, accumulate savings and lend these savings to eligible members in times of health crises or upon spotting of a strategic entrepreneurship opportunity. CHLEGs members also support one another regarding; demand creation, tracing index client contacts, ART adherence, and disclosure, retention and stigma reduction. Other members of the implementation team include; the data team, social and economic empowerment officer, the linkage and referral supervisor among others. It's basically team work."*

Here is how one CHLEG member described her role in mobilizing her peers for HIV testing, linking them to care and supporting adherence and retaining her in care;

"During one of our CHLEG meetings, I was assigned to sensitize and mobilize the 3 youngish female sex workers who had newly relocated to our hotspot for HIV testing. On several occasions they kept on ignoring and avoiding me but I dint give up on them. When I shared with one of my CHLEGs members, she asked me what they loved most. This is when I remembered that one of them loves pool table and gets most of her clients at the pool table. When I met them the following day, I expressed my admiration for them as experts in playing pool table and asked one of them whether she was in position to teach me. She smiled and said she would be glad to do so. I proposed a safe place where I would be able to learn without interruption. She accepted to come with her friends and I brought them to AWAC DiC. We were welcomed and ushered to the recreation unit where we played pool table. Everyone complemented her expertise in playing pool table. They received a tour of the DiC and a highlight of the services provided. They all loved the place and requested for HIV testing. Upon testing, the pool table expert was diagnosed with HIV. She accepted to go on ART only if she could access ART services at AWAC DiC not anywhere else. I pledged to physically escort her to a public health facility to get linked in care. With facilitation from AWAC we jumped on a boda to a health facility. As I speak she is enrolled in care and taking her ARVs well. She has even joined CHLEGs. It feels great being a sister's keeper contributing to the acceleration of the 90.90.90 targets among my fellow sex workers."

AWAC DiC equally provides learning opportunities for other stakeholders in key population programing to explore AWAC's differentiated services delivery approaches. Here is what Dr. Josen Kiggundu- Ministry of Health DSDM – Technical Advisor noted about CHLEGs and DiCs model during MoH DSDM Technical working group learning visit to AWAC DiC on 16/03/2018;

"As Ministry of Health DSDM Technical Working Group, we are glad to know that AWAC is making great contribution to the acceleration of the 90:90:90 targets using the DiC and CHLEGs models. This is an amazing innovation- the CHLEGs provide a strong demand creation, linkage and psycho-social support system whose outcomes need to be optimized by provision of ART for clients at AWAC DiC. The use of CHLEGs as community drug distribution points ought to be explored as well."

Alliance of Women Advocating for Change (AWAC) has since inception in 2015 by the champions of the female sex workers' (FSWs) movement in Uganda executed interventions geared towards strengthening a unified national and sustainable (FSWs) movement calling for an enabling environment and scale up of access to health, social and economic wellbeing of female sex workers and adolescent girls and young women at high risk in Uganda.

AWAC intends to scale up CHLEGs and DiC models in her 26 districts of operation.

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