10 Years ANNIVERSARY

2024

ANNUAL REPORT

ALLIANCE OF WOMEN ADVOCATING FOR CHANGE

www.awacuganda.org

2024

ANNUAL REPORT

EVICTED BUT NOT DEMINISHED

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AWAC Board Chair

In my first year serving as Board Chair of AWAC, I am thrilled to reflect on the incredible journey and impact the organization has made as a powerful conduit of hope and transformation to sex workers and other marginalized women at the society's periphery. Embracing the responsibilities of this leadership role has been both an honor and a fulfilling experience. Together with the Board, I have been committed to providing strategic direction and governance oversight to ensure AWAC remains grounded in its mission and values. I am proud to share that, over the past reporting period, the institution has recorded significant successes—milestones that affirm our collective resolve and resilience. It is with great pleasure that I introduce the 2024 Annual Report, which highlights our organization's unwavering commitment to promoting the rights and well-being of marginalized women and femmes in Uganda.

This year marked significant progress in creating an enabling environment for female sex workers (FSWs) to demand and access equitable healthcare and social-economic justice. In 2024, AWAC achieved a significant milestone through expanding its project portifolio and coverage wings with the launch of the Co-CREATE Innovations and Solutions With the Community Project in Hoima City, supported by UNAIDS Uganda to address the growing vulnerabilities of sex workers and other key populations amidst rapid urbanization and oil exploration in the Bunyoro region. Our commitment to holistic healthcare was also strengthened through our synergies and participation in community health and legal aid camps in partnership with Global Fund for Women grantees. These initiatives promoted sexual and reproductive health rights while providing on-site health and legal support. We further enhanced safe pro-choice services through refresher capacity-building engagements that focused on SRHR challenges affecting marginalized women.

Additionally, AWAC supported grassroots organizations like Community Volunteers for Youth Empowerment (COVYE) through collaboration and knowledge exchange, while also working with the Ministry of Health, Infectious Diseases Institute, Reach Out Mbuya and other partners to evaluate and improve our referral and linkage systems. We marked key international observances such as The International Women's Day and International Sex Workers' Day to spotlight the struggles of marginalized women, and our 2024 National Annual Sex Workers' Dialogue in Hoima, which created a space for advocacy and engagement.

On the continental front, AWAC secured observer status with the African Commission on Human and People's Rights, providing a powerful platform to elevate the lived experiences and challenges of grassroots marginalized women.

Amid the wins of 2024, AWAC also encountered significant challenges that tested the strength of our leadership and strategic resilience. One of the most pressing was the forced eviction from the institution's former premises, a direct consequence of the enactment of the Anti-Homosexuality Act. This disruption posed a major threat to AWAC's ability to continue serving marginalized women effectively.

We are deeply grateful for the unwavering support of the board team, the grassroots membership, and the organization's management, whose collective resilience ensured the continuity of the AWAC's mission. Through their efforts, AWAC successfully relocated its Drop-In Centre to a new location, allowing it to maintain critical services. However, our work is far from over. We are currently seeking support for our Humble Campaign, which aims to establish the AWAC Mini Hub of Holistic Transformation—a vital space for empowerment, healing, and dignity. We kindly appeal for your solidarity and support to make this vision a reality.

I am proud of AWAC's 2024 achievements. Our efforts have empowered marginalized communities, expanded access to essential services, and advanced policy advocacy. I thank our dedicated staff, partners, and funders for their unwavering support. Together, we continue making a meaningful difference in the lives of sex workers, women who use drugs and other marginalized women in Uganda.

Sincerely,
Immaculate AWAC Board Chair

Executive Director

The year 2024 marked the first phase of implementing AWAC's 2024–2028 Strategic Plan. Despite persistent financial constraints—particularly following the forced eviction of our Kampala Drop-In Centre due to the Anti-Homosexuality Act—we navigated the crisis with resilience and innovation. The Mpox outbreak tested our public health preparedness, requiring swift grassroots-led responses.

Through friends, partners, and grassroots members, we managed to secure $150,000 for constructing and remodeling our Kampala DiC, ensuring continued service for high-risk populations. Additionally, we expanded our Strategic partnerships, including new collaborations with Faith based institutions, such as the Act Church of Sweden, and Philanthropic agencies, such as the Amplify Change, Mama Network, and others to strengthen our institutional and service delivery capacity.

We are glad to and launched the fundraising for a permanent Mini-Hub of Holistic Transformation that will offer integrated SRHR, harm reduction, mental health and economic empowerment related services. The organization further strengthened its legitimate subnational existence in some of the districts and government institutions. This included signing seven MoUs with district Local governments and obtaining a NEMA Certificate for its Community Centre of Excellence. We also introduced robust policies on fraud, ethics, safeguarding, and risk management.

In 2024, AWAC marked significant growth and impact across multiple fronts. The organization strengthened its structure by updating HR systems and hiring a Deputy Executive Director, while prioritizing staff development—supporting four team members in pursuing higher education, including one in a doctoral program. Our Drop-in Centres served over 9,000 individuals, expanded collaborations with 14 health facilities, and broadened services such as cervical cancer screening and Mpox response. Economic empowerment initiatives benefited 51 adolescent girls, young women, and sex workers with disabilities through CHLEGs and savings groups. AWAC's excellence was recognized by CDC Uganda and CDC Atlanta. We also launched the Co-CREATE project in Bunyoro and supported the Ministry of Health's Mpox response. At the 5th People's Health Assembly in Argentina, AWAC co-hosted a side event focused on reproductive justice in oppressive contexts. Through the MakeWay, DiCRA, and We Lead programs, AWAC advanced community-led advocacy, research, and SRHR programming—particularly benefiting 30 refugees and 45 youths—reinforcing the organization's efforts in promoting equity, empowerment, and grassroots impact. Specifically, under the Make Way Programme, AWAC empowered young girls affected by displacement in Terego and Madi Okollo districts by improving their access to SRHR services and economic opportunities, while also organizing a media café to amplify the voices of human rights defenders and highlight the intersections of gender, human rights, and climate change.

In solidarity,
Kyomya Macklean
Executive Director, AWAC

Acknowledgements

Our Donors and Partners

In 2024, we witnessed and experienced significant accomplishments, which were made possible by the heavy support and commitment of our Donors and Partners in both humanitarian development settings we have operated. We are grateful for their excellent support and remain devoted to advancing the Female Sex Workers' (FSW) Movement in Uganda. Our commitment is focused on advocating for universal healthcare, human rights, and socioeconomic justice for female sex workers with multiple and intersecting vulnerabilities across Uganda.

We extend our sincere appreciation to the Donors and development Partners who played a crucial role in supporting our initiatives throughout the year. Your contributions have been instrumental in AWAC's progress and success. Special appreciation to the Donors and Partners below, with whom we have journeyed 2023 milestones (in their alphabetical order); .

- Akina Mama wa Africa
- African Women Development Fund (AWDF)
- American Jewish World Service (AJWS)
- Centre for Disease Control (CDC)
- Creating Resources through Empowerment and Action (CREA)
- East Africa Sexual Health and Rights Initiative (UHAI EASHRI)
- Initiative Marianne/ Embassy of France to Uganda
- Grassroots FSW-Led organizations and groups
- Global Fund for Women (GFW)
- Infectious Disease Institute (IDI)
- Joint Medical Stores (JMS)
- Makerere University Joint Aids Program (MJAP)
- Makerere School of Public Health
- Medical Colleague of Wisconsin (MCW)
- PEPFAR
- People's Health Movement
- Reach Out Mbuya (ROM)
- SAAF
- SRHR Alliance Uganda
- TASO
- Wemos Foundation
- Women Probono Initiative (WPI)
- World Health Organization –Uganda
- UNAIDS
- Uganda Protestant Medical Bureau (UPMB)

Our Networks and Collaborations

Throughout 2023, we made substantial advances in our core strategic areas, enabling us to achieve significant milestones. These achievements were made possible through the collaborative efforts and constructive relationships with a diverse range of partners, including individuals, organizations, platforms,

coalitions, and consortia. We are truly excited about these partnerships and collaborations, as they have been essential to our progress.
Our partnerships and synergies have been key in driving our work forward, and we are grateful for the support and collaboration from all our partners. We look forward to continuing our joint efforts to further our mission and create positive impact for female sex workers in Uganda and beyond. Some of these networks and collaborations include;

- Cervical Cancer Consortium
- Community Actors for HIV Plus (CAHIV Plus) through the Community Ebola Response and preparedness Programme
- Count Me In under CREA
- Coalition to Stop Maternal Mortility Due to Unsafe Abortion (CSMMUA)
- MakeWay Programme
- Uganda Key Population Consortium
- We Lead Programme

Government Institutions and Departments

During the year of 2022, we joined forces with and received diverse support from a number of Government Institutions --which was one of the enablers for AWAC to have a successful year. These are;

- The Ministry of Health, Uganda
- The Ministry of Gender, Labour and Social Development
- Health Facilities (Kisenyi Health Centre IV, Kiswa Health Centre III, Kawala Health Centre III, and Kitebi Health Centre III)

Wakiso District

- Wakiso HCIV, TASO Entebbe, Entebbe Grade B.

Kampala District

- Aids Information Centre, Kiswa Health Centre III, Kitebi Health Centre III, Kisenyi Health Centre IV, Kawala Health Centre III, Mengo Hospital, ISS Mulago, Kiruddu CDC, MARP Mulago

District Kyotera

- Kalisizo Hospital, Kasali Health Centre III, Kabira Health Centre III, Kakuto HealthCentre IV, Mutukula Health Centre III, Kasasa Health Centre III, Kire Health Centre III, Kasensero, Health Centre II.

Rakai Distict.

- Lwanda Health Centre III, Rakai Hospital, Kimuli Health Centre III, Buyamba Health Centre
- III, Rwamagwa Health Centre III, Kakyera Health Centre III, Kibale Health Centre II, Kitanda, Health Centre III t

Local Governments In all AWAC's 57 Districts of operation where we get support from RDCs, CAOs, LCVs, Mayors, DCDOs,DHOs, Gender departments, HIV departments, among others

List of **Acronyms**

AGHA	Action Group for Health, Human Rights and HIV/AIDS
AGYW	Adolescent Girls and Young Women
AIC	AIDS Information Centre
AIDS	Acquired Immune Deficiency Syndrome
AJWS	American Jewish World Services.
ART	Antiretroviral Therapy
AMwA	Akina Mama wa Africa
AWAC	Alliance of Women Advocating for Change
AWDF	African Women Development Fund
AVAC	AIDS Vaccine Advocacy Coalition
CDC	Centre for Disease Control and Prevention
CDDPS	Community Drug Distribution Points
CEHURD	Centre for Health, Human Rights and Development
CFCS	Changing Faces, Changing Spaces
CHLEGs	Community Health and Livelihoods Enhancement Groups
CCLADS	Community Client ART Led Deliveries
CAHIVPLus	Community Actors for HIV Plus
CxCa	Cervical Cancer
CSOs	Civil Society Organizations
CSMMUA	Coalition to Stop Maternal Mortality due to Unsafe Abortion
DiC	Drop in Center
DiCRA	District Community Rights Advocates
DMSD	Differentiated Models of Service Delivery
DPs	Development Partners
EDWA	Empowered at Dusk Women Association
EVAW/G	Ending Violence against Women and Girls
FAL	Functional Adult Literacy
FSWs	Female Sex workers
GACs	Girls Action Clubs
GBV	Gender Based Violence
GCWR	Golden Centre for Women Rights.
GEWE	Gender Equality and Women Empowerment
H/C	Health Centre
HIV	Human Immunodeficiency Virus
HR	Human Rights
HTS	HIV Testing Services
IDI	Infectious Diseases Institute
IOM	International Organization for Migration
JAR	Joint AIDS Review

IPs/	Implementing Partners
IEC	Information Education and Communication
LBQ	Lesbians, Bisexual and Queer
MoH	Ministry of Health
NAFOPHANU	National Forum of People Living With HIV/AIDS Networks in Uganda
NASWD	National Annual Sex Workers' Dialogue
NSP	Needle and Syringe Exchange programming
OVC	Orphans and Vulnerable Children
PEP	Post exposure Prophylaxis
PEPFAR	Presidential Emergence Fund for AIDS Relief
PLHIV	People Living With HIV
PrEP	Pre –exposure Prophylaxis
PSS	Psychosocial Support
PTSD	Post Traumatic Stress Disorder
PVYA	Platform for Vulnerable Youth and Adults
PWUID	People Who Use and Inject Drugs
RHSP	Rakai Health Science Program
SDGs	Sustainable Development Goals
SNS	Social network Strategy
SOB	Sexual Offenses Bill
SOPs	Standard Operating Procedures
SRHR	Sexual and Reproductive Health Rights
STIs	Sexually Transmitted Infections
TB	Tuberculosis
TWG	Technical Working Group
UAC	Uganda AIDS Commission
UGANET	Uganda Network on Law Ethics and HIV/AIDS
UKPC	Uganda Key Populations Consortium
UNAIDS	The Joint United Nations Programme on HIV and AIDS
URSB	Uganda Registration Services Bureau
UPF	Uganda Police Force

1.0 ABOUT **AWAC**

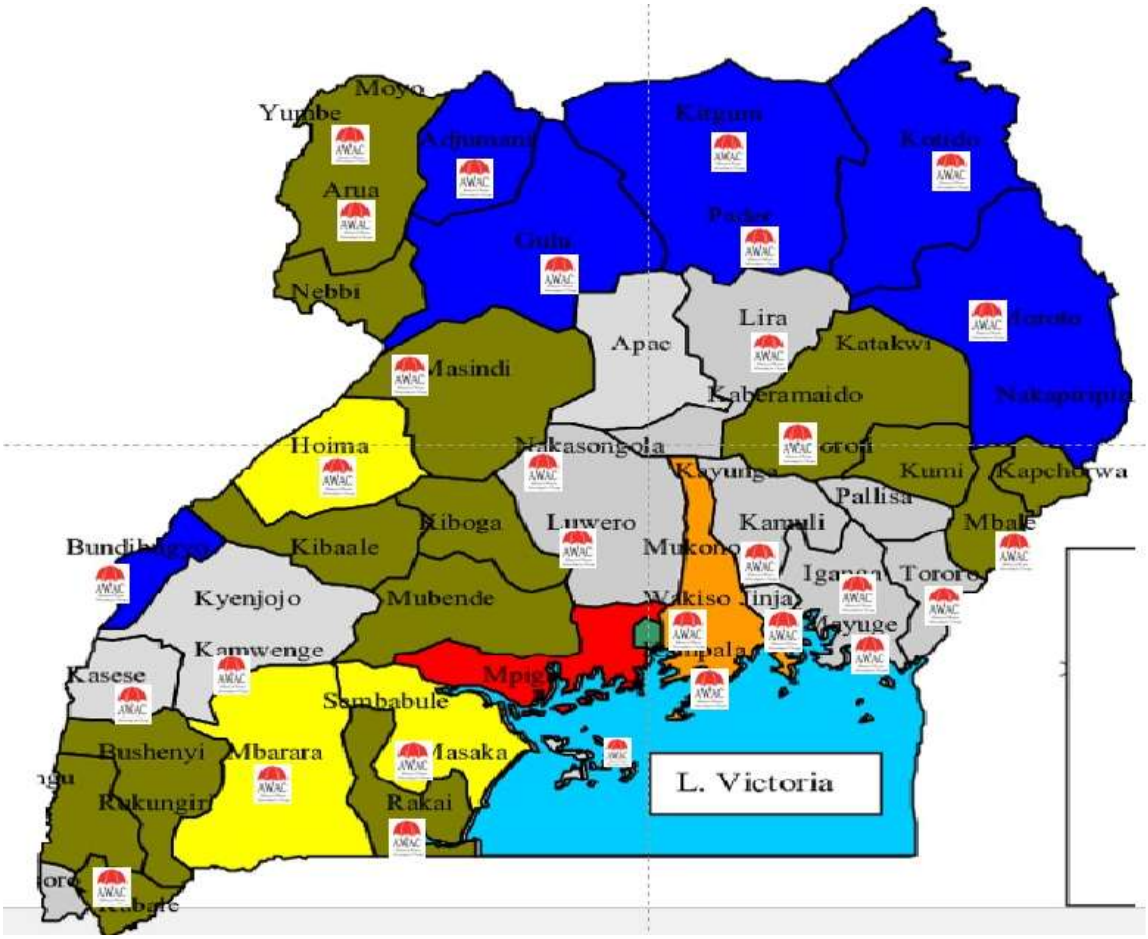
The Alliance of Women Advocating for Change (AWAC) is an SRHR umbrella network of feminist grassroots emerging Female Sex Worker (FSW) led organizations established in 2015 by FSWs, to support collective organizing and strengthen a resilient movement of FSWs that advocates for sustainable integrated universal health care, promotion of human rights and social protection, economic justice for FSWs including those with intersecting vulnerabilities in Uganda. In the past 5 years AWAC has reached over 32,000 Female Sex Workers (FSWs) and those with multiple, intersecting and compounded vulnerabilities such as: FSWs with disabilities; FSWs Using or Injecting drugs; Indigenous FSWs in hard-to-reach and hard-to-leave areas; Refugee and Migrant FSWs in and out of settlement; FSWs living with HIV/AIDS; Elderly/Aging FSWs; Adolescents and Young Women engaging in sexwork and surviving in sex work setting and Children of FSWs in Uganda.

AWAC has a robust programming through its Membership in the 57 districts across the 6 regions of Uganda with the possibility of expansion to other districts of Uganda; as the FSWs network and movement building keeps deepening and scaling up over the years. Regional & International Engagements: AWAC also engages with regional and international processes and mechanism at the East African Community (EAC) Region, Pan-African, and Global levels.

Our target population constituents include; Female Sex Workers (FSWs) in their general description, FSW with Disabilities, FSWs who Use or Inject Drugs, Senior/Elderly/Aging FSWs, Refugee and Migrant FSWs, Adolescent Girls & Young Women (AGYW) engaged in Sex Work, FSWs living with HIV, Indigenous FSWs, including those in hard-to-reach settings e.g. FSWs living on islands/landing sites, FSWs in transport corridors/stop-over transit towns and cities, FSWs along Border Towns/Points, FSWs in new Cities and Municipalities, FSWs in the Mining Communities and Oil Areas/Districts/Towns

Our Core Values:

- Diversity, Intersectionality, and Inclusion of FSWs
- Transparency, Accountability, and Integrity
- Professionalism
- Innovation, Excellence and Creativity
- Partnership and Cooperation
- Teamwork and Mutual Respect
- Wellness, Fun and Love



By end of 2024, the organization had a reach of 57 districts, some of these include;
Kampala, Wakiso, Mukono, Busia, Terego,Tororo, Kabale, Isingiro, Kyotera, Masaka, Rakai, Lyantonde, Mbarara, Kasese, Kabarole, Kyegegwa, Kamwenge, Kyegegwa, Bundibugyo, Mbale, Jinja, Arua, Yumbe, Adjuman, Hoima, Gulu, Nakasongola, Kiryandongo, Masindi, Kiryandongo, Lira, Arua, Kitgum, Pader, Amuria, Kaberamaido, Moroto, Soroti, Kotido, Nepak, Luwero, Kabongo, Napiripiti, Mityana, Buikwe, Iganga, Bugiri, Namayingo, Mubende, Kassanda, Madi Okollo, and Kalangala.

Institutional Objectives

1. To create an enabling environment for FSWs to demand and access equitable universal healthcare and social-economic justice in Uganda.
2. To generate evidence for programming, resourcing, and advocacy on FSW priorities in Uganda.
3. To build a strong and resilient FSW movement to exercise and realize their bodily autonomy, choices and integrity.
4. To contribute to the attainment of SDGs by strengthening the capacities of grassroot members to develop innovative, intersectional interventions, programs and campaigns.
5. To build a strong, vibrant, and sustainable institution.

Domains **of** Change

1. Domain of Change 1: Network and Movement Building

2. Domain of Change 2: Access to Services

3. Domain of Change 3: Advocacy, Lobbying and Influence Policy Development

4. Domain of Change 4: Research and Knowledge Management

5. Domain of Change 5: Capacity Strengthening on SDGs, Skills Development, Economic Empowerment, and Income Generation

6. Institutional Priority: AWAC Organisational Development and Sustainability

Numbers achieved in 2024

2024 in Numbers

4609 — 4609 FSWs and AGYW in sex work settings Enrolled on *Pre –exposure Prophylaxis (PrEP)* in Kampala, Wakiso, Masaka, Mubende, Kyotera. This number increased by ***588*** FSWs served from 4021 in 2023.

813 — 813 FSWs and AGYW in sex work settings supported to be initiated and retained on Antiretroviral Therapy in Kampala, Wakiso, Masaka, Mubende, Kyotera. This number grew by 89 from 724 in 2023. Whilst, this was a increased trend of growth compared to an increase from the reference reporting period of 2023 to 2024 which grew by 51 clients. This was due to the intensified prevention mechanisms and the Undetectable equals to Untransimittable strategies used such as; the innovative community models for strengthening ART adherence such as the CCLADs and CDDPs.
We are happy to report that **67 clients were brought back to care** for ART and **677 for PrEP.**

848 — 848 of our community members who had faced Physical, sexual and emotional violence were Provided with basic counselling services (this number reduced from 1091 in 2023). This is attributed to the intensified social cohesion dialogues that have been held been Female sex workers and Norm shift actors like local leaders, brothel managers etc.

94 — 94 of our community members were provided with Post Exposure Prophylaxis

234 — 234 of our community members were provided with emergency contraception services

807 — 807 of our grassroots community members were availed with psychosocial support services. This was above the year 2023 figure of 705 clients by 102 clients served due to our expanded psycho social support services through the use our Malaika toll-free helpline services.

2024 in Numbers

88 — 88 recipients of care received Viral Load Bleeding services. This was among the mechanisms that were established and intensified in the DiC department, to identify the clients with poor ART drug adherence.

87 — 87 Children of FSWs were tested for HIV. 02 Children of FSWs tested positive.

145678 — 145678 Pacs of condoms, and 39578 Sackets of Lubricants were distributed, thereby saving over 1640 FSWs and 497 AGYW in sex work contexts who would have contracted HIV.

48 — Continued to strengthen and following up the existing Community Drug Distribution Points (CDDPs) with 32 members and 3 Community Client Led Art Delivery (CCLADs) with 48 members. This has improved ART adherence and retention for 81 recipients of care.

4 — Participated in 4 **global platforms** where we presented our Differentiated Models of Service Delivery, and advocacy. These engagements included, People's Health Assembly Four (PHA4) Argentina, CMI One Learning and experience sharing in Napal, GMI conference in Ethopia (Pre-CSW 68 engagements), and We Lead learning workshop in Mozambique.

20 — 20 Female Sex Workers from Bugiri, Jinja, Kampala, Wakiso, Busia, Tororo, Kyotera, and Masaka went through our refresher trainings as expert clients in providing community based comprehensive SRHR services using the accompaniment model.

523 — 523 Female sex workers were reached with comprehensive SRHR services using the accompaniment model. Important to note that, this number increased from 419 in 2023 to 523 in 2024.

515 — 515 rights holders were engaged during the 16 Days of activism with an aim to create -awareness on the forms of violence experienced by Female Sex Worker in their diversities.

2024 in Numbers

243 — 243 AGYW during the year were equipped with economic livelihood skills, and the SRHR/HIV information sharing sessions. These included 29 Female sex workers living with disabilities.

4 — Participated in 4 global platforms where we presented our Differentiated Models of Service Delivery, and advocacy. These engagements included, the ICAP meeting coordinated by Ministry of Health, SAAF Global gathering, International Conference on access to health services for Key populations in Mozambique, and the 77th ordinary session of African Commission on Human and People's Rights in Arusha.

299 — 299 stakeholders were engaged --including journalists during Media cafes and Multi-stakeholder dialogues on the roles and guidelines of Human Rights Defenders in harnessing synergies to enhance access to justice, healthcare, and community social cohesion, as well as the X-spaces.

665 — 665 rights holders were engaged during the 16 Days of activism with an aim to create -awareness on the forms of violence experienced by Female Sex Worker in their diversities.

264 — 264 AGYW during the year were equipped with economic livelihood skills, and the SRHR/HIV information sharing sessions.

979 — 979 FSW were provided with the Family planning services. This number grew from 878 in 2023.

2458 — 2458 FSWs and AGYW were screened for STI and UTIs, whilst 467 got treatment. This number reduced from 515 in 2023 to 467 with a reduction of 48 in 2023, this is attributed in shortage of STI drugs in some months.

Some of the moments in the year during our engagement –Pictorial


SEX
WITHOUT

During the commemoration of the international world AIDS day

Introduction

The year 2024 marked the inaugural implementation of the AWAC's 2024-2028 strategic plan, characterized by significant growth alongside financial constraints, particularly in securing resources for the relocation of the Kampala Drop-in Centre after the unprecedented evictions in 2023 emanating from the enactment of the Anti-Homosexuality Act, 2023. The latter part of the year posed additional challenges with the resettlement challenges into the new site location for the Kampala secretariat, Mpox outbreak, an epidemic that saw several innovations and responses from the AWAC team and the grassroots members across the board.

The annual report highlights AWAC's key interventions, achievements, performance results, challenges, and lessons during the reporting year of 2024. The report also highlights our financial performance during the same year.

This Annual Report outlines AWAC's key interventions, impact areas, achievements, challenges, lessons learned, and financial performance for the year.

AWAC's Triumphs: A Year of Impact and Growth

Despite unprecedented challenges, 2024 was a landmark year for AWAC. It marked the beginning of our 2024–2028 Strategic Plan and showcased the resilience, innovation, and solidarity that define our grassroots movement. From rebuilding infrastructure after crisis to scaling up economic empowerment for adolescent girls and young women (AGYW), our collective efforts yielded lasting impact across communities in Uganda.

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Success stories (from some of our grassroots members in Kampala, Arua, Isingiro)

At the Glimpse

Health Program stories

Story one

"I thank AWAC for the support it gives to us FSW always. I had a client whom I had been serving sex for one year. One day he told me that he loves me, and I started asking myself if he is serious of what he told me. I asked him if he doesn't have a wife and he answered that he had a wife but divorced three years ago, that he is looking for a woman to settle with. He was a rich man who used to pay me a lot of money and I picked interest of getting married to him. He made a shopping of three million Uganda shillings and asked me to pack my clothes and go to his house. He picked me at around 4:30 pm and took me to Najera flats where he had a nice home. I started praising God for getting me a man of my dream and yet the man had lost two wives and he was HIV positive. On that day of my arrival, he asked me to give him un protected sex I insisted to use condom and asked him to go for blood test and promised me to go on the next day. I was on PrEP, I couldn't risk my life and he came in the evening and asked me to go with him to the nearest clinic. I went with him and I didn't know that he had already paid a nurse to give me fake results. The results were negative and I saw him panicking and asked me to sit on and drove home and after reaching home, he

told me to first give him the western jazz (Kachabali) that he is missing it so much and I continued adhering well on PrEP and taking it on daily basis because I still feared that he could infect me with a disease, We stayed for a year and asked me to give him a child and I accepted to get pregnant. As the pregnancy was making four months old, my husband started falling sick often due to discontinuation of ARVs and I expected it because I was well informed by AWAC peer that if I take PrEP on daily basis that I can't get HIV even if I sleep with HIV positive person, and I asked him to go to the facility for treatment, he told me that he is not sick that he was bewitched by his former wife who didn't want him to marry another wife. He stayed home for a week and when I was making my bed, I saw a tin of ARVs in a drawer of the bed and I kept quiet until I gave birth to our baby boy. I kept getting my PrEP refills from AWAC and until my son reached one year and two months. I asked him about visiting my family and told me that he will be going very soon to my parents. He asked me to go for blood test again with our children and our results were negative and he started crying until I asked him of what had happened to him. He started telling me that he will be going to India for treatment. After 3 months he became bed ridden and died when my son was making 2 years and one month. I passed through a hard moment when the family of the man chased me out of the house and went back to street for sex work industry. I thank AWAC for protecting my life and my child and I am still safe, I cannot miss taking PrEP"

Story two

Recheal not her real names, a sex worker living in Mpererwe was initiated on PrEP in June 2022. She was adhering well since 2022 up to last year July 2023, she fell in love with a client and ignored taking PreP without testing her partner for HIV. Unfortunately, he was positive and infected her with HIV and also made her pregnant. The boyfriend was a soldier working in Bombo barracks and she asked him to escort her for antenatal care services at 3 months and the guy told her to wait until 7 months of gestation. Recheal started feeling malaria all the time and loss of appetite and the guy told her that it's the effects of the pregnancy. At the time of delivery, she was taken to the community birth attendant by her husband and the process was successful.

After one week, Recheal fell sick until the husband gave her a motorcyclist to take her to the public health facility and she was given coatem for malaria without test. She had a continuous headache and malaria after and husband told her to leave her house that she is having a bad luck/bad omen (ekisirani), he gave her twenty thousand Uganda shillings that for him is going to Somalia for work. Recheal left home with her one-month-old daughter and went to Generals pub (her former hotspot) where she found her colleagues and started providing basic needs with her child for five months while selling sex to cater for her child and paying a room at ten thousand daily. AWAC team went back to refill the clients as usual, we found Reachel at Generals pub and told us that she has been in the village and asked AWAC and Mengo team to test her and get PrEP and she didn't expect to turn positive and getting her results, she was asked to come to Mengo hospital for enrollment. She came after two days and was tested again for HIV and enrolled on treatment. Racheal disappeared after 3 months in care and went to the village of Rwebitakuli in Sembabule district and made calls all the time but she could tell me a different story until I promised to pay a visit to her home. I had planned to send AWAC peer from Sembabule to visit her and give her counselling services. She called me on 4th June 2024, that she had herpes zoster around the stomach that had a lot of pain and she was seeking for support. I asked her go to the nearest government facility and told me St Agatha Health center iii in Rwebitakuli and she went there and they tested her and told them that she was getting HIV drugs from Mengo, and then the incharge called me and I also connected Mengo team for more enquires. She was later given HIV drugs and she is now adhering well and even the herpes zoster is healed and she gave me a call to thank AWAC and Mengo team for the support and counselling given to her to return back to care.

Story three:

Daphine, a 28year old female sex worker and had been working in one of the hotspots in Kikagati boarder. She faced numerous challenges including stigma, health issues and limited access to healthcare. When WoSH team went for outreach, Daphine was hesitant because of having faced discrimination from healthcare providers in the past. Daphine approached WoSH team with respect and understanding. They explained the services available i.e HIV testing, pregnancy testing, and counseling. She decided to participate. During her visit, she received an HIV test and a pregnancy test. She was relieved to find out she was HIV-negative but learned she was pregnant. The team provided comprehensive counseling, discussing her options and offering support regardless of her decision. Daphine chose to continue the pregnancy and she was provided by prenatal care services. This program also offered her health education on safe sex practices and reproductive health. Through the educational sessions, Daphine learned more about

protecting herself and maintaining her health.

Empowerment story

Story four

Medrine, a determined and enterprising member of our DiCRA saving group, embarked on a remarkable journey after receiving her contribution of seven hundred thousand shillings to pursue her dream of opening a hotel. Driven by her passion for hospitality and a desire to provide quality accommodation in her community, Medrine meticulously planned her business venture, with the support and encouragement of the savings group, Medrine secured a suitable location, invested in renovations and purchased essential equipment and furnishing for her hotel. She envisioned a warm and inviting space where travelers and locals a like could enjoy comfortable accommodation and delicious meals prepared with locally sourced ingredients. Upon the grand opening of her hotel, Medrine welcomed her first guests with genuine hospitality and attention to detail. The hotel quickly gained a reputation for its good ambiance, good customer service and delectable local cuisine.

Medrine´s dedication and entrepreneurial spirit paid off as the hotel business thrived. She employed local residents to work in various roles providing job opportunities and contributing to the economic growth of her community. Over time, her hotel became a popular destination for business travelers, attracting visitors from near and far. As her business flourished, she remained actively involved in a saving group, sharing her success story and offering advice to aspiring entrepreneurs. She encouraged fellow members to leverage the resources and support available through the group to pursue their own business ventures and achieve financial independence. Medrine´s journey exemplifies the transformative impact of her saving group in empowering individuals to turn their dreams into reality. Through determination, hard work, and community support, Medrine not only fulfilled her entrepreneurial aspirations but also made a positive impact on her community´s development.

Access to Justice story

Story Five

On March 29, 2024, the Districts Community Rights Advocates (DiCRAs) in Arua received a report of an assault against a female sex worker. Promptly, the case was reported to the authorities on March 30, 2024. The DiCRAs successfully processed the case file, took it to the State attorney and submitted to the court. Given the empowerment they have been given through reporting skills and creating rapport with duty bearers, DiCRAs in Arua report this case of Assault to Arua central Police Station (under Reference Number 02/30/03/2024) and Local Council—One on 30th March, 2024. This further prompted the Local Council—One to push for meeting between the survivor's family and the perpetrator to reconcile the matter and they agreed to work with DiCRAs and Police to get the perpetrator arrested on March 31st, 2024. We are happy to report that the case was opened on April 01st, 2024 and the file taken to State Attorney on April 04th, 2024. The case was scheduled to be sanctioned on April 08th, 2024, unfortunately that day the case was not called and the suspect was remanded to the Arua prisons until April 20th, 2024, When the case was called to court again, the suspect was found guilty of Assault. Even though the survivor's injuries were not grave the Grade—three magistrate of Arua Court of justice convicted him to six— months in prison at the Gilili Military prison to serve as a warning to his peers that got away with such offenses.

This achievement marks a significant victory for the Arua DiCRAs in their efforts to advocate for the rights, protection, and justice for sex workers in the community.

Story six

Annabel's Story after struggling with Human papillomavirus infection (HPV infection)

Annabel (not the real name), a 24-year-old sex worker, was living with the burden of HPV, experiencing excruciating symptoms like warts, abnormal bleeding, and discharge. These symptoms not only affected her work but also her relationships, leaving her feeling isolated and stigmatized. Despite her initial reluctance, Annabel sought help from the AWAC and received comprehensive treatment, including counseling and medical care. Annabel's journey was marked by struggles with her HIV status, which led to discrimination and stigma from her family and society. She felt alone and attempted suicide, but with counseling and support, she found hope and began to cope with her condition. AWAC's counselors provided her with a safe and non-judgmental space to share her experiences and receive guidance.

Annabel's physical symptoms were debilitating, with heavy bleeding and discharge that lasted for months. She would often reuse old clothes as pads, washing and reusing them due to lack of affordable alternatives. The smell was overwhelming, and she feared being near others due to the stigma. However, with the support of AWAC, and Uganda Cancer Institute (UCI), she received medication that stopped the bleeding and discharge, restoring her dignity and confidence. AWAC's care and support went beyond screening, referral and counseling g.

They took Annabel to the Uganda Cancer Institute for medical treatment, ensuring she received comprehensive care. The counselors at AWAC showed her love, care, and responsibility, even when she was reluctant to seek help. Annabel expressed her gratitude for AWAC's support, acknowledging that their care and love had been instrumental in her healing journey.

Annabel's story highlights the importance of accessible and inclusive healthcare services. She advocates for extending cervical cancer screening to all District Health Centers, creating income-generating activities for sex workers, and making STI drugs available at all health facilities. Her journey is a testament to the power of support and care in overcoming the challenges of living with HIV, HPV and cervical cancer. AWAC's Drop-in Centre staff played a vital role in Annabel's healing, and she encourages others to seek help and support in their struggles.

Domains of change

The work during the reporting period was achieved through the organizations' six domains of change. **These include**

1: Network and Movement Building
2. Access to Services
3. Advocacy, Lobbying and Influence Policy Development
4. Research and Knowledge Management
5. Capacity Strengthening on SDGs, Skills Development, Economic Empowerment, and Income Generation
6. Institutional Priority: AWAC Organisational Development and Sustainability

1. Network and Movement Building Domains

Strategic Objective for Domain 1: To build a strong, progressive, unified, and resilient FSW movement, whose actors are empowered to leverage capacities to advocate for equitable access to health, engage on engaged on bodily autonomy, integrity and choices and advance social and economic justice for FSWs.

AWAC's first strategic domain focuses on dismantling systemic barriers that limit access to health, rights, and dignity for FSWs and other marginalized communities. In 2024, this commitment was realized through grassroots-led programming, advocacy, capacity building, and direct service delivery across Uganda.

1. The Launch of Co-CREATE: Innovations from the Ground Up

Grand breaking start in Bunyoro region (Hoima district and Hoima City). With support from Embassy of the Netherlands in Uganda through UNAIDS Uganda, AWAC officially launched the Co-CREATE Innovations and Solutions with the Community project in 2024 in Hoima City and Hoima District. This initiative marks a significant milestone in addressing the growing challenges faced by sex workers and other marginalized communities in the Bunyoro region. As oil exploration and urbanization rapidly transform the

Photo taken during the launch of the Co-CREATE Innovations and Solutions with the Community project in 2024 in Hoima City

area, HIV prevalence rates have surged to 5.2% in Hoima City and 9.6% in Hoima District—both above the national average—making timely intervention critical. The Co-CREATE project aims to improve access to tailored HIV, SRHR, and economic empowerment services through community-led approaches.

During the inception meeting, the project received strong social, technical, moral, and political support from local stakeholders. To kick-start implementation, AWAC conducted capacity-building training for 80 grassroots members using the CAHIVPlus and CHLEG models, equipping them with skills in HIV response, mental health, GBV, SRHR, economic resilience, leadership, and group formation. As a result, four CAHIV economic empowerment groups were established—Hoima City CHLEG, Ghetto Youth City CHLEG, Blessed Hands CHLEG, and Buswekera CHLEG—each with leadership structures in place and actively developing local solutions for sustainable livelihoods. We extend our heartfelt thanks to our partners for helping ignite a community-driven movement that

empowers marginalized populations to reclaim their health, rights, and economic well-being.

Action Against Feminicides and Violations against the sex workers

The year began on a somber note with a wave of brutal murders of female sex workers across several districts in Uganda.

In response, AWAC marked Women's Day by convening a community dialogue where members validated the Advocacy Capacity Assessment Report.

The report will guide the next 5-year Sex Workers' Feminist Advocacy Agenda (SWoFAA) and strengthen grassroots strategies to end violence against marginalized women.

Sex workers, including those with disabilities, shared powerful testimonies of the multiple layers of violence and discrimination they endure.

Together, we emphasized the urgent need to address the root causes of femicide, ensure justice for victims, and foster dignity, equality, and empowerment for all women.

Pictures above taken during the community dialogue where members validated the Advocacy Capacity Assessment Report

6. Expanding Reach Through Health Services and CHLEGs

AWAC Drop-In Centres made remarkable progress in 2024 in advancing HIV and sexual reproductive health services to 9000 individuals, strengthening collaborations with 14 healthcare facilities, and empowering sex workers, women injecting drugs. Our efforts have focused on expanding access to essential healthcare services, including cervical cancer screenings, Mpox response initiatives, and outreach programs targeting sex workers and children living in sex work settings. Through our integrated approach,

we have ensured continuous care and support for individuals throughout their health journey.

Our Community Health Livelihood and Enhancement Groups (CHLEG) have significantly contributed to economic empowerment and personal development, particularly for Adolescent Girls and Young Women (AGYW) and Sex Workers living with disabilities. In addition to these community-driven interventions, AWAC has received prestigious recognition from CDC Atlanta and CDC Uganda for its excellence in delivering tailored HIV response services. Strengthening partnerships has been central to our work,

particularly through our collaboration with

facilitated acceobsss to vital health resources in underserved areas. To enhance cervical cancer prevention, AWAC has conducted a series of screenings and awareness sessions at our Drop-in Centres, in community hotspots, and referred clients to the Uganda Cancer Institute (UCI) for further testing. We have also carried out follow-

ups to ensure proper management of HPV infections and continuity of care for affected individuals. Our targeted outreach initiatives have reached 128 children living in sex work settings and have brought services closer to where they are most needed, incorporating adherence counseling and innovative service delivery models such as Community Drug Distribution Points (CDDPs) and Client Community Led ART Delivery (CCLADs). These models have significantly improved access to antiretroviral therapy, benefiting 40 individuals who can now receive treatment conveniently through two CDDPs at AWAC Drop-In Centres or two CCLADs within their communities. Strengthening our relationships with health facilities has also been a priority, leading to courtesy visits to key health centers in Kampala—including Kisenyi Health Centre IV, Kitebi Health Centre III, and Kawala Health Centre III—as well as nine facilities in Kyotera and Masaka districts.

These engagements facilitated discussions on optimizing service delivery for key populations and expanding healthcare access through various service models. Our partnership with Kampala Capital City Authority has further enabled the distribution of crucial HIV and sexual reproductive health commodities, including condoms, across 118 hotspots in five divisions of Kampala—Makindye, Nakawa, Kawempe, Rubaga, and Kampala Central. Through this initiative, 5,158 sex workers accessed both male and female condoms, enhancing sexual health and well-being in these marginalized groups. A significant highlight of the year was AWAC's engagement with CDC representatives in Masaka, where we had the honor of hosting officials from CDC Atlanta and CDC Uganda. Additionally, we participated in a CDC assessment of HIV response services at Kalisizo Hospital, which reinforced the impact of our efforts. During this assessment, AWAC, along with Kalisizo Hospital and the Infectious Diseases Institute, was commended for providing high-quality, targeted healthcare services to key populations. Our rigorous documentation and strategic approach to HIV service delivery received special recognition, underscoring our commitment to accountability, efficiency, and excellence in community-based healthcare programs. These acknowledgments further inspire us to continue delivering high-impact services that address the unique health needs of sex workers, and women injecting drugs.

Pictures taken during the CDC Atlanta's Visit to our DiC and Health Facilities we work with in Kyotera and Masaka

Monitoring mission for the MakeWay program with the members of parliament. The year 2024 marked a significant milestone as we celebrated three years of remarkable progress in advancing reproductive justice, empowerment, and resilience through the MakeWay program in Terego, and Madi Okollo district. To share our achievements and lessons learned, we conducted a monitoring visit with Members of Parliament from Terego district, Kalangala district, and Entebbe municipality. Alongside our beneficiaries, we presented the program's successes, highlighting social economic empowerment through an intersectionality lens. We showcased how AWAC has embraced and applied a new approach to understanding and addressing Sexual Reproductive Health and Rights issues; including contested invisible SRHR issues, empowering youths with innovative advocacy skills, livelihood skills, and establishing safe

Photo taken during the Joint Monitoring Visit with the Members of Parliament in Terego

spaces in Terego and Madi Okollo district.

Sexual Reproductive Health and Rights Work

The last year involved the continuation of our projects enhancing safe pro-choice services to our beneficiaries. AWAC conducted a refresher training with community expert clients to reflect on and learn from past implementation in serving communities with comprehensive pro-choice SRHR information and services in Uganda. The training also highlighted success stories of reaching out to communities with expert clients. Expert clients shared testimonies about how their presence has enabled many community

Pictures above taken during the Expert clients' capacity building sessions

members, including sex workers, to access appropriate and accurate information on critical SRHR services such as counseling, referrals, family planning, and post-abortion care. The expert clients acknowledged that what has made them different, special and proudly stand as AWAC community expert clients, is the fact that they give their communities adequate time and properly well elaborated information on essential SRHR services needed. This has been a catalyst in creating a strengthened chain-of-referrals from the members of the community they serve. An expert client, Monica, shared an inspiring story: "As a team, we decided to innovatively make this Art and craft bag (from what could be taken as a waste material) because this was one of the sustainable strategies to broaden some of the activities run by our Drop-in Centre in Bugiri, as well as a mechanism to protect our area environment through the shadow impact of our SRHR Work.

AWAC, as an institution committed to continuously carrying out quality assessment of our programmes as well as service delivery, we conducted a series of assessments and evaluation sessions with expert clients in the Eastern Region (Kyotera, Masaka, Busia, Kampala, Wakiso, and Tororo) aimed at determining the effectiveness and importance of incorporating self-care components into pro-choice Sexual and Reproductive Health services for the community. Through support supervision visits we contributed to enhancing performance in SRHR service delivery, grassroots advocacy and expanding knowledge on critical SRHR issues. These sessions served as platforms for receiving project feedback from, creating robust relationships with Expert clients and enhancing their skills and through courtesy visits to the various local government departments in the districts, we built rapport with local leaders. With the accelerated opposition to people's right to self-determination witnessed in 2024, AWAC conducted a capacity-building session with expert clients from nine districts, focusing on the highly invisibilized SRHR issues that impact marginalized communities of women, such as sex workers in their diverse forms towards the end of the year. The activity advanced our learning agenda to enhance inclusive SRHR and capabilities in addressing contested SRHR issues along with promoting pro-choice healthcare among our grassroots members, who often face unique health challenges and stigma.

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Development and Validation of SRHR Job Aid

Photos taken during the SRHR job validation workshop

AWAC also finalized and validated a new SRHR job aid designed to equip expert clients with standardized tools to deliver comprehensive, affirming, and community-tailored SRHR

services. This job aid strengthens the role of peer educators in reaching marginalized populations with accurate information and care, especially in areas where mainstream services are inaccessible or stigmatizing. Stakeholders involved in the validation process recognized the value of this tool and commended AWAC for its leadership in community-based service innovation.

AWAC also endeavored in cultivating rapport with informal power participating in a two-day local, religious, and cultural leaders' dialogue on addressing HIV stigma and inequalities in access to health services. AWAC shared insights on HIV/AIDS-related knowledge, beliefs, and attitudes, and the vulnerabilities and injustices faced by marginalized communities, including our grassroots members. Later on, we were engaged in a roundtable dialogue organized by the Church of Uganda, in collaboration with the Ministry of Gender, Labour and Social Development (MGLSD), in commemoration of the 16 Days of Activism to End Gender-Based Violence. This dialogue brought together diverse stakeholders, including religious leaders, CSOs, and government representatives, to discuss issues around violence against women and girls. AWAC, as the only CSO representing marginalized groups, highlighted the socioeconomic violence affecting sex workers and other marginalized women with compounding and intersecting social identities.

Masaka Regional Impact

Our Regional Office in Masaka continued its vital work, contributing to AWAC's vision of "Female Sex Workers free from Human Rights abuse and living healthy and productive Lives". AWAC's team in Masaka underwent capacity training to enhance service deliver under the pillars of access to integrated Universal Health Care services. The week-long training on continuous quality improvement in projects set a strong learning foundation for the year.

Domain 2: Access to Services

Strategic Objective for Domain 2: To enhance access to Sexual and Reproductive Health Care Services, Legal Services, and Information for Female Sex Workers.

This year was also another new phase of strengthening the capacities of Peer educators to perform better. For the very first time, we saw the PEPFAR Implementing partners assessing the peers' performance, such as the Reach Out Mbuya. We also discovered that some peers were struggling with issues such as violence including Intimate Partner Violence. These experiences call for a renewed approach towards investing into self-care and wellness sessions for peer educators --because they are fundamental in supporting the communities such female sex workers that are difficult to serve. Additionally, through our monthly peer educator engagements, it became evident that some peers were facing serious challenges, including experiences of violence, particularly Intimate Partner Violence. This finding spotlighted a lesson to learn and an urgent need for a revamped focus for the organization to invest into the self-care, wellness sessions, and motivate peer educators for the work they do --as they play a crucial role in supporting hard-to-reach communities, such as female sex workers (FSW), including FSW who use or inject drugs

AWAC supported the Ministry of Health in public health risk communication and incident management during the Mpox public health emergency. As part of this effort, AWAC trained over 80 female sex workers on Mpox awareness and prevention. Additionally, a webinar of 98 participants was held on "The Role of the Sex Worker Community's

Innovations Amidst Public Health Emergencies in Uganda: A Focus on Mpox", providing a platform for knowledge sharing. Through these interventions, 37 FSWs with Mpox were identified and successfully referred for Mpox-related health services, ensuring timely medical support and care.

Safe Motherhood celebrations in Isingiro

In partnership with Global Fund for Women grantees in Uganda, AWAC participated in a community health and legal aid camp, at Isingiro-Kitagata border, organized by the Global Funds for Women and the interim Advisory Committee on SA Movement in East Africa. The event focused on raising awareness about SRHR while providing onsite health and legal counselling. Key stakeholders include Mr. Abaine Johns, Assistant CAO, and Ms. Nimusiima Maureen, Speaker, Isingiro district commended community efforts in enhancing access to tailored SRHR services. They encouraged women and girls to prioritize health and education, and income generating skills, citing initiatives like the Parish Development Model as an avenue for empowerment.

In the final quarter of 2024, AWAC had the pleasure of hosting several partner visits that significantly contributed to enhancing staff capacity and refining programming. We welcomed a team from the Ministry of Health (MoH), (the national collaborative CQI coaches) for a CQI On-site technical support supervision. This engagement strengthened our referral mechanism at the Drop-In Centre, enhancing the use of referral forms and the registers, setting a clear referral process, the referral pathway, and the follow up systems for clients referred Additionally, we were honored to host the team from The Great Lakes Initiative for Human Rights and Development from Rwanda. The visit ehanced mutual learning and sparked promising conversations around advocacy and service delivery collaboration. AWAC organized the SAAF Uganda grantee community gathering bringing together SRHR practitioners to navigate challenges, share insights, and strengthen collective impact.

Marginalized women at the frontlines of addressing public health emergencies (Mpox) (services)

Marginalized women with intersecting social identities are disproportionately affected by public health emergencies.

Through our community-led Health Action for Mpox Prevention, Inclusion, Outreach and

Picture taken during Mpox sensitization workshop

Network Strengthening in Uganda project, we organized Mpox sensitization training for grassroots members. AWAC has integrated Mpox response into our HIV programming and used helplines like the AWAC Malaika hotline, KCCA and MoH lines, to refer to suspected cases. Partners like the Infectious Diseases Institute and the Ministry of Health led sessions on Mpox symptoms, prevention, and care. Emphasis was placed on counseling and psychological support for individuals suspected of having Mpox and their contacts, covering the disease, its causes, treatment, outcomes, and recovery.

The year saw increased access to universal SRHR services, information and socioeconomic resilience of our grassroots members in the Masaka region. This is due to our advocacy including multiple meetings with stakeholders like the DHO, health facility in-charges, and HIV focal persons for SRHR commodities in Kyotera District yielding results, with the District Health Office (DHO) receiving medical equipment and drugs from the National Medical Stores.

Domain 3: Advocacy, Lobbying & Influence Policy Development

Strategic Objective for Domain 3: To advocate for an enabling environment that facilitates equitable access to health and social economic justice for FSWs in Uganda.

11. **Milestones from CHLEGs:** Revamping of Girls Action Club CHLEGs and amplifying savings. After the number of Adolescent Girls and Young Women (AGYW) SRH-R champions increasing to 135 in 2024, from 45 in 2023, AWAC expanded economic empowerment for AGYW engaging in sex work through savings. Thirty AGYW in 2024

Photo taken during one of the CHLEG capacity strengthening workshops

established three Community Health and Livelihood Enhancement Groups (CHLEGs), namely the "Survival Ladies - Malaba" and "Osukuru Saving Group" and “one love” in Busia. Nine members of these groups have successfully accessed loans to launch their own businesses, providing a supplementary source of income. Notably, these groups have been empowered through monthly empowerment sessions held at safe spaces, which serve as strategic platforms for engaging local leaders and duty bearers to address the issues affecting AGYW. These sessions have enabled the groups to develop critical skills, build confidence, and advocate for their SRHR rights. (Strategic Objective 3)

12. The AWAC Community Health Livelihood and Enhancement Group (CHLEG) for Adolescent Girls and Young Women (AGYW) under the DREAMS program achieved a significant milestone. In March 2024, they shared their annual savings of 1,900,000 Uganda shillings, which is safely kept by AWAC CHLEG SACCO. This fund will be used to initiate a joint venture, leveraging skills acquired through DREAMS training, to promote personal growth and development and reduce vulnerability. The group, comprising 18 members, plans to expand its membership this year. They expressed gratitude to AWAC for mentorship and support, citing the group's benefits, including counseling, guidance, and a safe space to share experiences with peers. The savings will be utilized to enhance personal development, and a new cycle has already begun. Similarly, the Victorious CHLEG of Sex Workers living with disabilities made progress in developing their livelihood skills during the year. They produced more detergents for sale, supporting their 20 families and working towards achieving SDG1 (no poverty). By doing so, they aim to overcome poor adherence to ART therapy due to lack of food and transport for refills and viral load. This initiative aligns with AWAC's efforts to support grassroots Female Sex Workers (FSWs) through CHLEGs and economic justice advocacy, promoting their economic inclusion. As vulnerable and underserved communities, FSWs play a crucial role in achieving the SDG agenda and NDP III. AWAC's focus on economic justice ensures marginalized women such as the Female sex workers (FSWs), have equal access to social and economic resilience services.

The organization also actively shared its

Photo taken during Audrey Mugeni’s visit at AWAC

Photo taken during GIMIC Youth Advocacy Training Addis ababa ahead of the #68CSW in New York.

knowledge and grassroots experiences on various platforms organized by its partners and allies. These included the Mama Network Gathering and Learning Space in Benin and Nairobi, the CMI-CREA Exchange Learning in Nepal, and the South-to-South Learning Network Exchange in Ghana, which focused on key population programming, particularly for women who use drugs. AWAC also took part in the sub-regional Beijing+30 Consultation for Eastern Africa in Nairobi, Kenya, which reviewed progress on the 30th anniversary of the Beijing Platform for Action and Declaration (BPfA). Additionally, AWAC participated in the We Lead Program Exchange Learning in Mozambique and the 40th Gender is My Agenda (GIMAC) Conference in Ethiopia, further strengthening its advocacy efforts and engagement in regional and global gender equality discussions. The events, such as the GIMAC conference, in particular, served as a powerful platform for shaping young feminist advocates into agents of change, reinforcing AWAC's commitment to amplifying the voices of marginalized communities and driving impactful grassroots advocacy.

The organization further expanded its influence to the African Continental level. During the year, AWAC was granted an observer status by the African Commission. This recognition underscored AWAC's alignment with the principles of the African Charter and highlighted its role in advancing human rights of grassroots marginalized women such as grassroots sex workers. This Observer Status will enable AWAC to further its evidence-based advocacy work in championing the rights and welfare of vulnerable women, and reinforcing its impact and influence on a continental level.


AWAC

AFRICAN COMMISSION ON HUMAN AND PEOPLES' RIGHTS GRANTS AWAC THE OBSERVER STATUS

At the 81st Ordinary Session in Banjul, Gambia, the African Commission on Human and Peoples' Rights (ACHPR) granted an Observer Status to the Alliance of Women Advocating for Change (AWAC). This recognition underscores AWAC's alignment with the principles of the African Charter and highlights its role in advancing human rights of grassroots marginalized women such as grassroots sex workers. AWAC is dedicated to empowering grassroots sex workers by building a strong movement that advocates for accessible and equitable healthcare, along with human rights and socio-economic justice both in Uganda and throughout Africa. The ACHPR's

In 2024, our organization marked a year of achievements and impactful work, highlighted by a prestigious award recognizing our innovative approaches to

Photo taken during the We Lead Global Linking and Learning Conference in Maputo

promoting Sexual Reproductive Health and Rights (SRHR) among marginalized adolescent girls and young women in Uganda through the We Lead program. This award was presented to us at the We Lead Global Linking and Learning Conference in Maputo.

AWAC actively participated in planning and budgeting conferences for Madiokollo, Terego, and Lubaga Division in Kampala, providing expert advice to the Kampala Capital City Authority (KCCA) on ensuring reasonable accommodation across all its facilities. During the FY 2025/2026 budget process, AWAC emphasized the importance of investing in Sexual Reproductive Health Rights and making public health facilities more accessible. Specifically, AWAC recommended that the Lubaga Division and KCCA allocate funds to support sign language interpreters for people with disabilities, particularly those with hearing impairments. AWAC's participation in budget conferences highlights its dedication to civic engagement and advocacy for inclusive and equitable access to health services. This active contribution to the Madi Okollo District Budget Conference, and the Lubaga Division Budget Conference, shows our practical role in shaping the FY 2024/25 district, and division budgets, ensuring that the needs of marginalized communities were prioritized and integrated into the funding decisions.

AHETCA Conference: Centering Lived Experience in Regional Discourse

AWAC participated in the 2024 Advancing Health Equity Through Collaborative Action (AHETCA) Conference—an influential regional convening of SRHR stakeholders. During the conference, Ms. Resty Kyomukama shared the firsthand

Photo taken during the AHETCA confererence

experiences of sex workers, LBQ women, and adolescent girls facing unsafe abortion in humanitarian settings. She advocated for comprehensive pro-choice healthcare, reform of restrictive laws, and investment in grassroots innovations. In another powerful presentation, Mr. Michael Ssemakula emphasized the importance of differentiated healthcare services for sex workers, arguing that programs must be tailored to meet the intersectional realities of the communities they serve in order to improve access, retention, and holistic well-being.

AWAC also hosted Audrey Mugeni from CREA where we highlighted our achievements in building the economic resilience of our grassroots members and explored future partnership to further support sex workers with disabilities in Uganda. Through the CREA-funded project in Wakiso and Kampala, AWAC empowered female sex workers (FSW) with hearing and speech impairments, enhancing access to sexual reproductive health (SRH) services and improving communication with health care professionals via sign language. This also strengthened their ability to negotiate for safer sex and reduce risk. We also joined the Gender Justice Learning Event with members of the Act Alliance in Uganda, where we reflected on the impactful work being done by member organizations like RACOBAO on economic justice and gender-based violence (GBV) prevention. These engagements continue to shape our advocacy and inclusive programming for marginalized communities.

Photo taken during the Participatory Action Research (PAR) training organized by the Centre for Women Justice Uganda

Kyotera office hosted a 16 Days of activism dialogue in the district under the theme “Ending GBV against women and girls.” Various stakeholders including the Resident District Commissioner, Police Officials, Community District officer, District Health Officer, local leaders, and peers were in attendance. The event garnered widespread attention in the district, bringing to focus pertinent issues around GBV against structurally marginalised women and girls with leaders committing to supporting tailored interventions aimed at ending GBV, with a special focus on marginalized women, including sex workers in their diversity. These include commitments from duty bearers, such as: Assistant District Health Officer Sr. Bakanansa Sarah who pledged to collaborate with AWAC to combat GBV and encouraged AWAC and Infectious Diseases Institute to organize similar dialogues.

Additionally, we celebrated the establishment of the "Water Lakes Women's group," a new Community Health Livelihood Enhancement Group (CHLEG) in Nyendo—Masaka, as part of our efforts to empower grassroots members nationwide by strengthening their social and economic resilience. In addition, Ziva Muntuuyo Women's Group --an AWAC grassroots members group, and CHLEG, with support from the Global Fund for Women, organized an awareness meeting on tailored SRHR, that brought together 38 participants, including sex workers, AWAC

partners, and health workers from supporting facilities in Kyotera and Rakai. The awareness meeting focused on key Sexual& Reproductive Health Rights (SRHR) topics, ie family planning and contraceptive services, post-abortion care and referrals, (STD)screening and treatment, and strategies to improve access to these vital services.

The regional team also hosted the Social Innovation for Health Initiative (SIHI) from Makerere University School of Public Health, who graced our offices through assessing and learned from our Community Health Livelihood Enhancement Groups (CHLEGs) model in Kampala as well in Kyotera district, specifically, its impact on sex workers' comprehensive health and socioeconomic resilience. This left the SIHI team awed and inspired by the impact and effectiveness of our model, which is a testament to the power of innovation, hard work and dedication of our members. Additionally, the welcomed the International Community of Women Living with HIV East Africa and CLM South Sudan teams to discuss the impact of CLM in Uganda, sharing best practices that can enhance HIV response interventions and inform policies in South Sudan.

Research and Knowledge Management

Strategic Objective for Domain 4: To ensure that the evolving needs and experiences of FSWs are documented to create evidence for advocacy, informed policy making and programming.

Significant strides were made in strengthening knowledge management through systematic documentation, including the development of briefers. This effort involved a comprehensive record of achievements, best practices, and key learnings from three major projects: the MakeWay Program, the Disability Program (previously funded by CREA), and the We Lead Program. Insights gained from these initiatives have been integrated into other organizational programs, contributing to a broader institutional learning agenda and ensuring that best practices are shared and applied across various interventions.

Participatory Action Research and Gender Justice Training

One of the year's most significant milestones was AWAC's participation in a Participatory Action Research (PAR) training organized by the Centre for Women Justice Uganda (CWJU) and the Westminster Foundation for Democracy. The training brought together civil society leaders, members of parliament, and community representatives—among them female sex workers, women with disabilities, women living with HIV, and women journalists. This inclusive learning space enabled participants to strengthen their understanding of gender justice, document systemic injustices, and build advocacy strategies grounded in the perspectives of those most affected.

Strategic Academic Partnerships for Research Infrastructure

To advance AWAC's long-term research agenda, the organization hosted Dr. Mafigiri from Makerere University's Department of Social Work

Photo taken during Dr. Mafigiri's visit to AWAC

and Social Administration for a consultation on potential collaboration. Discussions centered on improving AWAC's internal research frameworks, including the development of standard operating procedures, policy guidance, and operational manuals for data governance. This partnership reinforced AWAC's goal of becoming a model research institution rooted in feminist values and grassroots knowledge production.

2. Strengthening Capacity to contribute to the SDGs, Skills Development and

Economic Empowerment.

Strategic Objective for Domain 5: To strengthen the capacity of FSWs to contribute to the Sustainable Development Goals (SDGs), and to support Skills Development and Economic Empowerment Initiatives.

Empowering Adolescent Girls and Young Women (AGYW)

A major triumph in 2024 was the scale-up of AGYW programs. The number of SRHR youth champions rose from 45 to 135. With support from UNAIDS and the We Lead and Make Way programs, AGYW formed CHLEGs like "Survival Ladies," "Osukuru Saving Group," and "One Love" to promote savings, economic independence, and peer support.

AGYW in Madi-Okollo, Rhino Camp, Terego, and other districts were trained in budget advocacy, intersectionality, and community scorecard monitoring. Youth leaders like Silvia and Joseph participated in district-level budgeting, ensuring youth SRHR needs were represented in 2024/25 plans—a watershed moment for civic engagement and accountability.

Thought Leadership and Global Visibility

AWAC co-hosted a session on reproductive justice at the 5th People's Health Assembly in Argentina, amplifying stories from Uganda on global platforms. We received Observer Status at the African Commission on Human and Peoples' Rights and joined the MAMA Network, spanning 24 countries. These milestones affirmed our growing influence as a regional leader in feminist health and rights advocacy. Pushing our efforts through the roofs of global advocacy, AWAC actively participated in the 5th People's Health Assembly in Argentina, where it co-organized a compelling side event titled "Struggle for Sexual and Reproductive Health in Oppressive Contexts" on April 9, 2024, in collaboration with PHM Global, PHM Uganda, AMA Resource Group for Women and Health (India), FOS Feminista, Aliança para a Saúde (Mozambique), CGND (DR Congo), CENESEX (Cuba), and Rebeldía Collective (Bolivia). During this session, AWAC shared key insights, lessons learned, and best practices from its ongoing efforts to support sex workers in Uganda, particularly in the wake of restrictive laws such as the Anti-Homosexuality Act, 2023, and

Pictures taken during the People's health Assembly

the amended Narcotic Drugs and Psychotropic Substances Act, 2023, which have exacerbated challenges in accessing essential services. The discussion highlighted AWAC's innovative service delivery models, including the Drop-in Centre Model for safe and accessible health services, the Community Health and Livelihood Enhancement Group (CHLEG) Model, which integrates economic empowerment with healthcare, and the Self-Care Service Model through the Community De-Medicalized Accompaniment (CoDA) Model, which facilitates access to pro-choice sexual and reproductive health and rights (SRHR) services despite restrictive legal frameworks.

Domain 6: **Organizational Development and Sustainability**

Strategic Objective for Domain 6

To strengthen AWAC's organisational capacity to ensure sustained, effective, and efficient delivery on its mandate.

2. Resource Mobilization and Strategic Partnerships

As the year progressed, the organization seamlessly began implementing the first year of its 2024–2028 strategic plan, with a strong emphasis on resource mobilization as one of the key management priorities. Recognizing the importance of sustainable funding and strategic growth, the organization actively invested in strengthening its financial base and expanding its networks. As part of these efforts, the organization successfully mobilized $150,000 to initiate the construction and remodeling of the AWAC Drop-in Center (DiC) in Kampala City, a critical community-based facility aimed at enhancing

continuity of service delivery for key populations after the forced unprecedented eviction that emanated from the enactment of the Anti-Homosexuality Act in 2023. A crucial aspect of this effort was the formation of new partnerships with a diverse range of stakeholders, including individual organizations, civil society coalitions, philanthropic agencies, and faith-based networks. These collaborations were instrumental in enhancing the organization's capacity to deliver on its mission. Among the newly established partnerships were, Act Church of Sweden, Act Alliance --a global humanitarian network of churches; Amplify Change, an organization supporting advocacy for sexual and reproductive health rights; and the Forum for African Women Educationalists (FAWE), which promotes gender equity in education, Crossroads, and joined the National Equity Plan Steering Committee. Additionally, alliances were forged with the Koboko Women Disability Union, which advocates for the rights of women with disabilities; the SAFER HEELs Consortium, focused on improving the well-being of marginalized groups; the SPICE Consortium; and Mama Network, a regional platform promoting access to reproductive health services. Through these strategic partnerships, the organization continues to build a strong foundation for resource mobilization, institutional growth, and improved service delivery, ensuring that its 2024–2028 strategic objectives are effectively realized.

Infrastructure Development and Holistic Service Delivery

Started the Construction of the AWAC Community Centre of Excellence. We are thrilled to inform you on our successful journey to the completion of our phase 1 relocation of "AWAC Hub of Holistic Transformation (HHoT)" in Mengo- Uganda. We shifted into our new site location in December 2024. Building on this momentum, AWAC launched its Phase 2 Fundraising Drive in the 2024 fiscal year, aimed at constructing the AWAC Mini-Hub of Holistic Transformation (HHoT). Much as this project has met numerous challenges, it seeks to establish a permanent structure to ensure safety, ownership and sustainability to house AWAC's vital one-stop centre hub for skilling programs, harm-reduction programme, provision of integrated quality SRHR/HIV/GBV/Mental Health & Psychosocial wellbeing services and emotional support services among others to AWAC's core target are Sex Workers (SWs) in their diversity.

Governance, Compliance, and Institutional Integrity

To strengthen our compliance muscle and ensure adherence to laws, regulations, and Ministry of Internal Affairs standards, we successfully secured seven Memoranda of Understanding (MoUs) with key districts, including Tororo, Hoima district, Hoima city, Kitgum, Dokolo, Pader, and Wakiso. Additionally, we obtained a National Environment Management Authority (NEMA) Certificate, permitting the construction of our Community Centre of Excellence in Kampala City. This compliance will enable us to mitigate risks, safeguard our reputation, and maintain the trust of local leadership, while avoiding legal and financial consequences and ensuring operational efficiency at both grassroots and national level.

Within the AWAC grassroots movement, three member organizations—CEMINET Kitgum, Kasese Women Health Support Initiative, and Nkobazzambogo Kyotera distrct—were technically supported and capacitated in grant writing to strengthen their internal resource base. As a result of these efforts, these organizations have successfully expanded their funding opportunities, securing support from philanthropic institutions such as the Global Fund for Women. This achievement marks a significant step in enhancing their sustainability and ability to drive impactful community interventions in the Sex Work Movement.

Community Volunteer for Youth Empowerment visit to AWAC

Photo taken during the Community Volunteers for Youth Empowerment learning visit to AWAC

As part of our commitment to enhancing growth and empowerment, AWAC supports emerging grassroots organizations in service delivery and advocacy. During the year 2024, we welcomed Community Volunteers for Youth Empowerment (COVYE) from Masaka for a learning visit to our Kampala Drop-in Centre. This exchange allowed both organizations to share knowledge, skills, and experiences, enhancing our collective impact on key populations (KPs). Following the visit, COVYE developed an action plan to strengthen governance, resource mobilization, service delivery, risk management, monitoring and Evaluation, and partnerships in their work with KP communities. At AWAC, we believe that by investing in one other, we build a stronger network of organizations that are better equipped to serve vulnerable communities and drive meaningful change. This visit with COVEY highlights the power of learning and nurturing grassroots movements.

Partner Hosting for Capacity building sessions in Continuous Quality Improvement (CQI) institution

AWAC DiC hosted the Ministry of Health, Infectious Diseases Institute, and Reach Out Mbuya for an assessment of its referral and linkage system, which highlighted areas of excellence and improvement in data collection tools and referral processes. AWAC continues to intensify its efforts in combating HIV among key

Photo taken during ROM and CDC assessment visit to AWAC

populations, providing essential commodities and expanding services to include hotspot mapping and comprehensive HIV Testing Services (HTS) for sex workers and their children under the Reach Out Mbuya Community Health Initiative (ROM) project. AWAC also participated in a 5-day Index Testing Assessment to ensure health workers meet WHO standards, gaining a deeper appreciation for index testing's role in identifying new HIV cases and increasing demand for

Photo taken during the Mama Network gathering and learning space in Benin

prevention services. The DiC team members also participated in training on cervical cancer prevention and control for female sex workers and held an Art Adherence support group session to improve retention in care for clients on Art.

Staff Development and Leadership Pipeline

By the end of the year, the organization achieved a significant milestone by reducing staff turnover by 50%. In 2024, only two staff members departed to pursue further studies and other career opportunities, compared to four who left in 2023. A modest salary adjustment and opportunities to study were among the key motivating factors that contributed to staff retention. Additionally, AWAC made considerable progress in strengthening its internal structures. The organization updated its organizational organogram and initiated a comprehensive review of its Human Resources (HR) Management and Procedures Manual. The recruitment process was refined through rigorous selection and induction procedures, particularly for senior management roles such as the Finance and Administration Manager. A strong emphasis was also placed on continuous professional development, with active encouragement and support for staff growth. This was evident in the successful filling of a senior management position—the Deputy Executive Director—and four staff members returning to school, including one pursuing Doctorate Studies.

Picture taken during the Annual Talk to Your Regulator Summit

Institutional Partnerships and Networking

AWAC's 2024 strategic compass envisions us becoming a model institution championing marginalised women rights with a team that is capacitated and able to deliver on that mandate. 2024 was characterized by a number of engagements by our members in capacity building activities that built the skills of our staff and strengthened our relations with various stakeholders including the government, other CSOs and individuals.

AWAC actively participated in several key platforms and collaborations including the RMNCAHN Uganda Civil Society Organisation (CSO) Platform dialogue where AWAC Chairs the reproductive health arm, on social protection and health insurance, addressing the persistent challenge of low government health sector budgeting and the broader spectrum of human capital development amidst multiple health system challenges. Furthermore, we joined our ally SRHR Alliance for their Uganda 2024 annual youth symposium, themed "Empowering the Next Generation of SRHR Advocates and Leaders," where AWAC showcased products from Girls Action Clubs aimed at empowering Adolescent Girls and Young Women from marginalized contexts. Moreso, AWAC was invited to the 'Annual Talk to Your Regulator Summit,' under the theme "Cultivating Trust to Improve NGO Sector Governance in Uganda." This summit facilitated valuable engagement between AWAC, other CSOs from nine regions of Uganda, and government officials and agencies, including NSSF, PDPO, FIA, KCCA, NGO Bureau, URA, URBS, and HRCU. This productive exchange enhanced our organizational compliance and contributed to strengthening overall governance of the NGO sector.

AWAC attended the Dutch SRHR Partnership Forum in Uganda and other partners showcased their work in addressing the diverse SRHR needs of young people through programs like We Lead and Make Way, and discussed Uganda's progress towards achieving the Sustainable Development Goals (SDGs) through SRHR efforts, while also exploring new areas for collaboration.

To further enhance staff capacity and institutional efficiency, AWAC facilitated continuous learning engagements with key partners such as the Infectious Diseases Institute (IDI), SAAF, The AIDS Support Organization (TASO), UKPC, MAMA Network, and the Social Innovation in Health Initiative (SIHI) at Makerere University. These engagements focused on equipping staff with critical organizational and institutional management skills, including resource mobilization, financial and procurement management, human resources, governance, and leadership. This capacity-building initiative aligns with AWAC's 2024-2028 new strategic plan, which prioritizes ten priority management areas.

AWAC is becoming a leading institution in Uganda expanding safe choice options for marginalised women. One of the biggest milestones of the year was our participation in the regional meeting of the MAMA Network in Cotonou, Benin, which also served as a rite of passage for AWAC to become a member of this network spanning 24 countries. This platform allowed AWAC to share its work in supporting grassroots communities at the periphery (such as sex workers with multiple and intersecting identities) in Uganda to access pro-choice and self-care essential SRHR services, and to network with global and grassroots reproductive health justice advocates. Subsequently AWAC has been actively participating in MAMA capacity building sessions which has augmented our capabilities in delivering quality services that enhance choice.

As part of building a partnership with the Church of Sweden we had our capacities built in a three-day Community Based Psychosocial Support and Psychological First Aid training with the East African Community of Practice—Uganda Chapter. The training aimed to improve the quality of mental health and psychosocial support services in humanitarian and development settings through the CBPS approach. This engagement provided a valuable space for knowledge sharing and learning about the implementation of the Community-Based Psychosocial Support Intervention Pyramid by various organizations. AWAC also received capacity training in Protection from Sexual Exploitation and Abuse (PSEA) training from UNAIDS-Uganda.

Some of the Challenges encountered during the year:

During the year, the Mpox epidemic created unprecedented challenges including a threat on the momentum of our field activities. While this posed challenges and threat for the timely execution of our 2024 field Drop in Centres' activities based largely on physical gatherings, it presented us with unique opportunities that saw us lean to work differently by; a) integrating the Mpox activities (especially, public health risk communication, and community based public health disease surveillance) in our HIV and SRHR response activities, b) Capitalize on the use of our Community Actors for HIV Plus (CAHIV Plus) Model, to enable us support the most vulnerable sex workers, such as sex workers using drugs in the sex work settings affected by Mpox: and c) strengthen our collaboration with partners such as the Ministry of Health, Kampala Capital City Authority, World Health Organization, American Jewish World Service, UNAIDS, Infectious Diseases Institute among others.

Psychosocial and Food Relief Needs for Grassroots Members Affected by Mpox. The growing number of Mpox-affected grassroots members, especially those that use drugs, significantly increased the demand for health and relief support, presenting overwhelming psychosocial, evacuation, and food relief challenges beyond our mandate. Our Drop-in Centres' staff also faced emotional strain due to the immense needs and suffering of grassroots members in Kampala, Wakiso, and Kyotera districts during this unprecedented public health crisis. To address these challenges, affected individuals were referred to healthcare facilities with isolation units and Mpox-specialized care, such as Entebbe Grade B Hospital.

Unanticipated cost of Personal Protective Equipment (PPE) – PPEs became part of the our operation for the staff in the Drop in Centres and those in the field. We experienced high costs

Photo taken during CBPS training with Act Alliance members

associated with PPEs which were not accounted for in the preparation of the 2024 annual budget, posing financial challenges to our operations.

Visa Denials to Countries Such as the USA, Germany, and India; Five of our organization staff team that planned to travel for conferences and resource mobilization engagements faced visa denials when applying for travel to countries like the USA, Germany, and India, primarily due to two key factors: the nature of our work as a sex work advocacy organization and the late submission of visa applications. Given the sensitivity and stigma associated with sex work advocacy, immigration authorities may have subjected applications to heightened scrutiny, potentially questioning the legitimacy of travel purposes or the likelihood of compliance with visa conditions. Additionally, delays in securing funding for the travels often resulted in last-minute applications, limiting the time available for thorough documentation and embassy requirements. These challenges highlighted the need for strategic adjustments, including integrating resource mobilization for international conferences and resource mobilization tours into the organization's annual budget to ensure timely access to funds. Furthermore, the organization must exercise vigilance in how visa applications are framed, ensuring clarity in language and alignment with embassy expectations to improve approval rates and facilitate greater participation in global

advocacy and learning opportunities.

PUBLICATIONS, MEDIA COVERAGE, AND POLICY ENGAGEMENT

In 2024, AWAC's visibility and influence grew significantly through the publication of thought leadership pieces, expanded media coverage, and targeted policy engagement at national and regional levels. These platforms allowed AWAC to not only amplify the voices of female sex workers and other marginalized women but also to shape discourse around public health, reproductive justice, and human rights.

Throughout the year, AWAC staff authored and contributed to a series of articles, editorials, and research summaries on topics including differentiated HIV care, inclusive SRHR programming, and grassroots feminist organizing. These were featured in sector-specific publications and community newsletters, and shared with civil society partners, donors, and academic institutions.

AWAC's work was also featured in national media outlets—television, radio, and print—on multiple occasions. The organization appeared in coverage of International Women's Day, World AIDS Day, International Sex Workers' Day, and public forums focused on bodily autonomy, femicide, and SRHR advocacy. Media appearances helped bring public attention to the realities facing sex workers and challenged widespread misconceptions by centering lived experience, dignity, and resilience.

In tandem with media engagement, AWAC deepened its presence in policy and advocacy spaces. The organization served as chair of the reproductive health sub-group of the RMNCAHN Civil Society Platform, contributing to national conversations on health financing, inclusion, and gender-responsive planning. It also engaged in consultative processes for the National Health Insurance Scheme and Universal Health Coverage framework, advocating for policies that reflect the realities of key populations.

AWAC also played a critical role in advancing SRHR policy dialogue within humanitarian and refugee contexts. Through platforms such as the Sexual Reproductive Health and Rights Sub-Working Group and the Women Leaders' Roundtable in Rhino Camp, AWAC highlighted the urgent needs of displaced AGYW, sex workers, and survivors of GBV.

Regionally, AWAC participated in strategy sessions with Mama Network members in Cotonou, Benin; Count Me In! partners in Nepal; and We Lead forums in Maputo and Addis Ababa. These engagements provided opportunities to share best practices, strengthen cross-border solidarity, and co-create feminist advocacy frameworks for Africa and beyond.

Through these strategic communication and policy engagement efforts, AWAC continued to expand its reach and influence—ensuring that the lived realities of sex workers and marginalized women inform not just programs and partnerships, but national and international policy agendas.

Media

In March, recognized globally as Women's History Month, AWAC amplified the voices of marginalized women particularly Female Sex Workers (FSWs) by advancing the course on abortion rights. We concluded the month by joining the global movement to destigmatize abortions and reaffirm reproductive justice. Read our article here; https://us21.campaign-archive.com/?u=67f38fc78b04ffb136efdf6ba&id=8a6188b5c5…

In a refugee community riddled with myths on reproduction and sex, Maggie Yobu, a youth activist under the Make Way Programme, is empowering young people to access SRHR services through an intersectional approach. Her inspiring story which was published by AMwA, shedding light on the importance of inclusive, youth-led advocacy in challenging contexts.

If you missed our engagement on the recent femicides on marginalized women in Uganda,

catch up with the touching stories from some of our grassroots members in this Article in the PML Daily. Details are found on this link:https://pmldaily.com/news/2024/03/awac-tasks-authorities-to-end-systemic-discrimination-violence-against-female-sex-workers.html…

In light of the worrying wave of gruesome femicide murders in Ssembabule, Wakiso, Kalangala, and Kawempe Division-Kampala District Uganda targeting Female Sex Workers, AWAC expressed her grief, solidarity and published a call for action in the statement below. Below is the link to the full statement **https://us21.campaign-archive.com/home/?u=67f38fc78b04ffb136efdf6ba&id=ed42641c03…**
AWAC also received a recognition from HIVOs through their blog on SRHR strategies in Uganda. Details of blog can be found on this link: https://hivos.org/we-link-we-learn-we-lead-empowering-young-women-and-girls/…

AWAC Organized in a highly lauded press conference following International Sex Workers Day.
More than two publications including one of Uganda's biggest news outlets published articles on the event with a focus on the challenges FSWs face with human rights and a call to action. Uganda Broadcasting Cooperation also did a feature of the press conference calling on government to de-criminalise sex work. A list of various visibility features on the press conference are below:
BBS
https://youtu.be/kmUtpywLxcc?si=QpYnNEQNvLhss6K8
Daily Monitor
https://www.monitor.co.ug/uganda/news/national/sex-workers-decry-discrimination-in-justice-systems-4654910

PHM Daily: Sex workers organization wants authorities to prioritize protection of marginalized women
https://www.pmldaily.com/news/2024/06/sex-workers-organization-wants-authorities-to-prioritize-protection-of-marginalized-women.html
WATCH DOG UGANDA
https://www.watchdoguganda.com/news/20240613/169066/awac-uganda-urges-government-action-to-protect-marginalized-women-especially-sex-workers.html
The Examiner
https://examiner.co.ug/news/national/ugandan-sex-workers-facing-new-wave-of-killings/

Pictures above: Taken during the Post International sex workers' day commemorations

Organized an X-Space session on what it means to be a human rights defender in Uganda amidst a shrinking Civic Space.
This engaged renown and celebrated media personalities such as Solomon Sserwanja,and activists such as Nicholus Opio, Agather Atuhaire. This virtual forum created a space to share our analysis of the laws and policies impacting marginalized communities' rights and build a case for repealing or amending these laws. Through this space, participants had a unique opportunity to share their personal stories, challenges, and experiences with non-progressive laws, enhancing a deeper understanding of the ramifications of these laws and the need for change.

AWAC's Performance Against The United Nations Sustainable Development Goals' Agenda

AWAC's 2024 work tells a story of communities taking charge of their health, dignity, and futures; while advancing seven key Sustainable Development Goals (SDGs): SDG 1 (No Poverty), SDG 3 (Good Health and Well-being), SDG 5 (Gender Equality), SDG 8 (Decent Work and Economic Growth), SDG 10 (Reduced Inequalities), SDG 16 (Peace, Justice, and Strong Institutions), and SDG 17 (Partnerships for the Goals). In Hoima, the Co-CREATE project tackled high HIV rates with community-led solutions, integrating sexual and reproductive health (SRHR) services, gender-based violence prevention, mental health support, and economic empowerment groups that reduce vulnerability. This approach not only improves health outcomes but strengthens resilience, particularly for sex workers, adolescent girls, women injecting drugs, and children in sex work settings.

AWAC's Drop-In Centres reached more than 9,000 people with comprehensive health services, from cervical cancer screening and Mpox prevention to innovative ART delivery models like CDDPs and CCLADs. In Kampala's hotspots, widespread condom distribution and SRHR outreach empowered people to make informed decisions about their bodies and lives. Through the MakeWay program and expert-client networks, peer educators gained skills in advocacy, counseling, and income generation, helping services reach even the most excluded communities. By weaving livelihoods into healthcare, AWAC addressed the economic roots of poor health (SDG 1 & SDG 8) through CHLEG groups and waste-to-craft projects. Dialogues with cultural, religious, and political leaders challenged stigma and discrimination, while swift responses to emerging threats like Mpox showed AWAC's readiness to protect marginalized women in times of crisis.

These efforts are grounded in community-led research, quality improvement, and policy engagement, ensuring that impact is both immediate and sustainable. Partnerships with the Embassy of the Netherlands, UNAIDS Uganda, CDC Atlanta, Kampala Capital City Authority, and the Ministry of Health reflect SDG 17 in action—turning grassroots realities into systemic change.

In 2024, AWAC proved that when health, economic empowerment, and rights move forward together, the path toward equality, resilience, and opportunity becomes not just possible, but inevitable.

Financial Overview and Funders Acknowledgment

In 2024, AWAC remained committed to financial integrity, transparency, and strategic resource mobilization as pillars of institutional sustainability. Despite operating in an increasingly challenging environment—characterized by donor fatigue, shrinking civic space, and economic uncertainty—AWAC made significant progress in securing funding, expanding partnerships, and ensuring the continuity of essential services.

The year began with a critical funding gap following the forced closure and eviction of the Kampala Drop-In Centre in 2023. In response, AWAC launched an emergency fundraising campaign and successfully mobilized $150,000 to initiate construction and remodeling of a new facility. This investment not only enabled service continuity for key populations but also strengthened donor confidence and affirmed AWAC's commitment to crisis responsiveness.

AWAC also deepened its relationships with long-standing funding partners while cultivating new strategic collaborations. Core financial and technical support came from a diverse group of allies, including UNAIDS, the French Embassy in Uganda, Initiative Marianne, the Love Alliance, Aidsfonds, Act Church of Sweden, the Global Fund for Women, CREA, the Open Society Foundations, FAWE, Mama Network, the Sexual Rights Initiative, Count Me In! Consortium, the We Lead Consortium, and Amplify Change.

These partnerships enabled AWAC to implement a wide range of programs—from SRHR and HIV outreach to mental health support, youth empowerment, and economic justice. Donor funds were used not only for direct service delivery but also to build institutional capacity, support staff development, and facilitate grassroots movement building.

To enhance internal accountability, AWAC strengthened its financial systems with updated risk management protocols, fraud prevention policies, and regular audits. The finance team worked closely with program leads to ensure that expenditures aligned with strategic priorities and that every dollar advanced AWAC's mission to promote health, dignity, and justice for marginalized women.

AWAC extends heartfelt gratitude to its donors, technical partners, and in-kind supporters for their trust, flexibility, and sustained investment in feminist organizing, grassroots leadership, and community power. Their support in 2024 enabled AWAC to meet urgent needs, seize new opportunities, and continue building a future rooted in equity, resilience, and self-determination.

ALLIANCE OF WOMEN ADVOCATING FOR CHANGE (AWAC)
AUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31ST DECEMBER 2024

STATEMENT OF FINANCIAL POSITION AS AT 31ST DECEMBER, 2024

	NOTES	2024 UGX	2023 UGX
ASSETS			
NON CURRENT ASSETS			
Property Plant and Equipment	2.0	1,056,821,674	762,827,651
Total		**1,056,821,674**	**762,827,651**
CURRENT ASSETS			
Cash and Bank Balances	3.0	196,368,818	236,507,104
Accounts Receivables	4.0	-	128,822,391
Total		**196,368,818**	**365,329,495**
TOTAL ASSETS		**1,253,190,492**	**1,128,157,146**
FUNDS AND LIABILITIES			
FUNDS			
Restricted Funds	5.0	167,421,926	348,925,409
Capital Fund	6.0	596,821,674	302,827,651
General fund		213,986,648	(5,275,042)
Total		**978,230,248**	**646,478,018**
NON-CURRENT LIABILITIES			
Borrowings	7.0	251,754,744	443,819,048
Total		**251,754,744**	**443,819,048**
CURRENT LIABILITIES			
Accounts payables	8.0	23,205,500	37,860,080
Total		**23,205,500**	**37,860,080**
TOTAL FUNDS AND LIABILITIES		**1,253,190,492**	**1,128,157,146**

The financial statements set out on pages 10 to 21 were approved by the board of directors on 29th/8/2025 and signed on its behalf by:

Chairperson

Executive Director

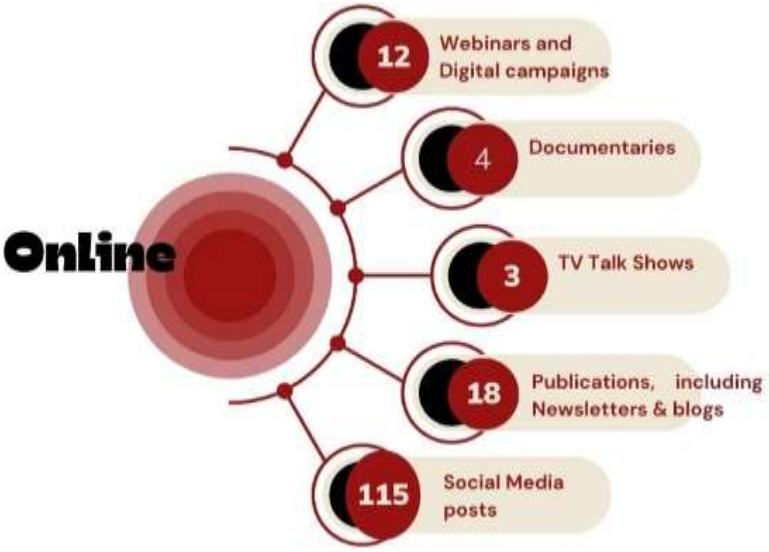
ALLIANCE OF WOMEN ADVOCATING FOR CHANGE (AWAC)
AUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31ST DECEMBER 2024

STATEMENT OF COMPREHENSIVE INCOME	Ref.	2024	2023
INCOME		UGX	UGX
Grants and Donations	9.0 (a)	2,400,602,106	1,801,942,185
Other Income	9.0 (b)	4,343,661	190,698,024
Total		**2,404,945,767**	**1,992,640,209**
EXPENDITURE			
Capital Expenditure	10.0	323,260,603	234,563,814
Programs Activity Expenses	11.0	1,175,777,297	1,059,344,970
Administration Expenses	12(a-c)	625,890,424	448,430,165
Total		**2,124,928,324**	**1,742,338,949**
Surplus for the year		**280,017,443**	**250,301,260**
General Fund			
Balance as at 1 January		(5,275,042)	93,349,107
Reclassification of Funds		106,666,173	-
Surplus for the year		280,017,443	250,301,260
Less transfer to restricted funds		(167,421,926)	(348,925,409)
Balance as at 31st December		**213,986,648**	**(5,275,042)**

Note: Reclassification of Funds relates to opening general balance funds that was reported under restricted funds.

2024
in Numbers

365 DAYS IN REVIEW



SOCIAL MEDIA 2024 GROWTH SUMMARY

TOP SOCIAL MEDIA PLATFORMS

X Platform 32%
Facebook 37%
Instagram 26%
LinkedIn 11%

AUDIENCE GROWTH

New Followers

179
398
987
81

Our Grassroots Members

Only Rights & Social Economic Justice Can Stop the Wrongs. Leave No One Behind!

Key Stake holders and Partners

Conclusion and Looking Ahead

The year 2024 was a testament to AWAC's resilience, adaptability, and the unshakable power of grassroots leadership. Against the backdrop of political instability, public health crises, and structural oppression, AWAC continued to stand firm in its mission to uplift the voices and rights of female sex workers and other structurally excluded women in Uganda. From launching the Co-CREATE project in Hoima, to rebuilding critical infrastructure in Kampala, to expanding economic empowerment groups for sex worker and adolescent girls and young women in sex work settings, AWAC responded to crisis not with retreat, but with boldness, innovation, and collective care. We centered lived experience in evidence generation, policy engagement, and service delivery—and ensured that our work remained deeply rooted in community ownership and feminist values.

As we look to 2025 and beyond, AWAC remains committed to expanding our Hub of Holistic Transformation, scaling up pro-choice SRHR access, and ensuring that our advocacy, programming, and institutional development are intersectional, inclusive, and sustainable. We will continue to champion bodily autonomy, resist criminalization and stigma, and build transnational solidarity with movements across Africa and the world. Most of all, we move forward with a renewed belief in our core truth: that those closest to the struggle must lead the way to liberation. Our members, staff, partners, and supporters make this work possible—and together, we are building a Uganda where no one is left behind.