PRIORITIES FROM THE TRANS COMMUNITY IN UGANDA FOR CONSIDERATION IN THE COVID-19 RM 2.0 GRANT

The consultation took place on the 21st of April 2021, it was attended by 16 Trans activists in & out of Kampala, and the discussion yielded the following priorities;

As the COVID-19 pandemic unravels, consequences of the measures imposed to contain it have highlighted vast and rapidly growing inequities threatening the livelihoods of the most vulnerable. This is especially true for the Transgender and Non-Binary (TGNB) community, who have been uniquely affected in several ways including risk of exposure to the virus and its adverse outcomes, delays in access to gender-affirming care, stigma and discrimination, coupled with diminished access to social support, that is crucial to their survival; all these challenges exposed them to a huge risk of mental health yet the health systems do not support them to access and utilize the much needed SRHR services and information they need for a healthy and productive life. Key to note is that these challenges are occurring alongside numerous legal and interpersonal challenges and attacks on transgender rights. Unfortunately, human & financial resources for Government health programs in Uganda continue to be stretched thin in the COVID-19 response hence expanding the mandate to Communities to alert and provide guidance and services that responds to the community needs.

The Global Fund creates a great opportunity with the COVID-19 RM funds because it means that there is an opportunity for funds to respond to the adverse effects of the COVID-19, additionally, communities like the trans can be supported to participate in and own processes that address their challenges.

Highly Prioritized:

1. Increase access to mental health services access to the trans community through establishing and or strengthening community-based peer to peer psycho-social support groups to conduct regular mental health awareness sessions, health camps and well-ness sessions. Through this approach Trans-activities and peers should be trained and supported to provide psycho social support to fellow peers through mobile phones, text messages, online interactions as well as incorporating door to door deliveries and home visits/ follow ups. The peers need to be facilitated

2. **Strengthen and support community-based treatment platforms and Drop-in Centers (DICs)** to ensure continuous access to treatment of HIV and TB services and management of the side-effects. These centers need to futher be supported with commodities relevant to the trans*communities including; Condoms, lubricants, sanitary wear, Stand to Pee equipment, binders, Sanitary towels or tampons, SRHR information, and COVID-19 awareness IEC materials. The DICs need to also be equipped with therapists and counsellors trained to respond to the unique needs of the trans communities all in a bid to ensure access and utilization of the SRHR information and services provided.

3. **Economic empowerment;** Capacity building on saving and financial management for members of the trans community; the trainings need to focus on income generating activities such as tailoring, candle making, hair styling, make up, bakery, farming, poultry, electronics, mechanics. There needs to also be funds set aside to support start up initiatives (capital) for the different members, strengthening relationships with vocational trainings for formal skilling of the different people including providing scholarships for the most vulnerable and indignant. The activities are meant to make members of the trans community financially dependent and empowered.

4. Strengthening trans CBOs to respond to the challenges in their community; there is need to build and strengthen the capacity of the trans led CBOs to design programs that respond to the challenges of their peers, this can be done through dedicating funds to strengthen trans led CBO management and governance, there is a need for targeted stakeholder engagement through dialogues with like- minded partners, law enforcement, transgender persons, local leaders and opinion influencers to lobby public support for protection and realization of the rights of trans people against stigma and discrimination.

5. Facilitation of trans peer educators; there is need to support trans peer educators to continue grassroot service delivery and psycho social support for peers in the different communities; the peers can be supported with mobile data, airtime, transport allowances or fuel (bicycles or motorcycles), phones, PPEs and IEC materials to make their work easier

Other Recommendations for consideration.

- Rapid assessment/ operational research on the effects of the COVID-19 pandemic on the SRHR issues/ mental health, IPV/GBV and how they are affecting the trans- community
- Monkey survey on security for the transgender people in Uganda
- Sensitization and awareness programs on the challenges the transgender communities struggle with
- IPV/ GBV intense response mechanisms including dialogues with survivors, Relocation of transgender communities, especially those that face security concerns or survivors of IPV/GBV, Set up of toll-free help line for trans people for IPV/GBV reporting/referrals to address increased GBV/IPV implications due to COVID-19 pandemic
- Strengthening trans CBOs to be legally registered and supported to deliver services in their communities.
- Nutritional support (and other livelihood packages) especially for those living with HIV and the sex workers
- Providing transport for the trans members who have challenges accessing health facilities.
- Support CBOs to monitor the impact of COVID-19 on health service providers in their communities. The community can be supported to develop these tools (score cards) and trained on how to monitor these services.