



**COVID-19 VACCINATION  
DRIVE FOR KEY POPULATIONS  
IN UGANDA**





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Men of the Night Uganda (MONU) is a male sex-worker led organization registered under the Registration Act, under companies limited by guarantee. The advent of MONU saw it anchoring strong grounds on being a support group for male sex workers.

This drive later outgrew self in 2013, from being just a support group to becoming an organization dedicated to advocacy for health and human rights of male sex workers from different walks of life in the country; including but not limited to urban refugees operating within the nation.

As an organization whose running is based on individual membership and collaborative partnerships; MONU's governing principles align deeply on virtues of Human Rights, Accountability, Economic Empowerment, Inclusivity while functioning in the jurisdiction of the national and international Legal framework.

MONU's membership register currently has 1,028 members across Uganda, who are direct beneficiaries receiving a wide range of activities inclusive of healthcare and nutrition services through our referral/member benefit systems, financial literacy and economic empowerment through technical skills teaching and acquisition.

We have thematic areas of work where every project we encounter must fall in one or more of these thematic areas. These areas happen to be; *Health Care, Research and Advocacy, Information Dissemination, Institutional and Organizational building as well as Community building.*



Following a successful struggle, the Ugandan government was able to procure vaccines for her citizens; to combat the then fast spreading novel Corona Virus. These doses though, initially, were subscribed for; for consumption, by specific groups stipulated by the government; which consisted of health-workers, security personnel, teachers, the elderly (categorized as persons aged 50 years and older) as well as person within the age bracket of 18 to 50; who had debilitating underlying health conditions.

This arrangement arguably was deemed fit in a global crisis like this; however not only does it leave out a huge portion of key population individuals on the vaccination program; but also amplified the spread of both the Corona, as well as the HIV as a great of HIV related services were put on hold secondary to the episodic lockdowns.

Under economic stress brought about by the pandemic; a great deal of key population individuals had resorted to engaging in transactional sex, moving distances to meet up in varied destinations; a predisposing factor to the ease spread of Covid-19, and possibly HIV too, amongst the many STIs.

Even after government procuring a sufficient number of vaccination doses for a good number of people; many still had challenges enrolling for vaccination amidst myths and misconception on the science of the vaccine, and whom its manufactured for! In solidarity with the global call for vaccination; MONU begot a campaign, aimed at sensitizing both the sex workers movement as well as the LGBTIQ+ on the benefits of receiving the covid-19 vaccine whilst clarifying information on the myths and misconceptions persons in these communities had on the matter.

For a period of 5 months into this campaign, MONU in collaboration with sister organizations who also take care of key populations; was able to raise awareness on Covid-19 and also bring vaccination services closer to the community; aided by the public health care personnel.

# UNDERSTANDING OUR TARGET GROUP

We worked with and for key populations, with a keen interest for sex workers as well as members of the LGBTQ+ community. 80% of these youths are within the age bracket of (18 - 35).

In regards to highest levels of education attainment; 15% of this population attained higher education with a university degree, 10% of them having sat for their A-Levels, 20% attained up to their O-Levels; with 10% having made it through primary level and 45% illiterate. This percentage distribution partly accounts for the hesitancy of some individuals to enroll onto the vaccination program, amidst shadowing of hearsay, myths and misconceptions!



As the WHO recommendations deemed it fit for persons to acquire the second dose, let alone a booster dose; there was a high demand of services this campaign has had to offer. MONU was able to partner with sister organizations who share an interest in target group; in physical locations beyond the MONU's jurisdictions. This resulted into the campaign being effective in serving key populations in areas of Kampala, Wakiso, Mukono, Jinja, Mbale, Mbarara, Mityana and Masaka; all of whom are major divisions within central Uganda, with a multitude of diverse communities in dire need of healthcare services.

In order to access key populations in our target group beyond our physical jurisdictions, we needed to engage sister organizations in other communities so as to help in the smooth running of extending the services to all individuals.

The following organizations whose services are in the best interest of key populations were the ones we collaborated with to make this a success.

- **Ice Breakers Uganda (IBU)**
- **Sexual Minorities Uganda (SMUG)**
- **Uganda Network Of Sex worker led Organizations (UNESO)**
- **Kuchu Times (KT) media**
- **Children Of the Sun Foundation (COSF)**
- **Freedom and Roam Uganda (FARUG)**
- **Let's Walk Uganda (LWU)**
- **Kuchu Shiners Uganda**
- **Coalition Of Health Rights Education (COHRE)**
- **Initiatives for Persons Infected and Affected (IPIA)**

- **Alliance of Women Advocating for Change (AWAC)**
- **Lady Mermaid Empowerment Center (LMEC)**
- **Angels Refugee Support Group Alliance (ARSGA)**
- **Human Rights Awareness and Promotion Forum (HRAPF)**
- **Gather For Children**
- **Wave of Legacy Alliance Initiative (WALAI)**
- **Trans Youth Initiative Uganda (TYI/U)**

These organizations already run communities of key populations and it was right and just to collaborate with them in order to meet the huge demand of services for individuals within these communities collectively. This also served the purpose of inclusivity for all key population individuals, by not leaving anyone behind in this Covid-19 sensitization and vaccination campaign.



Our targets were met when our audience did involve persons that are female and male sex workers, refugees as well as individuals from the LGBTIQ+ community.

From the various vaccination centers (CSOs) during the entire vaccination project, we were able to enroll 4,491 persons for the 1st dose of the vaccine, With 1,001 persons enrolled for the 2nd. With these, some were able to receive both their 1st and 2nd vaccination doses with us, whereas some joined in on our vaccination campaigns for their 2nd doses only. A total of 5492 doses were administered, and details of this activity with a summary attached are in the table below.

Prior to this campaign, the activities of the Initiatives for Persons Infected and Affected (IPIA) had its activities and premises from time to time under strict vigilance and ever on the lookout for potential harm from authorities as well as members of the neighboring community.

The chairman of the area after being approached with the Covid-19 sensitization and vaccination campaign bared an open attitude and perception on the community; which led to full

functionality of the facility with its doors wide open to provide services to all who come through to access them. Throughout the due course of the campaign in various areas, we did discover the need to amplify health services in regard to sexually transmitted infections as well as Hepatitis prevention services. As a result, on top of the Covid-19 health services, we were able to take along with us HIV testing equipment's and prevention treatment such as PrEP and PEP, STI screening and management as well as Hepatitis screening and vaccination.

Partnering with sister organizations made it possible to access the big demand of such services, which in turn has given us MONU; visibility onto a platform of organizations that take keen interest in issues concerning key-population communities; specifically, the LGBTIQ+ as well as sex workers.

This progress and more, we hope to carry on in the time to come.



# PROJECT ASSESSMENT

COVID-19 VACCINATION DRIVE FOR  
KEY POPULATIONS IN UGANDA

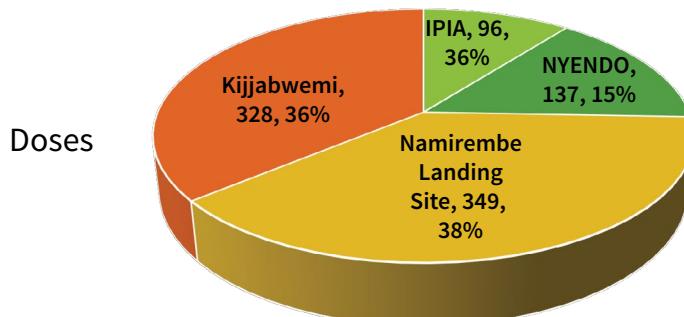
Date	Location	1 <sup>st</sup> Dose	2 <sup>nd</sup> Dose	Total Doses
SEPTEMBER, 2021				
Sept 10, 2021	IBU	52		52
Sept 15, 2021	UNESO	30		30
Sept 17, 2021	IBU	20		20
Sept 22, 2021	KUCHU SHINERS	150		150
Sept 24, 2021	KUCHU SHINERS	80		80
Sept 29, 2021	COSF	38		38
Sept 30, 2021	KUCHU SHINERS	158		158
OCTOBER, 2021				
Oct 01, 2021	LWU	46		46
Oct 07, 2021	ARCH APARTMENTS	24		24
Oct 08, 2021	COHRE	80		80
Oct 14, 2021	JINJA	120		120
Oct 27, 2021	COSF	35	40	75
Oct 28, 2021	KUCHU SHINERS	127	133	260
Oct 29, 2021	LWU	24	40	64
Oct 29, 2021	FARUG	15		15
Oct 29, 2021	IPIA	96		96
Oct 29, 2021	NYENDO	137		137
NOVEMBER, 2021				
Nov 02, 2021	AWAC	78		78
Nov 04, 2021	KIMESE	11	15	26
Nov 04, 2021	WALAI	58		58
Nov 05, 2021	COHRE	133	27	160
Nov 07, 2021	IBU	07	33	40
Nov 12, 2021	Namirembe Landing Site	349		349
Nov 16, 2021	TYI-Uganda	120		120
	UNESO	15	20	35
Nov 17, 2021	Kuchu Shiners	150	156	306
Nov 19, 2021	Bugembe, Jinja	230	110	340
	Kuchu Shiners	117	133	250
Nov 20, 2021	IBU	10	12	22
Nov 23, 2021	ARSGA	18		18
Nov 26, 2021	Kuchu Shiners	132	58	190
Nov 27, 2021	FARUG	12	14	26
Nov 29, 2021	Kijjabwemi playground, Masaka	328		328
DECEMBER, 2021				
Dec 03, 2021	HRAPF	20		20
	SMUG	08		08
Dec 06, 2021	MONI Mbale (Day 1)	192		192
Dec 07, 2021	MONI Mbale (Day 2)	200	30	230
Dec 08, 2021	Nauyo Mbale(Day 1)	280	15	295
Dec 09, 2021	Nauyo Mbale(Day 2)	260		260
Dec 11, 2021	Nambale, Mityana	56		56
FEBRUARY, 2022				
Jan 13, 2022	A-Z, Jinja	24		24
Jan 17, 2022	MUKONO	175	141	316
Feb 17, 2022	AWAC	60	08	68
<b>GRAND TOTAL</b>		<b>4,491</b>	<b>1,001</b>	<b>5,492</b>

# REGIONAL ASSESSMENT OF THE VACCINATION PROGRAM

As an organisation that prides in running effective health mobile clinics, below are regions we've been able to reach; stipulating the number of doses dispensed within these regions. We do hope to reach as many areas as possible within the country for purposes of bringing healthcare services closer to persons whom distance has become a huge hindrance to accessing and utilization of health care services.

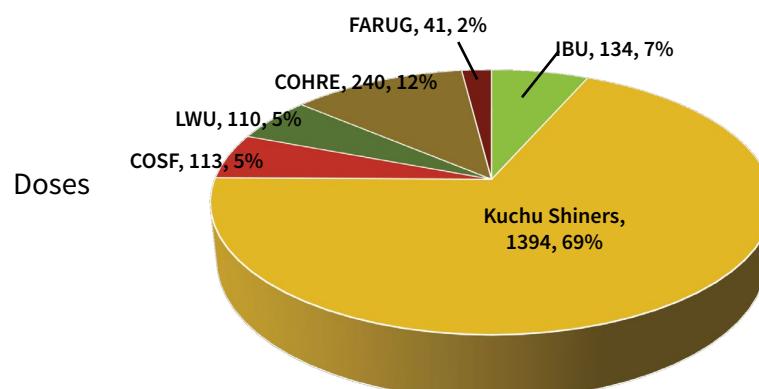
## Masaka

910 doses administered within Masaka region from majorly 4 centers, Namirembe landing site bringing in 38% of individuals for the program with 349 doses in this region.



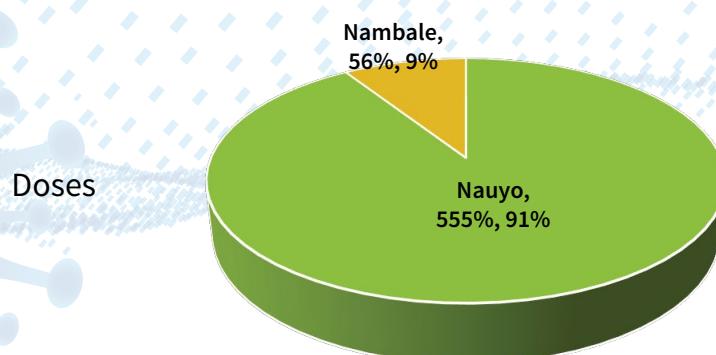
## Wakiso

A total of 2032 doses were administered within Wakiso region from six centers; with Kuchu Shiners having 69% contribution of individuals with 1394 doses received



## Mityana

We were able to dispense 611 doses within Mityana region from majorly 2 centers, Nauyo bringing in 91% of individuals for the program with 555 doses in this region.

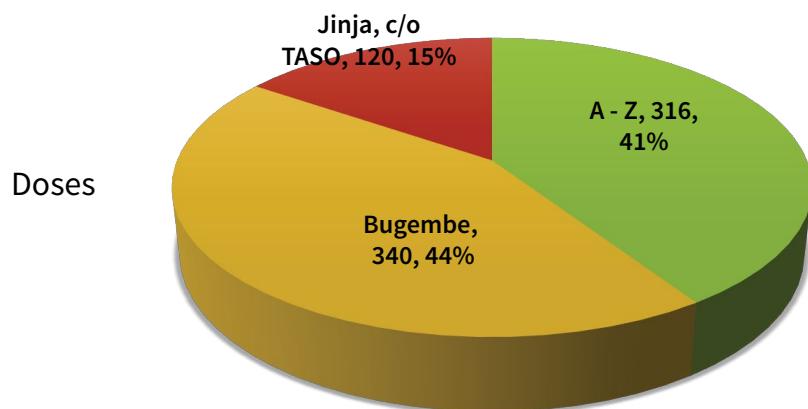


# REGIONAL ASSESSMENT OF THE VACCINATION PROGRAM

COVID-19 VACCINATION DRIVE FOR KEY POPULATIONS IN UGANDA

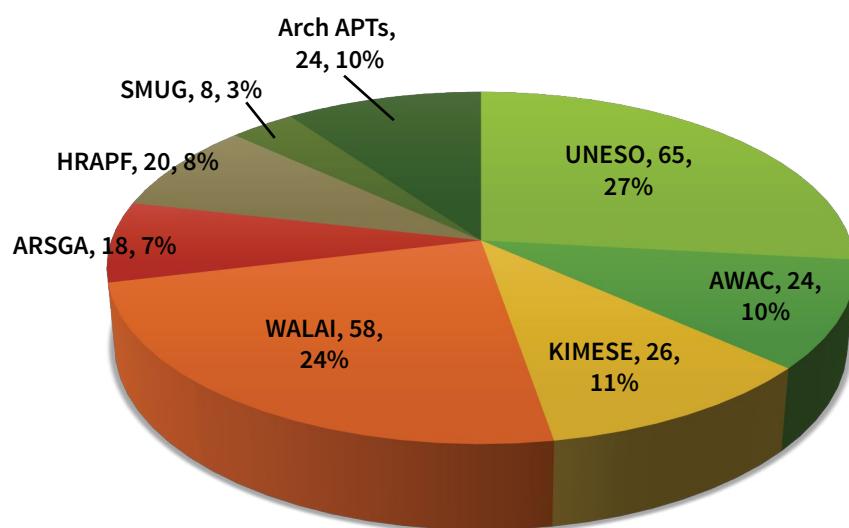
## Jinja

A total of 776 doses were administered within Jinja region from three centers; with Bugembe having 44% contribution of individuals with 340 doses received.



## Kampala

321 doses were administered within Kampala region from majorly 8 centers, UNESCO bringing in 27% of individuals for the program with 65 doses in this region.



## Mbarara & Mbale

A total of 120 doses were administered within Mbarara region from TYI-Uganda with a total of 120 persons reached whereas 422 doses were administered within Mbale region also from one centre being MONI, with a total of 422 persons reached.

# REGIONAL ASSESSMENT OF THE VACCINATION PROGRAM









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WITH A COMPROMISED HEALTH SYSTEM LIKE OURS, ONE WITH SHORTCOMINGS HERE AND THERE IN ITS EFFICACY; ITS QUITE UNLIKELY THAT WE TRANSCENDED WITHOUT CHALLENGES. BELOW ARE SOME OF THE CHALLENGES WE ENCOUNTERED.

Fast spreading negative hearsay and conspiracies on the Covid-19 vaccine fueled a portion of individuals within communities not to get vaccinated; asserting that it could be another political agenda from the west to wipe out our race.

Earlier reports from the west of a one AstraZeneca vaccine causing blood clot formation as an adverse effect onto vaccinated recipients was another hearsay that discouraged persons from getting vaccinated. Mass sensitization done by our health professionals helped curb this challenge.

Most of the vaccines procured for our country (AstraZeneca and Pfizer); did require a minimum of 2 doses for maximum efficacy and potency to prevent against easily contracting the virus. With a number of individuals having received the 1st dose of the vaccine; it was quite a challenge having community members come through for their 2nd dose of the vaccine. Having taken contacts of these individuals, we did our best keeping in touch with them, assessing reasons why they haven't received the 2nd dose yet as well as finding them favorable locations close to their localities where they could easily access the 2nd dose for those whose location access was a hindrance.

Transportation of our team from our offices into outreach communities using public means of transport was often times a challenge, specifically on days when the weather was quite unfavorable (rainy), as well as maintaining the vaccines in cold chain environment, and other healthcare equipment from our offices to the outreach destinations.

Every vaccinated citizen has his/her credentials enrolled into the government's health management information system, as an update to whom it may concern that a particular individual has been fully or partially vaccinated. We had challenges on this matter, as updates take much longer than promised, which would render some vaccinated persons unvaccinated; impeding them of any opportunities that lay at hand for vaccinated individuals within the country.

With the pandemic still at hand, a great deal of work still lays ahead of us. There's still need to boost our sensitization and vaccination campaign; by taking it to more and more communities with an aim of meeting the huge demand out there. In the same vein, we'd like to extend this program to family members of individuals within our communities to ensure total coverage of vaccination and awareness, in environments from which community members are coming.

We as MONU, are arranging various activities of bringing together a great deal of peer educators, so as to strategically health educate them and later decentralize them away into various key population communities to help sensitize individuals on the virus and its dynamics.

Data collected from this project too, is to be analysed more with regard to boosting our mapping and outreach services, to help decentralize more services to individuals in far to reach areas. We are to use the same already established network to multiple communities of key populations; to render them other services within our services docket which are equally vital to their well-being.

Furthermore, it has been in our greatest desire for the sensitization and vaccination program to have reached out to as many key population communities beyond central Uganda, in the rural settings - in the bid of leaving no one behind, particularly those in far to reach areas, to whom distance to access and utilize resources is a major challenge.

Many thanks to the Administrators from our sister Key Population organizations with whose collaboration this project became a reality, creating impact in the lives of individuals in various communities.

A vote of thanks is registered to Justus Bukenya, our communications and Membership officer; Dr. Frank Mugisha and the entire SMUG team, Luswata Brant and IBU team, the entire KUCHU TIMES media group, the entire KUCHU SHINERS team, Fiona Nattabi and the entire MONU team for the spirit of team work; as well as Mr. Cameron Kakande one of our co-founders for the exceptional support rendered throughout the entire running of this project.

Lastly; to our donors, specifically UHAI, All OUT, and others who've preferred to be anonymous; this project would definitely never have been a reality without you people breathing life into it with your benevolent souls. Many thanks. Much appreciated.

