1st Anniversary of APCOM’s Special Series on the COVID-19 Effect

LGBTQI and HIV community
Reflect, Reorganise & Rebuild
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Our first issue of The Special Series on the COVID-19 Effect was launched on 3 April 2020 called ‘Reflecting the Current Realities Faced by the Communities We Serve’, and to commemorate this special milestone of the APCOM’s Special Series on the COVID-19 Effect, we are releasing 1st Anniversary of APCOM’s Special Series on the COVID-19 Effect: LGBTQI and HIV community Reflect, Reorganise & Rebuild, featuring UN IE on SOGI, our Ambassadors, and analysis from the stories submitted by our communities across Asia Pacific region of the pandemic’s impact on SOGIESC communities, HIV services and Key Populations.

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We need a community-led and community-owned funding mechanism for communities working on LGBTQI and HIV issues in Asia Pacific, and COVID-19 really amplified the need for such mechanism for emergencies like COVID-19 but also to ensure the resilience and sustainability of activists and organizations to continue to do their important work in the region.”

Midnight, Executive Director APCOM
On 29 October 2020, I presented my report on the impact of COVID-19 on LGBT persons to the 75th General Assembly of the United Nations:

I want to, once again, acknowledge the work of activists, human rights defenders and civil society organisations, which already operated under duress before the pandemic, and have continued to pursue their mission and accomplish impactful work. Over the last five decades, LGBT organisations have created and collaborated on a complex system of early warning, data gathering, emergency relief, advocacy and follow-up, and have built a sense of community. That system is of profound value to the lives of LGBT persons, as it has demonstrated its unique capacity to effectively and efficiently respond to needs at the most intimate and local levels. That system has also been instrumental in the unique global alliances created to address the HIV/AIDS pandemic; to ensure recognition of the rights of LGBT persons as human rights; and to initiate social transformation of unprecedented depth and width by promoting the inclusion of LGBT persons in education, health, employment, housing and all other realms of society.

I would like to commend APCOM on their dedicated work, and in particular their significant contributions to the knowledge base on the impact of the COVID-19 pandemic during 2020. With dozens of publications and actions of outreach actions, APCOM is firmly and brilliantly placed in the system that I described in my address to the UN General Assembly.

The COVID-19 pandemic reproduces and increases the patterns of discrimination, social exclusion and violence against LGBT persons. The existence of criminalisation laws, for example, further exposed LGBT persons to police abuse and arbitrary arrest or detention, and also prevented them from fully accessing aid programs and services put in place by States. Social isolation recommendations have often put LGBT children, youths and elders in adverse settings, as some were forced to endure prolonged exposure to unaccepting family members, aggravating rates of domestic violence, and physical and emotional abuse. All of this resulted in deteriorating mental health, such as anxiety, depression and suicidal ideation. Furthermore, in many jurisdictions, LGBT persons overwhelmingly rely on informal economies which were heavily affected by COVID-19 restrictions. This increased economic instability, as well as housing and food insecurity.

In light of these findings, I created a framework to support the crafting of efficient and effective solutions to these problems, in a way that addresses the realities of populations who are at a disadvantage when facing the pandemic: the ASPIRE Guidelines 1. They are a set of recommendations to ensure that measures designed to respond to and recover from the COVID-19 pandemic are free from violence and discrimination based on sexual orientation and gender identity. These guidelines urge States to:

- Acknowledge that LGBT persons are everywhere, and that they are hard-hit by the pandemic;
- Support the work of LGBT civil society and human rights defenders, and continue to learn from their significant achievements;
- Protect LGBT persons from violence and discrimination in the pandemic context, and actively prosecute perpetrators;
The guidelines also call on States to ensure that:

- Indirect discrimination is assessed as a real and significant risk, one which exacerbates stigmatisation against LGBT persons;
- Representation of LGBT persons is prioritised in the process of design, implementation and evaluation of COVID-19 measures, - and that the voices of LGBT persons are reflected in policies;
- Evidence concerning the impact of COVID-19 on LGBT persons is gathered while following standards of good practices.

The courage and dignity of our lesbian, gay, bisexual, trans and gender diverse siblings, and the determined work of those who, like APCOM, work with resolve and results to promote and defend their rights, continue to inspire us and give us hope every day. The challenges, which already were monumental and were intensified by the pandemic, may appear insurmountable. But even in the most challenging of contexts, it becomes evident how strong and resourceful we can be together. The resolve and results of APCOM is a clear example of the virtues that lie at the base of this resilience.

Victor Madrigal-Borloz
United Nations Independent Expert on Sexual Orientation and Gender Identity (IE SOGI)

Aguirre, Costa Rica
25 March 2021
1st Anniversary of APCOM's Special Series on the COVID-19 Effect
LGBTQI and HIV community Reflect, Reorganise & Rebuild

APCOM Special COVID-19 Newsletter Series: One Year On

Who would have thought we would be doing this Special COVID-19 Effect Series newsletter for this long? How did a year go by so quickly, and will we come out of the pandemic through building a more equal and sustainable society?

In the Highlight issue of Special COVID-19 Effect Series, APCOM reflected on the ever-changing challenging situation and the impact, both in the short and long term of COVID-19 on the communities we serve. We are all dealing with the consequences of COVID-19, including services being unavailable, inaccessible or unaffordable because of restrictive measures to curb the pandemic. We are witnessing community organisations having to close operations due to lack of sustainable funding; how COVID-19 has exacerbated discrimination and marginalisation of LGBTQI communities and key populations, and the burden of community leaders that is negatively affecting their mental health and abilities to perform.

The COVID-19 Effect series also documented the work and efforts of APCOM, partner organisations, communities and individuals that demonstrated resourcefulness, resilience and ability to reaching the most marginalised. We hold and share these inspiring stories on overcoming challenges and working together to tackle HIV and advocate for LGBTQI rights, as we are closely monitoring how the “new normal” has triggered increased stigma, legal restrictions and discrimination of marginalized communities.

APCOM is not immune to the pandemic, and we do not have all the answers. However, we believe that by consistently and continuously amplifying the voices of the communities we serve, we are reminding our communities that they are not forgotten or alone. We also remind the wider community that there are larger issues to tackle in terms of inequity and inequality, and that it is crucial that community networks and organisations are responding to the most marginalised in their immediate community.

We need a community-led and community-owned funding mechanism for communities working on LGBTQI and HIV issues in Asia Pacific. COVID-19 has really amplified the need for such mechanism for emergencies like COVID-19, but also the need to ensure the resilience and sustainability of activists and organisations to be able to continue to do their important work in the region.

Thank you to our partners who have contributed their stories to our many newsletters. This issue is our 22nd since we began the newsletter series a year ago in April 2020!

Thank you also to our donors who continues to support APCOM’s work.

Midnight
Executive Director
Reflection from our Ambassadors

COVID-19

The Second Coming

The resurgence of the COVID-19 epidemic after a period of quiet, leaves a feeling of déjà vu of similar experiences with the AIDS epidemic which also initially resulted in flattening the curve of new infections but failed to meet fast track targets. In both instances, we have seen the most marginalised and vulnerable populations being disproportionately impacted by the epidemics.

During the COVID-19 crisis we have witnessed vulnerable and marginalised people losing not only essential services provided by national AIDS and TB control programmes, such as ART services, prevention interventions, including condoms, needles and syringes, but also vulnerable and marginalised people losing their basic livelihoods. What has made matters worse, is that even the minimal support that governments were trying to provide did not reach vulnerable populations in most need. On rare occasions, organisations such as the Global Fund, attempted to provide direct support to communities, but even these efforts got stuck in bureaucratic delays.

A glaring inadequacy in COVID-19 responses is the top-down nature with no or little involvement of grassroots organisations and communities in many Asia Pacific countries. From federal level to the ground, the majority of staff engaged in COVID-19 responses are public health care workers, employed by the government, or law enforcement officials. Communities are regarded as beneficiaries rather than equal partners. This lack of meaningful involvement of communities has also resulted in complacency when the epidemic began to show a downward trend. It was a matter of time before the second and third surge of infections happened catching the countries off guard. In contrast, the hallmark of responding to AIDS was the close involvement of infected and affected communities as equal partners and stakeholders in prevention and treatment programmes.

There is no evidence to show that the immunity generated by vaccines will be long lasting. While mass vaccination could be an immediate solution to halt the epidemic, a more sustained response will only be possible with closer and more equal involvement of communities.
Pandemics and LGBTQI Rights: Lessons learnt from HIV & COVID-19

COVID-19 is a virus that attacks the human species, including people who happen to be members of sexual minorities. As the events of 2020 have shown, millions of people, in all parts of the world, have been adversely affected; many have died.

The Novel Coronavirus, which WHO labelled "COVID-19", has infected millions of people worldwide. For the increasing number of national leaders who wanted to "go it alone", and to reject multilateralism, this new pandemic has demonstrated the vital importance and need of international cooperation. Cooperation across the international community has been vital to a successful strategy against HIV. It is also vital for a successful strategy against COVID-19. Autocrats and harsh authoritarian regimes tend to be enemies to LGBTQI people. It is not surprising that they are also hostile to sensible policies on HIV and COVID-19.

In fact, the lessons learnt about HIV by the international gay community and other sexual minorities, have been used by the most successful countries to tackle effectively the COVID-19 pandemic. It is unsurprising that many of the leaders, including many leading scientists, in the struggle against COVID-19 are themselves LGBTQI. They gained their first experiences from the HIV pandemic. They have led the way in strategies to tackle COVID-19. Those strategies include:

- Frank speaking about the pandemic and its essential features as a human virus and a common enemy of humanity;
- Public engagement by politicians, alongside health experts, to tackle the pandemic without prejudice and discrimination against any minorities;
- Use of modern means of communication to spread messages about effective, and often simple, strategies such as social distancing, handwashing and wearing masks;
- Counteracting prejudice against minorities and insisting on common, shared dangers;
- Reaching out to unpopular and particularly vulnerable minorities (such as SOGI minorities, prisoners, sex workers and injecting drug users), because by helping them, we help each other and everyone and;
- Emphasising the need to base all policies on sound scientific and empirical data, not on prejudice or religious views.

Unfortunately, countries with governments that have expressed hostility to sexual minorities have often done the same to those at the frontlines of COVID-19. These have included the present administration in Brazil, the current regime in El Salvador; and the former administration of President Donald Trump in the United States. Taking scientific advice, only, when it suits political agendas is a bad and dangerous course. Founding all policies for any pandemic on sound data and respected scientific opinion is a lesson that HIV taught LGBT people from the start. It is a lesson they have helped to teach the world during the response to COVID-19.
Occasionally, COVID-19 has had an unexpected but welcome positive side. In a number of countries, including Australia, overcrowded prisons have seen their populations reduced. This has saved lives. There has been no significant increase in crime. Engaging with people at risk is the best way to tackle a pandemic. It is so much more effective than disrespecting people and locking them up as prospective political opponents.

Now, there is a further area of operation where LGBTQI people have to teach a new generation. I refer to the availability of COVID-19 vaccines on an equitable basis, to be available to all people everywhere on our planet and according to need.

Not only is this essential for justice and global vaccine equity. It is also essential to the effectiveness of vaccines in creating an immunity. COVID-19, like HIV, cannot be tackled and overcome entirely in an individual country. It is a global phenomenon. It requires global equity and cooperation.

Following the appearance of HIV, the well-resourced countries of the United States, Europe and Australasia contributed generously to the Global Fund against AIDS, Tuberculosis and Malaria and to PEPFAR. Millions of people were placed on the antiretroviral therapies. Therapies became a major way to reduce the toll of the pandemic - therapy as prevention.

It will be the same with COVID-19. We will not secure the essential safety of our populations, nor will we get global flights and our economies operating again, unless we react as a global family. This is a lesson that has been emphasised repeatedly by the World Health Organisation and UNAIDS. At the World Health Assembly, most countries demanded a “people’s vaccine” so as to secure protection for the poorest victims of untreated COVID-19. Yet, the reality is that vaccines are often unavailable to those in need in poorer countries.

Thus, LGBTQI people in every land, who were on the frontline of the burden of HIV, have become ambassadors for justice and equality in vaccine and therapy availability. Sexual minorities will consent to be oppressed no longer. They will speak up and, sometimes, act up in order to spread the message of health for all people by 2030. From being targets of discrimination and injustice, LGBTQI people are increasingly becoming vocal with important experiences to share. They speak up in their own countries. They lift their voices for justice throughout the world.
Reflection from our Ambassadors

Pacific Ambassador:

Ratu Epeli Nailatikau
(former President of Fiji)

This year, we celebrate and embrace the theme of ending inequalities. To end inequalities, is to acknowledge and embrace the importance of diversity. Through diversity, the human race has evolved more than any generation at any time ever dreamed would be possible. This was achieved through equality and equal opportunity.

Diversity dispels negative stereotypes and personal biases about different groups, and promotes growth across the board. Moving into a world recovering from COVID-19, I hope to see more solidarity, support and inclusivity for our LGBTQI groups.

In Fiji, much of the support during COVID-19 for our LGBTQI and other minority groups came from the exceptional leadership of the first female country director for UNAIDS, Renata Ram⁹ and the active and outstanding groups of the Rainbow Pride Foundation¹⁰, Haus of Khameleon¹¹, Survival Advocacy Network¹² and Strumphet Alliance Network¹³. They worked tirelessly in 2020 to develop initiatives to allow LGBTQI groups, sex workers and other minority groups to support themselves through COVID-19 by generating incomes and securing their livelihoods.

These are excellent initiatives from our communities and activists. With 2020 as a year of ending inequalities, I hope and believe that we will see more support, understanding and action from other local organisations as well as the private and public sectors.

By looking after and including our LGBTQI communities, we promote stability and development at a time when we need it most. And this is something we all need to work on together.
Reflection from our Ambassadors

Research Ambassador:

Dr. Adeeba Kamarulzaman
(IAS President)

We have more and more tools and technology to effectively prevent HIV. Yet the region still lags behind in the implementation of all of these tools - PrEP, harm reduction, antiretroviral therapy. Research must be focused on what the barriers are and what innovations have been adopted during the pandemic that can help us speed up and expand coverage of HIV prevention and treatment across the region.

For the past year, COVID-19 has impacted our diverse communities in many ways. This global pandemic disrupted our relationships, professional and life plans, and the way we interact with our friends, families and colleagues. Some say that nothing could have prepared us for this Big Disruption.

The truth is that companies that live the values of diverse and inclusive workforces have helped all their employees – regardless of who they love or how they identify – to cope with the pandemic’s impacts on life and work. When we can be authentically ourselves at work, we bring the best of ourselves to work. And when we can be our authentic selves by being open about our gender identities and sexual orientations, when times get tough, we can lean on our team-mates and draw on support structures from our human resources and employee resource groups, to help us cope better and to continue to deliver impact in our jobs, and in our lives.

So, when COVID-19 hit, those companies that already embraced these fundamental principles of inclusion in how they train, retain and grow their workforces, found themselves better positioned to help their LGBTQI and HIV positive employees cope with the new and very difficult circumstances the pandemic presented us with. For all the pain the pandemic has brought to many people, including in our community, it has illustrated that work cultures built on supporting the needs of their diverse employee communities are the most resilient.

Let us continue to work hard to bring these values to more business communities so that all people in our LGBTQI community are recognised for their whole selves, benefiting from support structures, policies and practices that will help us all successfully navigate the next Big Disruption.
2020 has been a year unlike any other. The COVID-19 pandemic has exposed the stark inequalities in needs and access to healthcare, food and other basic services, both locally and globally.

From very early on (March 23-30) in the COVID pandemic APCOM carried out a survey of 9 countries (Cambodia, India, Indonesia, Laos PDR, Mongolia, Nepal, Pakistan, Philippines and Sri Lanka) to better understand the impact of COVID-19 on communities with diverse SOGIESC, services and providers in the Asia Pacific Region. The survey results were released on April 3rd as the first reports in APCOM’s newsletter series. From June to August 2020 APCOM surveyed a further seven countries and obtained additional data from India and Sri Lanka. The data from this second survey are discussed in the second newsletter series. This first report in the series discusses the impact on communities with diverse SOGIESC, HIV services and key populations.

All nine countries initially put in place intense containment measures between January and March. These restrictions led to a reduction of HIV services, including outreach clinics. Face to face services and activities were either being suspended entirely or reduced significantly in order to meet the social distancing requirements during the initial phase of the outbreak.

In some organisations (e.g. CARMAH, Vietnam) which had some time to prepare before restrictive measures came into place, clients were asked to come in and pick up a supply of medicines for an extended period. Those clients that could not make use of such arrangement were referred to hospital polyclinics which remained open throughout.

Most events were either cancelled or postponed indefinitely and organisations pivoted to virtual services by increasing their use of different communication channels such as messaging, phone calls and social media applications such as WhatsApp and Instagram to provide much needed support and services.

As the outbreak evolved and recognising that a return to ‘normal’ in the near future was unlikely, organisations transformed their educational events, VCT and other support services into virtual interactions in an effort to ensure continuity of care and medication compliance for their clients.

Where services remained open, be it in a restricted manner, walk-ins were not permitted and uptake significantly dropped as clients either felt scared about being exposed to the Corona virus, were deterred by the more time-consuming nature of the appointment or the breach of confidentiality as, certain countries, they had to disclose their status in order to obtain a curfew pass (e.g. Sri Lanka).
A few organisations (e.g. Pink Alliance in Hong Kong) were working virtually prior to the pandemic and hence were able to continue providing their services remotely.

Rainbow Pride Foundation in Fiji explained how the lack of information about COVID-19 and the lockdown left people scared and shocked, making it difficult to actively engage the population in preventive measures. The lack of relevant and reliable context-specific information has not only been unhelpful but in fact dangerous. The first case in Fiji Island was a member of the LGBTQI community and as a consequence of the lack of correct information both the individual and the larger LGBTQI community have felt increasingly stigmatised and discriminated against.

In many of the countries, individuals have faced loss of income, loss of employment, increased stigma and discrimination; and lack of access to health resources. Many individuals work in the informal sector and governments have been able to provide little to no support. This has led to a significant increase in the need for mental health support and for support with basic essentials such as food, shelter and utilities.

Foreign nationals in many of these countries who would previously have flown home for their health care and medicines have faced barriers in obtaining access to national welfare programmes, health services and medicines. Similarly, their own residents have faced barriers in the countries they have found themselves stranded in.

There has been a move to integrate the COVID-19 response with HIV care via use of mobile apps for raising awareness, medical reminders and organising testing. Similarly, new innovations in these countries have been developed in an effort to minimise breaches of compliance by bringing the services to clients via HIVST kit delivery and ART home delivery;

Over time, in those countries which have managed to regain control of the outbreak, there has been a relaxation of preventive measures. This has enabled HIV services to slowly resume, though initially with restricted numbers. Outreach clinics opened gradually and events have been slower to restart as entertainment venues and the food and beverage industry have either remained closed for a longer period of time or have far shorter service hours (e.g. Singapore). Consequently the ‘new normal’ in these countries will increasingly rely on virtual services and events that should be viewed as a supplementary customer service.
Impact on Community Based Organisations (CBOs)

From very early on (March 23-30) in the COVID-19 pandemic APCOM carried out a survey of 9 countries (Cambodia, India, Indonesia, Laos PDR, Mongolia, Nepal, Pakistan, Philippines and Sri Lanka) to better understand the impact of COVID-19 on communities with diverse SOGIESC, services and providers in the Asia Pacific Region. The survey results were released on April 3rd as the first reports in APCOMs newsletter series. From June to August 2020 APCOM surveyed a further seven countries and obtained additional data from India and Sri Lanka. The data from this second survey are discussed in this second newsletter series. This second report in the series discusses the impacts on the community-based organisations during the first six months of 2020, a year very unlike any other.

As governments moved to implement strict non-pharmaceutical measures limiting mobility and restricting face to face contact, the operations of community-based organisations were significantly impacted. All face to face events and many activities provided by CBOs were suspended. Initially staff often worked from often without the right technology. All meetings were moved to on-line events and organisations worked hard to identify alternative ways to deliver their programs and services.

CBOs’ primary concerns in the initial phase were to (i) ensure staff wellbeing both mentally and physically; (ii) enable staff to work from home i.e. ensure IT access, proper hardware and software and (iii) ensure staff were able to work safely from the office/clinic i.e. the appropriate access to transport, PPE and knowledge, if required, to provide in-person clinics.

**Staff knowledge and engagement**

Recognising that their staff did not always feel properly informed, CBOs initiated group chats via social media channels to deliver reliable and up to date information on COVID-19. Regular engagement with their own staff and also with other CBO’s led to staff feeling more empowered, increased collaborative working and encouraged sharing of innovation initiatives. Mutual support other during the more restrictive ‘lockdown’ period increased and, as measures gradually relaxed, strategies for what to do and how to better manage operations were further developed.

**Staff wellbeing**

Following the directives of their governments, CBOs responded quickly to protect and safeguard their staff by trying to obtain personal protective equipment for both staff and clients wherever possible. Staff, volunteers and service users were also encouraged to look after their wellbeing and seek professional assistance if needed.

These two measures - the efforts to engage/inform and safeguard staff well-being - increased staff confidence to share that information within their rural and urban communities (Fiji islands).

**Operations**

Organisations found that switching to the ‘new normal’ required both extra resources (e.g. IT equipment, PPE, sanitisers) and manpower to cope with the physical and virtual delivery of services (e.g. increased home visits, organising home delivery of medicines and ST kits, shuttle buses for staff). This has created an extra strain on organisations due to limited funding and the transition to the ‘new normal’ is a gradual process that is still ongoing.
Funding
CBOs are concerned about both existing and new funding. With many fundraising events cancelled there has been a significant drop in income which could have been used to support these ‘new normal’ activities.

Many CBOs have increased their efforts to enhance co-operation with overseas HIV/AIDS organisations to support the provision of comprehensive services during the pandemic, while undertaking COVID-reprogramming to redirect funds appropriately. However, concerns remain about achieving program indicators set with funders prior to COVID-19. Much of the online outreach work, the team building and networking which have been identified as essential during the pandemic are not recognised as official indicators and as yet, by June 2020, no directives had been issued to grant implementers to review targets and indicators.

In an effort to raise funds at this difficult time CBOs have also approached both corporates and pharmaceuticals to obtain support.

Strategy
Organisations initially moved to skeleton services and suspended outreach clinics, events, trainings, mobile testing etc. CSOs worked hard to initiate essential mitigation strategies in an effort to maintain services and programmes. This included moving to online working wherever feasible; securing PPE and applying social distancing policies; securing appropriate data packages, hardware and software for staff; promoting and supplying patients with multi-month supplies of ARV and condoms, and maintaining contact via phone calls and social media to prevent loss to follow up. This was easier for some countries than others where the technical hardware, software and critically IT skills were limited.

Where NPI measures gradually relaxed CBOs have slowly begun to reinstate services and events as far as possible alongside virtual services. However, in many countries where measures remain restrictive (e.g. Sri Lanka, Myanmar, India) there is a worry about the impact of the length of interruptions to services. It is often these same countries that are facing difficulties with access to virtual online platforms.

Supporting Communities with essentials
Communities themselves have been severely impacted with many individuals losing their source of income. Access to food, shelter and paying bills is often a greater concern for these individuals than their health. CBOs have voiced concern both for the health and social welfare of the communities they serve. Many have had to pivot and request to use monies from funders to support communities with food, water, shelter and sanitary needs.

Innovating in the face of adversity
Additional innovative initiatives were also introduced by CSOs as an indirect/direct consequence of COVID-19. In Hong Kong the HK Aids Foundation launched a variety of e-workshops to cover physical and mental health issues as well as leisure and lifestyle topics. Other CSOs have also recognised the need for such e-workshops. One indirect positive result of COVID-19 has been an accelerated roll out of some of the pilot projects. For example, HIV self-testing, use of virtual counselling, development of chatbots, home delivery services and allowing multi-month supplies of ARV.
Effects on Human rights of KPs and LGBTQI community

All countries impacted by COVID-19 have put in place containment measures to varying degrees. As discussed in the first ‘COVID effect’ series, there is a real concern that in the process of implementing preventive measures to respond to COVID-19, communities’ freedom of expression, among others, can be affected. In response to this concern APCOM carried out a survey of CSOs from nine countries in the Asia Pacific region to further understand any impacts of COVID-19 on the human rights of KPs and the LGBTQI community. This third report in the second COVID effect series discusses the responses from the survey carried out between June and August 2020.

Vulnerable populations at risk of, or living with HIV, already faced significant barriers to health and wellbeing prior to the COVID-19 pandemic. These obstacles have been further exacerbated by COVID-19.

Many of the most vulnerable members of society, including, though not limited to, communities with diverse SOGIESC, work in the informal and entertainment sector. Consequently, a number of restrictive measures and lockdowns have been imposed in an effort to both contain and combat the SARS-CoV2 virus. This has led to many individuals not being able to earn an income anymore which, in turn, has resulted in **difficulties for many in accessing essential items** such as food, shelter, water and utilities. As a result, many now have to rely on government services and community-based organisations for support.

Furthermore, restrictive measures have required a significant reduction in service provision to ensure appropriate physical distancing and, in some cases, CSO services were suspended with clients being asked to attend clinics at hospitals. This led to a **disruption in access to ARV and HIV testing** (eg. Japan, Singapore). Where CSO-led HIV services were suspended (e.g. Japan) this was very short-term as HIV treatment and testing are recognised as being essential services.

A significant issue in most countries surveyed was ARV and HIV testing for ‘foreigners’, both those who are foreigners in the countries surveyed and for those whose nationals are resident elsewhere and unable to get back to their home country. For these individuals the COVID-19 pandemic has exposed the **poor access to both health and welfare services for non-nationals** in many countries worldwide.

Some countries reported an **increased risk of gender-based violence**. CSOs found that the greatest worries for their communities were related to mental health and stigma and discrimination. Many of their clients have lost their jobs and have no income. This already precarious situation further exacerbated because of the lockdown measures that led to more time being spent at home in confined spaces and an increase in domestic abuse inflicted both by their families or their partners (e.g. Sri Lanka, Myanmar) who they may have gotten more economically dependent on.

In Fiji and Taiwan CSOs reported an increase in perceived discrimination by the communities. In Fiji the first case identified was a member of the LGBTQI community. This led to a very challenging period where the LGBTQI community felt that the wider public were implicating them for the outbreak in their country.
Concerns have also been voiced by some communities about fears of their relationship status not being recognised if their same sex partner were to be admitted to hospital for COVID-19 (e.g. Japan) with their greatest worry being that they would not have access to information nor have any input to treatment and care.

Government activities, measures and efforts have since the start of the year been primarily focussed towards containment of the COVID-19 pandemic. There is real concern regarding the impact that this will have going forward on human rights work and advocacy, both at regional and country level as energies are diverted to COVID-19. This includes issues such as recognition of same sex relationships and marriage in Hong Kong and Taiwan as well as issues surrounding adoption and artificial reproduction; gender equity education and transgender rights and healthcare.
An ongoing call for continued support and response amid an ongoing pandemic

The COVID-19 pandemic has exposed the stark inequalities in access to healthcare, food and other basic services and needs, both locally and globally.

From very early on (March 23-30) in the COVID pandemic APCOM carried out a survey of 9 countries (Cambodia, India, Indonesia, Laos PDR, Mongolia, Nepal, Pakistan, Philippines and Sri Lanka) to better understand the impact of COVID-19 on communities with diverse SOGIESC, services and providers in the Asia Pacific Region. The surveys results were released on April 3rd as the first reports in APCOMs newsletter series. From June to August 2020 APCOM surveyed a further seven countries and obtained additional data from India and Sri Lanka. The data from this second survey are discussed in this second series. This fourth and last report in the series calls for continued support and response amid an ongoing pandemic.

All nine countries implemented a number of non-pharmaceutical measures in an effort to control the spread of COVID-19. The situation in each country has evolved at different rates and each country has set its own strategy on how, when and to what extent, to implement and lift measures.

Government responses to COVID-19 have impacted on KPs, KP service delivery, CBOs and human rights work and advocacy, both at country and regional level. APCOM reiterates that all interventions should be rights-based and viewed through a SOGIESC lens. Doing this successfully will ensure that rights are respected, existing vulnerabilities are not aggravated and are looked into in an appropriate manner. This will contribute to realising the goal of leaving no-one behind.
CSOs identified another number of areas where donors, policymakers, and supporters are able to provide support in addition to those pointed out by other countries in the previous survey:

- Policies are required to ensure an integrated HIV/AIDS and COVID-19 prevention, diagnosis, and treatment program.
- Appropriate IT capability has been shown to be a fundamental enabler during this pandemic. Providing support to partner agencies and service users to obtain the appropriate IT hardware, software, and skills development must be prioritised.
- Virtual services and events have the ability to both increase reach and efficiency. There has been an increasing drive to consider virtual services and events as a complementary support for existing services and events going forward. This would be valuable as there remains a real concern about second and third Covid-19 waves which would then require reverting to primarily online services. Donors need to recognise the results from these virtual services and develop appropriate progress indicators.
- Reliable and context-relevant information on COVID-19 is key to ensuring the health, safety, and security of both populations and CBO staff. There is an imperative to provide appropriate education and information to both staff and peer counsellors.
- HIVST, PrEP, and multi-month dispensing demonstration projects, together with new initiatives such as home delivery, were expedited in many countries as part of the effort to maintain safe service provision and prevent loss to follow up. They proved to be very successful and there is now a clear need to increase the support for scale up and roll out in those countries and to resume demonstration projects in those countries where these were suspended.
- Provide support where needed for a full situation analysis and impact assessment of COVID-19 on HIV services (e.g., Myanmar).
- For regional networks such as APCOM to continue providing leadership in advocating for the SOGIESC community and to continue providing clear communications and messaging across the region for both the SOGIESC community and the wider population.
Conclusion

COVID-19 has had a significant negative impact on communities with diverse SOGIESC, which has taken its toll both in terms of financial and mental wellbeing. CSOs experienced substantial impacts both on staff, service provision and their wider operations with many having to be suspended or limited significantly. However, over time, CSOs have pivoted and adapted to the ‘new normal’, identifying innovative ways of ensuring continuity of care for their communities whilst at the same time supporting both the national COVID-19 response and their communities with basic essentials.

CSOs voiced that regional networks such as APCOM have a valuable role to play in international advocacy, in ensuring clear communications and messaging; and in supporting demand generation.

Good communications, integrated services and sustainable programmes and policies are key to ensuring greater reach, efficiency and progress towards the United Nations 2030 Agenda for Sustainable Development. It is essential that as the world responds to control the COVID-19 pandemic that the HIV/AIDS crisis is not forgotten, that core programmes are sustained and no-one is left behind.

APCOM will continue to provide leadership in advocating for the communities with SOGIESC and further promote clear communications and messaging across the region, including advocacy for a community-led and community-owned funding mechanism for communities working on LGBTQI and HIV issues in the Asia Pacific region as such mechanism ensures the resilience and sustainability of activists and organizations to continue to do their important work in the region – especially for human rights issues.
Missed stories from our Special Series on the COVID-19 Effect?

You can access all of them here!

Issue 1:
Reflecting the current realities faced by the communities we serve

Workplace safety is paramount. APCOM Covid-19 Protocol was developed and shared with our partners.

- A collective call for immediate response amid COVID-19 outbreak and government lockdowns
- Community clinics in Thailand strive to provide HIV services amid COVID-19
- COVID-19 and its effects on diverse SOGIESC communities, HIV services and Key Populations

Issue 2:
#CoronaAPCOMpassion launch

- APCOM staff donate salaries, creates #CoronaAPCOMpassion emergency funding

Story from a PLHIV Organisation:
An appeal from The Poz Home Center Foundation, Bangkok

Story from Bali, Indonesia:
Working on paradise island under COVID-19 lockdown: Gaya Dewata speak out

Issue 3:
Community Resilience

HIV Testing campaign turn into testing people’s compassion for Thailand’s LGBTQI and people living with HIV affected by COVID-19 pandemic

- COVID-19 lockdown in Cambodia: Micro Rainbow Cambodia speak out
- Solidarity In The Pandemic: Story from Suara Kita, an LGBTQI organization based in Indonesia
Issue 4: Community Taking Charge

Our Executive Director, Midnight on the ASHM Regional Advisory Group on BBVs, Sexual Health and COVID-19 in an inaugural webinar discussion on Covid-19, HIV, Sexual Health and Viral Hepatitis. What’s the new normal for the Asia Pacific?, attended by prominent leaders in Asia Pacific Region.

Lessons about COVID-19 and standard preventive practices from the virtual learning session

To Kill Two Birds with One Stone: Resourcefulness among Trans Women in Yogyakarta, Indonesia, in the Time of Corona - transwomen in Yogyakarta established a small start-up in the challenging time of the pandemic.

Calling on Compassion: Update on our fundraising efforts for LGBTQI and HIV community

APCOM building better Mental Health for its staff - through a virtual mental health session facilitated by the founder of Brave Movement, Cheryl Tan.

Issue 5: Working together for a more resilient future


The Language of Art: Part 1 Charcoal Cleansing by APCOM staff Inad Rendon

#CoronaAPCOMpassion making compassion felt in Indonesia and Pakistan

Looking good, feeling great: HIV prevention during lockdown. One of the most recognized underwear brands, Andrew Christian supports APCOM’s online HIV campaign.
Issue 6:
How are our staff coping?
Collection of self-reflections by APCOM leadership and staff

AIDS and COVID-19: A reflection from APCOM's HIV/AIDS Ambassador
An inspiring reflection from the former United Nations Secretary-General's Special Envoys for HIV/AIDS in Asia Pacific, J.V.R. Prasada Rao

Crisis, Opportunity, Transition...
by Dédé Oetomo, Chair of APCOM's Regional Advisory Group

Equipping for uncertainties: adaptive leadership in times of coronavirus

First, I listen to fear. Then, I defeat it in detail.

Of Project Plans and COVID-19

My experience on accessing ARV during lockdown in Bangkok

A Complaint Letter to COVID-19

So Far yet so Near

Me, myself and PrEP during the lockdown

Jam and her housemate on COVID-19

Coronavirus Can't Tear Us Apart

We remain

Bringing Progressive Faith Voices toward Diverse Genders and Sexualities

IDAHOTB 2020: Bridging the LGBTI Inclusion Data Gap
A panel recording to commemorate the International Day Against Homophobia, Transphobia, and Biphobia (IDAHOTB) 2020, organised by the Asian Development Bank, with APCOM's SOGIESC Rights Officer, Ramil Andag on the panel.

Issue 7:
Asking for Help

Ripples of #coronaAPCOMpassion:
Supporting MSM, transgender and LGBTIQ individuals, one country at a time

The colors of 'THB19 vs. COVID-19': "Trying to be a rainbow in someone's cloud"

Indonesian Diaspora LGBTQ Group Helps Compatriots Back Home
Issue 8:  
**Pivoting Services to the needs of the Community**

Championing PrEP in Pakistan:  
*Dareecha forges ahead*

Adapting service delivery to meet the needs for PrEP:  
*Vietnam example*

Supporting the most vulnerable through uncertain times:  
*A personal story from Mumbai*

How COVID-19 is affecting community-based organisation even with low COVID-19 cases: *Laos case study*

Issue 9:  
**Boosting Voices from the Southeast Asian Community**

*Thai Transman Talk Tackling COVID-19*

*Confession from a Male Escort in Vietnam during COVID-19 time*

*Mama Tini talk of services for transgender women in Malaysia*

*Unending Discrimination for Transwomen under COVID-19 Period in Indonesia*

Issue 10:  
**Boosting Voices from the East Asian Community**

*Tokyo’s LGBTQ+ Community Center Response to COVID-19*

*“New Normal” in Hong Kong*

*Singapore Circuit Breaker and LGBTQ+ Services*

*COVID-19 its effects on NGOs in Mongolia*
1st Anniversary of APCOM’s Special Series on the COVID-19 Effect
LGBTQI and HIV community Reflect, Reorganise & Rebuild

Issue 11:
Voices from Artists in Asia Pacific

A plea for art inclusion for Fiji’s youngest ones during fearful times

The sound of isolation in Cambodia

Jabar and his art—‘a place where God and mortal men meet’

Artists challenged to enhance online sales models

Thailand faces an incomprehensible future in many ways

I believe giving is receiving

Issue 12:
Boosting Voices from the Pacific Community

How long will it take for things to return to “normal”? 

Advocacy during the new normal

Saving humanity as a core mission

Issue 13:
Voices from the Young People

The impact of stigma on Indian transgender people during Covid-19

The importance of practicing personal hygiene during the pandemic

Thai youth calling for freedom of speech

Interacting with people is helpful for one’s mental health

Issue 14:
Voices from the South Asian Communities

video Interview with Dr. Ezzah Riaz

Bandhu’s service models recognized as the best practice

video Interview with Kencho Tshering

Helping and supporting each other for a better tomorrow
1st Anniversary of APCOM's Special Series on the COVID-19 Effect
LGBTQI and HIV community Reflect, Reorganise & Rebuild

Issue 15:
Voices from Transgender Women Community

Marginalized communities in need of extra handhold support

Experiencing self-stigma and stigmatisation by service providers in Bhutan

video The need for COVID-19 community based preventive models

Singapore’s unique peer and professional counselling for transgender

video Adapting online health intervention for Thai transgenders

Issue 16:
Voices from Asia PLHIV Community

video Watch an interview with a PLHIV in Sri Lanka: Pre-plan for difficult situations to continue to support community work

Viewing the HIV response during pandemic times as a significant life experience: Perspective from a gay man living with HIV in Malaysia

Wishing for a greater collaboration between government, NGO’s and PLHIVs to end AIDS by 2030: A Singaporean Perspective

Limited access to medication for Indonesian PLHIV community: A reflection from 2019 HERO Awards recipient

Issue 17:
Voices from Asia LBQ Community

video interview Rosanna Flamer-Caldera, Sri Lanka

Ly Pisey, Cambodia
Institutional policy and bureaucracy are created by people, it only requires gut and willingness to change them

Claire de Leon
Advocating for a national legislation for LGBTQI Filipinos

Jean Chong, Singapore
Rethinking of allocating country specific humanitarian aid

Candy Yun, South Korea
Distributing ‘social guidelines for human dignity and equality’ to fight human rights violations
1st Anniversary of APCOM’s Special Series on the COVID-19 Effect
LGBTQI and HIV community Reflect, Reorganise & Rebuild

Issue 18:
2021 Calling for Compassion

2021 calling for Compassion, please donate to #CoronaAPCOMpassion

Video - CoronaAPCOMpassion: COVID-19 Emergency Funding for Asia Pacific

Briefing paper on #CoronaAPCOMpassion

Issue 19:
Voices from LGBTQI, and HIV Regional Networks

ASEAN SOGIE Caucus - Regional ASEAN LGBTQI network talks about Covid-19 in Southeast Asia

ICWAP - Asia Pacific Women Living with HIV speaking out on Covid-19

ILGA Asia - Regional LGBTI Association experience and responses to Covid-19

YVC - Making Youth Voices Count in time of Covid-19!

Issue 20:
Discrimination Day 2021

Media Release
Highlight Series: Reflecting the Current Realities Faced by the Communities We Serve

Issue 21:
Transmen Voices for International Transgender Day of Visibility 2021

Hong Kong – Kaspar Wan

India – Aryan Pasha

Indonesia - Raiz

Japan – Mika Yakushi

The Philippines - AR
References

2. Victor Madrigal-Borloz was appointed as UN Independent Expert on sexual orientation and gender identity in late 2017. His initial three-year term started on 1 January 2018. He is the second Independent Expert to serve in this capacity.
5. Antiretroviral Therapy - medicines that treat HIV are called antiretroviral drugs. 
   https://www.who.int/hiv/pub/arv/chapter4.pdf
7. The Global Fund is a partnership designed to accelerate the end of AIDS, tuberculosis and malaria as epidemics. 
   https://www.theglobalfund.org/en/
8. PEPFAR - The President’s Emergency Plan For AIDS Relief - is a United States governmental initiative to address the global HIV/AIDS epidemic and help save the lives of those suffering from the disease. 
   https://www.state.gov/pepfar/
10. https://rainbowpridefoundation.org/
To contribute to #CoronaAPCOMpassion

Via PAYPAL:

If you already have a PayPal account, please log in to your account and click send payment to APCOM@APCOM.ORG

In the “Note” section, please give us your Full Name & Email Address and please indicate that it is for “CoronaAPCOMpassion”.

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![PayPal Payment Form]

Via BANK TRANSFER:

Account name: APCOM Foundation
Bank name: Bangkok Bank
Bank address: 87/2 No. 114, 1st Floor, All Seasons Place Retail Center, Wireless Road, Lumpini, Pathumwan Bangkok 10330, Thailand
Account number: 911-0115-33-5
SWIFT Code: BKKTTHBK
We are united in advocating for issues around HIV and those that advance the rights, health and well being of people of diverse sexual orientation, gender identity, gender expression and sex characteristics.