

Issue 33, July 2020



Our second issue of 2020 still finds us in the midst of COVID-19. Since our last newsletter we have worked tirelessly to adapt to the "new normal" and implement a digital approach to our advocacy and capacity strengthening. In this newsletter, we take a look at some of the shifts we have taken in our approach to our online training courses and to our annual flagship Training and Leadership Programme (TaLP).

In May, we commemorated International Day Against Homophobia, Biphobia and Transphobia (IDAHOBIT) by issuing a civil society statement in response to an attack against a trans person and hosted a webinar panel discussion highlighting the impact that COVID-19 has had on the LGBTI community.

We interview our Director, Felicita Hikuam who looks at her new position six months in. She shares her reflections and insights on facing new challenges during a global pandemic.

Lastly, ARASA announces its new and informative 4 part webinar series addressing Rights-Based Responses to Drug Policy Reform and Harm Reduction, in partnership with CoAct.

We trust that you are well and continue to adhere to safe health practices.

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Should you have any questions, comments or contributions for future editions of the newsletter, please email ARASA Communications at communications@arasa.info.

For updates and more information on ARASA's work, visit our website www.arasa.info and connect with us on Facebook @ARASAcomms and Instagram @arasa_network.

Until next time!

International Day Against Homophobia,
Transphobia and Biphobia:
Addressing Transphobia in Namibia



On May 5, 2020, ARASA, as part of a consortium of concerned human rights defenders and civil society organisations issued a <u>statement</u> in response to the vile attack against a trans woman on a farm near Gobabis, Namibia. The attack, which was filmed and the footage was circulated on social media, highlights the prevailing culture of homo and transphobia that continues to permeate society globally.

In the statement, activists called on national authorities to address the continued discrimination and stigma that members of the trans and overall LGBTQIA community continue to face in Namibia, appealing for a society that protects and promotes the fundamental human rights and freedoms of all its citizens as is stipulated in the country's' Bill of Rights. Activists further called for the state to enact anti-discrimination legislation to ensure the protection of LGBTI persons in order to reduce harmful practices and prejudices that heighten the risk of human rights violations, including restricted access to adequate sexual health services.

The consortium pulled their resources together and worked tirelessly to remove the survivor of the attack from the farm, provide her with psychosocial support, and to find her legal representation in order to facilitate pressing criminal charges against her attacker. This once again is a reminder of the discrimination, and lack of state support, that members of the LGBTI community face in Namibia. As the case is still ongoing, it is of the utmost importance that we continue to advocate for the end of violence that is often targeted towards vulnerable Namibians.



Celebrating Diversity in a global pandemic

In commemoration of IDAHOBIT, ARASA hosted an online panel discussion "Addressing Homo and Transphobia in southern and east Africa during the COVID-19 pandemic" with experts, human rights defenders and members from the LGBTI community. Facilitated by ARASA's Advocacy Officer, Anthea Tadarera, the discussion engaged with regional experts on how these social exclusions have a negative impact on the lived experiences of LGBTI persons. Guest panellists included Berry Nibogori the Director of Programmes of African Men for Sexual Health and Rights (AMSHeR) and Deyonce Naris, from the National Coordinator of the Transgender, Intersex, and Androgynous Movement of Namibia (TIAMON). The conversation touched on a range of issues, mostly centering on current lived experiences during the global COVID-19 pandemic.

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The panellists shared how they were supporting their partners and the community through the pandemic, while simultaneously trying to address the socio-economic and security crises it has precipitated. Noting that these have disproportionately adversely affected those already on the margins or as Berry

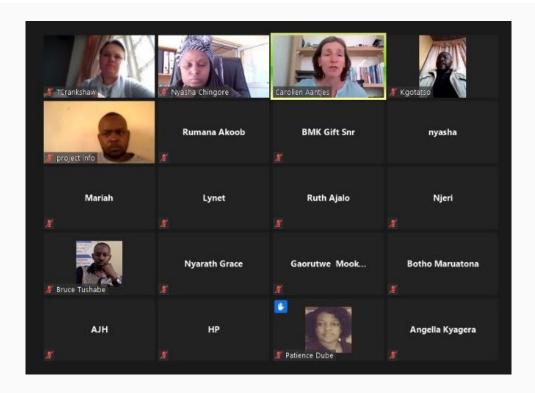
put it, those with "pre-existing social conditions." Both speakers noted how it has been important to simultaneously support partners and community members to meet practical needs such as access to food, to medicine, and mental health care, whilst continuing to advocate for a wide range of interlinked human rights. Deyonce spoke extensively on the need for cross-movement organising in order to push the work forward, and how there is a need to continuously find "linkages and intersectionalities" in our work.

The advocacy focus in their work has been multipronged, and has included work on health system strengthening, on continuing access to sexual and reproductive health services including gender affirming healthcare, on formulating adequate responses to gender based violence, on the continuing excessive use of force by the police, and on ensuring adequate space for civil society organising at the national and regional levels. The latter conversation segued into a discussion about what it means for activists to organise online, and at what point we collectively start making the argument that access to the internet is a human right?

One of the hopes and outcomes of the online discussion is to continue to engage on and address the new realities and challenges faced by the community throughout the region, with a view to encouraging cross-movement organising, in the months to come.

You can listen to the full audio of the online discussion here.

Going Virtual: Highlights from ARASA's Online
Training



The outbreak of the COVID-19 virus has had a significant impact on the operations of civil society capacity strengthening programmes in light of the limitations on in-person meetings and gatherings. ARASA has responded to these limitations by exploring how we can maximize our usage of online platforms in order to continue to provide comprehensive regional training sessions.

In April and May, ARASA conducted online short courses on the Advocacy for and Monitoring of Sexual Orientation and Gender Identity, Expression and Sex Characteristics (SOGI) and a second course Advocating for and Monitoring of Access to Safe abortion. Both training programmes attracted approximately 230 students from various African countries and were hosted on ARASA's elearning platform Moodle. Due to the increased numbers of participants, ARASA looked to external consultants and ARASA staff to provide facilitation support. In recognition of potential connectivity challenges, our participants from a wide range of African countries, were able to access the course using not only desktop computers, laptops, but also mobile phones through a Moodle app.

Moving forward, ARASA will also host module 2 of its annual Training and Leadership Programme (TaLP) via its Moodle to ensure that participants continue to receive comprehensive training on bodily autonomy and integrity

(BAI) and Sexual Reproductive Health and Rights in the region. The sessions, which will be facilitated by the ARASA staff, will cover a wide range of topics such budgeting, community mapping and proposal writing. TaLP module 2 will run from 20 July to 7 August 2020.

Shifting Course: An Interview with ARASA Director, Felicita Hikuam Felicita Hikuam



Six months into her appointment as ARASA Director, we catch up with Felicita Hikuam to hear her experiences and thoughts on leading a civil society organisation during a global pandemic.

Q: Which 3 words would you use to describe your first 6 months as Director of ARASA?

A: Fast. Daunting. Uncertain.

Q: What have been the most exciting and most challenging parts of your first 6 months as ARASA's Director?

A: The most exciting part of the first 6 months as ARASA's Director has been settling into my new role and re-establishing my relationship with the board of trustees, ARASA partners, colleagues and strategic partners in my new capacity. Most challenging has been taking over the reins and having to maintain stability during one of the most disruptive events of our time.

Q: Since you stepped into your new role in January 2020, the world has seen a major shift as a result of the global impact of COVID-19. As Director what have been the major challenges you have faced in regard to the limitations and restrictions faced by ARASA partners and subsequently the constituents that they work with?

Indeed, the world as we knew it a few months ago does not exist anymore. In addition to my concern for the safety and health of the ARASA team; their loved ones, and the staff and constituencies of our partner organisations, the most significant challenge I have faced has been ensuring that the systems and operations of the organisation were agile enough for the ARASA team to adapt swiftly to effectively support partners during this time of heightened uncertainty. In order to inform our efforts to support partners and their constituencies during this crisis, we conducted a mapping with partners, which showed that, while partners were adapting quickly, they required support to address the secondary challenges created by the crisis, including human rights violations, and the disproportionate targeting of marginalised groups during the enforcement of lock down regulations. Further, partners indicated that they required support to adapt their operations to work remotely; to engage with the development and implementation of lock down regulations; to prepare their constituencies for the lock downs; and to advocate for the uninterrupted access to SRHR services and commodities during the lock downs.

Q: And how does this impact ARASA's overall strategic plan?

A: In many ways the COVID-19 crisis has amplified the inequality and inequity in healthcare, which informed the ARASA strategic plan and our goal, to ultimately reduce inequality, especially gender inequality, and promote health, dignity and wellbeing for sustainable development in southern and east Africa. I believe that the work of ARASA and its partners to protect and promote the

rights to bodily autonomy and integrity and to health, and rights of all, are even more important now than they were a year ago when ARASA's new strategic plan was adopted.

Q: With the limitation of movement, which has now led to all partner engagements shifted into a digital space, what measures has ARASA taken to accommodate this new normal?

A: Fortunately, ARASA had already been relying on electronic platforms for the implementation of certain components of our work prior to the COVID-19 crisis. This enabled us to continue those activities uninterrupted and to adapt other activities into an electronic format at short notice. However, we recognise that there are a number of partners who face struggle with infrastructure and access to electronic platforms. In response, we have, amongst other measures, provided financial support to our Training and Leadership cohort to purchase data to ensure consistent access to our online platforms. We have also identified innovative electronic formats for other parts of our work and are now scaling up our investments to allow us to increasingly use these platforms and formats to reach and support our partners. We have been fortunate that all our funding partners have been very understanding and accommodating of the many changes we have had to make to accommodate these developments.

Q: Most members of the ARASA team are now working remotely, how would you describe your leadership philosophy in addressing the management of your team and their programmatic activities?

A: A significant part of the ARASA team had already been working remotely for a while before the COVID-19 crisis. This, along with ensuring that all staff had the infrastructure and support to work remotely, allowed us to have a rather seamless transition to this new way of working. At ARASA we have also always had a consultative and inclusive leadership style. This is very well aligned to my own feminist leadership style, which places a high value on the health and wellness of people of the organisation. It was important for us, with the support from the board of trustees, to develop a COVID-19 Staff Wellness Plan to provide clear guidance to ARASA staff, partners, trustees and donors on how the organisation will respond and address the physical, mental and psychological welfare needs of staff in the professional space and to the extent

possible in their personal lives to safeguard their health and safety as well as the productivity and sustainability of the organisation and its operations in light of the challenges posed by the COVID-19 crisis.

Q: There is a growing awareness of the impact that COVD-19 has on the SRHR and BAI of many key and vulnerable populations in the region due to movement and access restrictions. What activities are ARASA working on to address these barriers moving forward?

A: Sadly, we have learned that some households have been stigmatised and ostracised for housing someone diagnosed with or exposed to COVID-19 and some law enforcement officials have been overzealous or even heavy-handed in their treatment of marginalised groups that included the homeless, people who use drugs, lesbian, gay bisexual, transgender persons and street vendors in enforcing regulations. This confirms what the HIV epidemic has taught us: epidemics expose and exacerbate existing inequities and impact most negatively on those who are already marginalised. In order to address this, ARASA has done a mapping of how partners are responding and what support they require from ARASA. We have issued a statement condemning the problematic enforcement of regulations and highlighting the interrupted access to SRHR services. We are rerouting a significant component of our travel budget to provide rapid response grants to national partners to respond to human rights challenges and to advocate for SRHR services to continue uninterrupted including through differentiated models of service delivery during the lockdowns.

Q: Lastly, what are your future aspirations for ARASA in the upcoming years under your leadership?

A: I am very excited about ARASA's future contribution to ensuring the health and rights of people in southern and east Africa over the next few years. There is a lot of work to be done to address inequity and the disrespect of people's bodily autonomy and integrity and I believe that ARASA has an important role to play in addressing this. I envision leading a responsive organisation with a team of passionate human rights activists to convene and support a group of likeminded and influential civil society organisations to significantly amplify and intensify our advocacy and policy influence, and to accelerate transformative

and sustainable change in policies and laws to address the root causes of the denial of sexual and reproductive health and rights in southern and east Africa.

ARASA Launches Drug Policy webinar series



In 2019 ARASA ran an e-learning course on drug policy and harm reduction advocacy designed and facilitated by CoAct. The course series, which comprised of four 20 minute long videos guided participants through the learning process. Based on the success of this model, ARASA is partnering with CoAct once again to launch a 4-part webinar series entitled "#TreatUsRight! Rights-Based Responses to Drug Policy Reform and Harm Reduction."

The series, which is open to community activists, people who use drugs,

broader civil society, and other interested stakeholders, will provide an opportunity to discuss and share experiences from their countries as well as to find ways of integrating harm reduction and drug policy reform in advocacy. Mat Southwell from CoAct, will facilitate and engage with an array of guest speakers who will share their wide-ranging expertise with participants.

See our schedule and registration links for each webinar below:

Webinar 1: Needle and Syringe Programmes and Community Mobilisation

Date: 02 July 2020 at 14:30 SAST (15:30 EAT)

Guest Speaker: Connie Van Staden (South Africa Network of People who Use

Drugs)

Registration: https://bit.ly/treatusrightNSP

Webinar 2: Opioid overdose and Naloxone

Date: 16 July 2020 at 14:30 SAST (15:30 EAT)

Guest Speaker: Happy Assan (Tanzanian Network of People who Use Drugs)

Registration: https://bit.ly/treatusrightOpiod

Webinar 3: Opioid Substitution Therapy

Date: 30 July2020 at 14:30 SAST (15:30 EAT)

Guest Speaker: TBC

Registration: https://bit.ly/treatusrightOST

Webinar 4: Drug Policy

Date: 13 August 2020 at 14:30 SAST (15:30 EAT)

Guest Speaker: Maria-Goretti Loglo (International Drug Policy Consortium)

Registration: https://bit.ly/treatusrightDrugPolicy

For more information or if you have any queries please contact:

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Quarter 2 Highlights



- 3 April 2020 The ARASA Training and Leadership Programme (TaLP) class of 2020 compiled and released a <u>video</u> encouraging others to stay home and safe at the height of the global COVID-19 lockdown.
- 7 April 2020 ARASA celebrated World Health Day by sharing a poster in solidarity with health workers.
- 17 April 2020 Felicita Hikuam, ARASA Director, has an opinion piece,
 "Lessons on equity from a global health crises", published in the Namibian
 "New Era" newspaper. The piece looked at the international and regional
 responses to COVID-19 and the impact that the pandemic has had on key
 and vulnerable populations.
- **5 May 2020 –** ARASA, in partnership with other human rights defenders issues a <u>statement</u> -"Condemning Human Rights Violations and Transphobia in Namibia", in response to a transphobic attack.
- **15 May 2020 –** Felicita Hikuam joins the "Right On" <u>podcast</u> to discuss the criminalization and policing in the global COVID-19 response.
- 18 May 2020 In celebration of IDAHOT 2020 ARASA hosts a webinar "Addressing Homophobia, Biphobia and Transphobia in Southern and East Africa in the Context of Bodily Autonomy and Integrity". Listen to the full webinar here.
- 1 June 2020 ARASA, in partnership with Frontline AIDS, Global Coalition of TB Activists and TB People, alongside community organisations on the frontline of the HIV and TB responses, and national, regional and global civil society groups committed to ending AIDS and TB,

- issue a <u>Call to Action</u> to sustain progress on HIV and TB during the COVID-19 pandemic.
- 17 June 2020 ARASA issues a <u>statement</u> "AIDS and Rights Alliance for Southern Africa condemns police brutality and excessive force targeted at marginalised people and stand in solidarity with Black Lives Matter".
- **26 June 2020** ARASA issues a <u>statement</u> "Protection of rights of people who use drugs: Now More Than Ever!" in commemoration of the annual "Support. Don't Punish" campaign.

