

Expertise Brief: Civil Society Barriers to PrEP Access for Transgender People in Georgia

Recommendation for Civil Society, NGOs, Media, Bloggers and Influencers in Georgia.

In the sphere of safety and environmental inclusivity for transgender people receiving PrEP in Georgia, contradictory tendencies prevail — where positive initiatives by civil society organizations are interwoven with institutional and infrastructural gaps.

A high level of barriers persists primarily in areas related to institutional protection, law enforcement, and personal safety. A critical issue remains the lack of systemic support from the state and municipalities: no emergency services or hotlines exist for transgender individuals who face discrimination or threats as a result of seeking PrEP. Law enforcement bodies undergo virtually no training on LGBTQ+health issues, and their competencies in HIV prevention among transgender people are minimal ("National HIV/AIDS Strategy 2023–2025"). This generates mistrust toward the police and creates a sense of insecurity even in large cities. Homeless transgender people are particularly vulnerable: there are no targeted HIV prevention programs for them, and access to PrEP is virtually nonexistent.

A medium level of barriers is observed where state and civil initiatives yield mixed results. On the one hand, PrEP can be obtained in safe and friendly conditions at the facilities of civil society organizations, where an inclusive atmosphere and specialized support are provided. At these same sites, physicians from state centers (e.g., the Georgian AIDS and Clinical Immunology Research Center) provide services to transgender individuals, which helps minimize risks of stigma and overt rejection. However, to access the full range of services, individuals still often need to turn to state institutions, where concerns about discrimination, data leaks, and lack of understanding persist. Harm reduction programs supported by the Global Fund and UNAIDS operate effectively in urban areas, but coverage in rural regions is severely limited. Mutual aid networks and support groups for transgender people are mostly active only in major cities; outside these zones, such resources are practically unavailable.

A low level of barriers applies to certain aspects of the safety environment. In recent years, according to official data, no incidents of physical violence or targeted attacks specifically linked to receiving PrEP or seeking prevention among transgender people have been recorded. This reflects a degree of effectiveness in the work of the Georgian AIDS and Clinical Immunology Research Center and civil organizations, where transgender people can safely receive counseling and PrEP services, as well as discuss personal matters in a private and supportive setting, including during evening hours.

Overall, the safety and inclusivity of the PrEP access environment for transgender people in Georgia depends heavily on the efforts of NGOs, international donors, and local initiatives, whereas the state system still fails to provide full anonymity, rapid response to discrimination, or institutional participation of the transgender community in decision-making. Solving these problems requires reforming training programs for law enforcement and medical personnel, developing emergency support services, institutionalizing transgender participation in service planning, and introducing confidentiality standards at every stage of patient interaction. Only a comprehensive approach will reduce fear, increase trust in the healthcare system, and ensure real — not just formal — safety for transgender individuals using PrEP.

2025

Recommendation	Targeted
Expand outreach and mobile PrEP services to rural and underserved regions	Immediate: Map underserved regions; Medium-term: Deploy mobile clinics; Long-term: Sustain mobile teams via grants and partnerships
Develop and implement culturally competent harm reduction and PrEP awareness programs for transgender communities	Immediate: Co-create materials with trans community; Medium-term: Roll out workshops; Long-term: Regularly update content
Provide ongoing legal, psychological, and social support for transgender PrEP users	Immediate: Train staff and volunteers; Medium-term: Open support hotlines; Long-term: Integrate with local health and social services
Systematically monitor and report barriers to PrEP and discrimination cases at local and national levels	Immediate: Set up anonymous reporting tools; Medium-term: Compile and publish annual reports; Long-term: Advocate with policymakers
Collaborate with government and health agencies to improve PrEP accessibility and patient-centered care for transgender beneficiaries	Immediate: Join public working groups; Medium-term: Propose and pilot new models; Long-term: Institutionalize partnerships
Support training and continuing education for healthcare professionals on trans-affirming and inclusive practices	Immediate: Develop training curricula; Medium-term: Host accredited sessions; Long-term: Include as part of mandatory continuing education
Secure and allocate funds for emergency support and rapid response for transgender people facing access crises	Immediate: Fundraise for crisis support; Medium-term: Develop rapid response protocols; Long-term: Create a permanent emergency fund

Recommendation	Targeted
Facilitate peer-led leadership development and advocacy capacity among transgender community members	Immediate: Identify and train peer leaders; Medium-term: Organize advocacy workshops; Long-term: Sustain a pool of community advocates
Launch regular information campaigns on PrEP, HIV prevention, and transgender health	Immediate: Partner with experts and NGOs for content; Medium-term: Broadcast and publish stories; Long-term: Sustain regular coverage
Integrate personal stories and lived experiences of transgender PrEP users into public communication	Immediate: Conduct interviews; Medium-term: Publish/air stories in mainstream and social media; Long-term: Normalize representation
Actively counter misinformation and stigma regarding PrEP and transgender health	Immediate: Monitor media for false content; Medium-term: Publish corrections and facts; Long-term: Collaborate on myth-busting campaigns
Provide media training on sensitive and inclusive coverage of transgender and HIV-related topics	Immediate: Organize training for journalists and bloggers; Medium-term: Develop and distribute style guides; Long-term: Refresher sessions
Facilitate open forums, podcasts, and talk shows with transgender experts and advocates	Immediate: Invite trans speakers; Medium-term: Launch regular discussion platforms; Long-term: Normalize diverse voices
Promote partnerships with NGOs and activists for fact-based storytelling	ImmediatImmediate: Build connections with key NGOs; Medium-term: Joint story production; Long-term: Ongoing collaborative series

Recommendation	Targeted
Measure and report on the impact of media content on public attitudes and policy	Immediate: Design impact surveys; Medium-term: Analyze audience change; Long-term: Adjust strategies based on evidence

"The Expertise Brief was prepared by Dr. Karen Badalyan, a consultant on gender, communities, and HIV, and was published within the framework of the regional project 'Sustainability of Services for Key Populations in Eastern Europe and Central Asia (EECA) – #iSoS: Empowering and Innovations'."