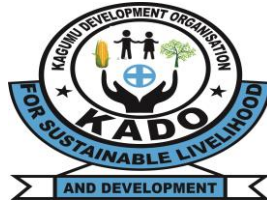


KAGUMU DEVELOPMENT ORGANIZATION (KADO)

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A REPORT OF ACTIVITIES IMPLEMENTED IN JUNE, 2018

PROJECT: STRENGTHENING COMMUNITIES TO ENHANCE HEALTH SERVICES IN EAST CENTRAL UAGNDA.

GEOGRAPHICAL COVERAGE: BULAMAGI, NAWANYINGI, NABITENDE, NAWANDALA, NAMBALE, NAMUNGALWE SUBCOUNTIES, NORTHERN AND CENTRAL DIVISION, IGANGA DISTRICT.

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INTRODUCTION

Kagumu Development Organization (KADO) is a registered Non-Governmental Organization with a mission to improve lives of communities by empowering them to participate in social and economic development initiatives. KADO's areas of focus include; Health systems strengthening, economic empowerment, Advocacy and Child Protection.

EXECUTIVE SUMMARY

KADO in partnership with Iganga district local government and the lower local government coupled with peer educators, VHTs and local authorities helped in the implementation of the activities. Our target groups include; Key Populations and Priority Populations, pregnant women and lactating mothers, adolescents and youth (10-19 years), youth out of school (12-30 years), child mothers and child fathers (15-24 years); girls and young women (10-24 years), and survivors of Gender Based Violence (GBV). KADO implemented activities in Iganga district covering Northern and Central division of Iganga town, Nabitende, Bulamagi, Nambale, Namungalwe, Nawandala and Nawanyingi sub counties. This report includes the activities which were implemented during June. The main activities which were done were particularly those to support the TX NEW surge plan and included: **Community awareness campaigns, targeted HTS outreaches/camps, home to home, bars to bar HTS and link positive clients to care, WASH promotion campaigns, linkage and follow-up of lost clients into care.** TOTAL OF 6947 People have been reached with 3023 males and 3918 females. A total of 2297 people have been tested for HIV and 98 positives were identified. Where 47 were females and 51 males. **HEP B: 724** received the service, **21** positives identified referred, **703** were immunized. **Malaria: 422** were tested, **117** were identified positive

DETAILED DESCRIPTION OF ACTIVITY IMPLEMENTATION

ACTIVITY: Organize 24 Community awareness campaigns on adoption and promotion of positive behaviors and HIV testing in response to TX_NEW.

KADO together with Health facilities and the support from Iganga district held 3 awareness campaigns in each of the 8 lower local governments. KADO targeted 100-200 people per show/trigger event in each sub-county/Division. Community Health Workers and other community structures were given Social Behavior Change Communication (SBCC) materials to use to educate community members through door to door mobilization and during outreaches to carry out community-facility and facility-community linkages. Key messages was on HTS, ANC/PMTC, seeking early diagnosis and treatment at health facilities, family planning.



Some of the individuals mobilized to access health services.

SUMMARY OF RESULTS

A total of 2800 people were reached with the health messages in the 8 lower local government. The message was mainly aimed at the mobilization of these individual from KPs, PPs, boda-boda riders, trucker drivers, female sex workers, mothers for family planning, ANC/PMTCT, immunization, Malaria test and treatment, VMMC, and other services.

ACTIVITY: Conduct 16 targeted HTS outreaches/camps in 8 Lower Local Governments in the newly mapped hot spots in response to TX_NEW.

KADO worked together with the Community Health Workers, clan leaders and religious leaders supported government extension workers (Parish Chiefs, Health Assistants, Community Development Officers) to mobilize targeted community members to attend 2 integrated health out reaches/camps in each sub-county/division of focus, so as to provide a range of health services provided by health workers. Hot spot areas were mapped and outreaches organized targeting about 100 people per outreach that include boda-boda riders, youth out of school, female sex workers, truck drivers.



A health worker testing people during the integrated outreach

SUMMARY OF RESULTS

A total of **2,313** members with **1,006** males and **1,307** females were reached with health services, On **HIV**, **756** members were tested of which **340** were males and **416** were females, **17** members with **07** males and **10** females were identified positive and were linked to care. **HEP B**, **724** received the service, **21** positives identified and referred, **703** were immunized. **Malaria**, **422** were tested,

117 were identified positive, **305** were negative while **411** received other services

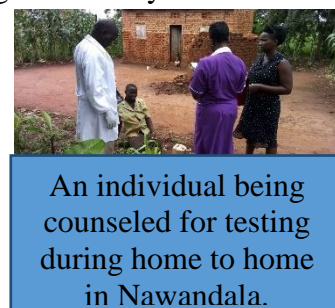
(Family planning, immunization, ANC, POLIO, VITA, DPT, T.T, Health education, VSMC)

SUB COUNTY	No for family planning	No for ANC	HTS	VMMC	Immunization	Hep B	Malaria
Namungalwe	08	20	66 with 4 positives	09	85	04 tested and all immunized	00
Nambale	00	00	91 and 2 positives	01	11	10 tested and immunized	66 with 19 positives
Nawandala	06	24	105 with 06 positives	05	08	00	94 with 24 positive
Nabitende	31	07	51	00	115	124 with 2	31 with

						positives	08 positives
Bulamagi	71	10	60 with 03 positives	00	00	168 with 02 positives	123 with 29 positives
Nawanyingi	00	02	98 with 01 positive	00	100	69 tested with 1 positive,	61 with 31 positive
Northern Division	00	00	110 with no positive	00	206	212 with 06 positives	27 with 01 positive
Central Division	00	06	160 with no positive	00	00	145 with 06 positives	17 with 05 positives

ACTIVITY: Map 20 homes/ bars suspected of HIV and Organize 48 home to home, bars to bar HTS and link positive clients to care.

KADO together with health workers, VHTs, stepping stone facilitators that were trained in each sub-county/division mobilized the selected homes for the HTS services. This targeted couple testing, youth, young women, KPs and PPs and other service deserving community members to drop in centers and health facilities for HTS, care and treatment and psychosocial support. The VHTs, expert clients, linkage facilitators identified the homes where the heads and other individuals had doubtful sex Behaviour and the health workers organized HTS services to these individuals and the positives were linked to care in the different health facilities.



An individual being counseled for testing during home to home in Nawandala.

SUMMARY OF RESULTS

A total of **1022** household members with **442** males and **574** females were reached with HTS services **230** household heads were tested of which **95** were males and **135** were females, **33** members with **13** males and **20** females were identified positive and were linked to care.

NAWANDALA SUBCOUNTY

140 with 77males and 63female household homes, 02 bars, 03 hotels, 01 lodge and 01 petrol station mapped

A total 44 Members were tested, of which 16 were males and 28 were females, and 07 positives were realized of which 05 were males and 02 were females.

Other cases identified were 02 males for malaria , 01 male with black water fever,02 females with joint pain,02 females with back pain,01 female with heart problem,01 male with severe inching cough ,01 female and 01 male with inching skins,02 females with stomach problems and 01 female kid with malnutrition

The identified positives were linked to Nawandala health centre III by the community linked for care.

NABITENDE SUB COUNTY

140 with53 males and 87female household homes and 03 bars were mapped, visited and 27 were subjected to HTS 13 were males, 14 were females and 05 females positive were identified with no male, the positives linked to Bugono health centre III for care.

BULAMAGI SUB COUNTY

A total of 127 with 37 males and 90 female Household homes and 01 bar were mapped , reached and 32 members were tested of which were 18 females and 14 were males .05 positives were identified, of which 04 were females and 01 was a male

Other cases identified

measles 03 with 01 male and 02 females, PID 03 females, fungal infection 02 with 01 male and 01 female, LAP 01, eye infection 01 male, paralysis 01 male

NAWANYNGI SUB COUNTY

A total of 122 with 57 males and 65 female household homes and 06 shrines and 01 bar were mapped and reached 24 members was tested 09 were males 15 were females. And 03 positives were identified of which 02 were males and 01 female.

Other cases identified were those with complaints severe joint pain/headache 01 male, chickenpox 01 male, these cases accepted to be linked to Bunyiro Health centre III

NAMBALE SUBCOUNTY

119 with 48 males and 71 female household homes, 05 bars 01 saloon and 02 lodges mapped were reached out .A total of 25 were tested and of that 13 were females 12 were males.

And a total of 05 positives were identified with 02 males and 03 females

NAMUNGALWE SUB COUNTY

A total of 130 with 53 males and 77 female household homes, 03 bars, 01 video (kibanda) mapped were reached out, and 26 household members were tested with 11 males and 15 females. 05 positives were identified, of which 04 were females and 01 was male.

NORTHERN DIVISION

121 with 57 males and 64 female household homes, 02 bars, 02 video shows (Bibandas) and 01 welding site were the mapped areas reached where HIV risky spots were targeted and tested.

A total of 22 people were tested of which 08 were males and 14 were females

No positive was identified here

CENTRAL DIVISION

123 with 66 males and 57 female household homes, 02 bars, 01 local shoe making site, eye FM radio, were

A total of 30 were tested of which 12 were males and 18 were females. 03 positives were identified ,with 01 female ,02 male and 01 female with anal swell complain , the 02 males positives and 01 female with anal case were linked to Nakavule main hospital,

Activity: Mobilize 320 households at risk of HIV and Organize WASH promotion campaigns integrated with HTS for eligible household members in response to TX_NEW.

KADO organized 3 WASH campaigns in each of the 8 lower local governments. KADO facilitated trained VHTs, clan leaders and youth leaders to work with government extension workers (Parish Chiefs, Health Assistants, Community Development Officers and Health Assistants) in each of the 8 Lower Local Governments to expedite the promotion campaigns at community level. There was demonstrations at selected homes after which other household heads was supported to replicate. Attention was directed towards improving community water sources, safe water chain in the home, improving home sanitation and hygiene. KADO has names of household heads that will meet set criteria recognized in village, Parish, Sub-County /Division and district councils for others to enumerate.



AVHT coordinator demonstrating on how to make a local wash hand facility at the toilet

a total of 399 members Received HTS services, 39 members were identified positive and were linked to care.

40 households were assessed under WASH CAMPAIGN basing on hygiene and sanity of their ;latrines, water points drying rack, bath rooms,rubbish pit, state of the house,compound,hand washing facility,containers,etc.

The HTS was conducted in homes at risk of HIV in each of the sub counties visited.

Testing kits were picked from respective sub county health centers.

NAWANDALA SUBCOUNTY

40 household heads were assessed under WASH campaign of which 16 Were males and 24 females, the health worker used a tool to grade the state of hygiene and sanity of each home component in every home stead.

Under HTS, there was HCT counseling and testing of all household family members using three health workers ,here a total 69 members were tested, of which 41 were males,28 were females, and 07 positives were realized of which 02 were males and 05 were females.

NABITENDE SUB COUNTY

40 households assessed for WASH, 23 were males and17 were females.

Under HTS a total of 73 members were tested, 47 were males, 26 were females and only 01female positive was identified and linked to Nabitende health centre III for care.

BULAMAGI SUB CONTY

A total of 30 Household members were tested with09. Males and 21 Females. 07 positives were identified, of which were 04 females and were 03 males and all these were confirmed, linked to Bulamagi heath centre III for ART.

NAWANYNGI SUB COUNTY

a total of 75members were tested, 29 were males,46 were females.05 positives were identified of which 02 were males and 03 were females.

Other cases identified were those with complaints cough 01female, mumps, skin/fungal infections like ring worms01female, measles 01male, candida01female, severe headache01female, asthmatic 01 male and T.B 01 male .And all these cases accepted to be linked to Bunyiro Health centre III.

NAMBALE SUBCOUNTY

40 households examined, 21Were males, and 19 were females. While on HTS exercise a total of 39 were tested and of that 18 were females 21 were males.

And a total of 06 positives were identified with 04 as males and 02 as females

Several family members in some homes were also identified with other cases of sicknesses,for example:

Ulcers, eye infections 01males &01 females, Candida &severe malaria 01 female, skin rash 01female, ring worms 01male, abdominal pain01female and severe headache 01female.

And all these cases Including the 06 positives were linked to Nambale health centre III fore care through the linkage facilitators.

NAMUNGALWE SUB COUNTY

A total of 45 house hold members were tested with 25 males and 20 females. 09 positives were identified, of which 03 were females and 06 were males and all of these were confirmed, linked to Namungalwe heath centre III for ART.

NORTHERN DIVISION

A total of 22 people were tested of which 08 were males and 14 were females

.02 female positives were identified .These were linked to municipal health centre for care.

On WASH assessment, out of the 40 households, 22 were males and18, were females.

CENTRAL DIVISION

A total of 36 members were tested, of which 14 were males and 22 were females, with 03 positives of which 02 were females and 01 was a male.

The identified positives were linked for care at Islamic health centre

On WASH promotion campaign, out of 40 households monitored, 17 were males and 23 were females.

ACHIEVEMENTS

- TOTAL OF 6947 People have been reached with 3023 males and 3918 females.
- A total of 2297 people have been tested for HIV and 98 positives were identified. Where 47 were females and 51 males.
- **HEP B: 724** received the service, **21** positives identified, **703** were immunized.
- **Malaria: 422** were tested, **117** were identified positive
- Under WASH promotion campaign, a target of 320 households in the 8 sub counties of the project area was assessed.
- Over 920 household homes were reached out.
- 19 Bars were reached out as targets for HTS.
- 03 lodges in all sub counties were reached out
- 03 video (bibandas) were visited for HTS
- 06 shrines were visited as targets for HTS.
- Other spotted areas included 01 welding site in northern division, 01 petrol station in
- Nawandala centre, 01 local shoe making centre in central division, 01 saloon and 03 video Centre (Bibandas)

CHALLENGES

- Limited number of testing kits especially the confirmatory (stat pack). Where clients were tested with determine, they reacted but couldn't be confirmed until stat pack was looked for from different places.
- Inadequate circumcision kits.
- Bad weather with heavy rain sometimes hinders the activity.
- Stigma among the community members as they are not willing to test for HIV.
- Couple testing.
- Status disclosure.
- Hepatitis B is on increase and no serious attention put forward
- People fear to be tested by the health workers within their area.
- Delay at the circumcision facilities during circumcision.
- Facility leaving the responsibility to KADO to supervise VHTs for work.

Lessons learnt

- High demand for testing.
- Increased cases of Hepatitis B.
- There are reduced health programs targeting schools.
- There are more HIV clients in local communities than in the town
- Some clients are enrolled to care in more than one health facility hence new all the time.
- Some clients prefer getting drugs from far not nearby facilities.

RECOMMENDATIONS

- Ensure that testing kits are secured in time both circumcision kits and HIV testing kits.
- Integrate hepatitis B services to be handled with caution and involved in daily testing.
- Communication from the health facilities should be done early for proper coordination.
- Health facilities should always utilize the VHTs and the peer educators trained by KADO during the out reaches to ensure sustainability.
- There should be proper cooperation at health facilities during circumcision so that clients are work up on in time.

Approved by



**Namwoyo Samson
Executive Director**