

only saved by its stunning natural landscape. The causes of this crisis are not hard to see. Rap-

when discarded outdoors. This practice was ecologically harmless and culturally unremarkable.

disease-causing germs, heavy metals, and toxic chemicals from improperly discarded batteries,

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Bring back the HIV/Aids message to the people

Recently, I had a chat with a young person who was surprised to read media reports about 60-year-old Yowanina Nanyonga of Lutunku Village in Sembabule, Masaka.

Back in 1989, at the height of the Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (Aids) pandemic in Uganda, there was serious fear among the general population.

About seven years earlier, a strange disease had been reported in Rakai and Greater Masaka. Some claimed it was witchcraft from Tanzania, while others ascribed it to a punishment from God for promiscuity.

Those who got infected characteristically turned pale, suffered from huge blisters on the skin, had diarrhoea, lost their hair and a lot of weight, and eventually passed away.

Because of this excessive wasting of the body, it was named 'Slim' or 'Siriimu'. It was a puzzle to even the best medical practitioners in Uganda, some of whom also got infected and passed away. The condition defied most medical intervention.

The house was on fire, and any help, including the input from the village witch, was welcome. So, people came up with all manner of preposterous treatment to 'save' desperate people.

I remember there was a soup of dog heads. Nanyonga's was from a divine dream that directed her to the 'white soil' from her garden; to be eaten or drunk with a mix of cold, not hot water, or bathed. An estimated 45 tonnes of soil were allegedly taken from her garden by hundreds of thousands of people of all walks of life, including religious leaders, soldiers, and the usual queue-jumping politicians who lined for more than 2kms all day. But

people still died. Then Health Minister Zac Kaheeru put an end to the madness in October of 1989. An aggressive initiative spearheaded by President Museveni after many of the soldiers who went to train in Cuba tested positive, saw Uganda eventually turning the corner. The prevalence rates had reached over 52 percent among clinic patients in Kampala, but came down drastically.

Today, it is estimated at approximately an average of five percent nationwide.

There are concerns that the most affected and at-risk segment of the population is the youth aged between 15 and 24 years. Yet over 69 percent to 77 percent of Uganda's population is aged below 25. It has been said that many young people, influenced by the Internet, are casual about promiscuity and having unprotected sex. Others say this generation, which did not see the extreme state of victims of HIV/Aids, the slimming and loss of hair, etc., does not appreciate the risk and dangers of contracting the virus.

It must be more than this because many Ugandans who survived the pandemic in the 1980s and are living today were not exactly angels. Way back in the 1980s and 1990s, the biggest bane was the lack of information about what exactly led to one being infected by HIV/Aids and how it could be prevented.

The game changer for most pandemics is not cures but well-crafted and widely communicated information that helps raise awareness about diseases and guides people on making informed choices.

I recall the Ministry of Health had a one Dr Alfred Okware of the National Aids Control programme, who dominated the airwaves. The ABC (Abstinence, Be Faithful, and Condom use) strategy was

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Nicholas Sengoba
Plainly speaking



part of this. The media constantly reminded audiences about the disease. Most news bulletins began with the sound of a drum and then the public health warning about the dangers of HIV/Aids and how to avoid them.

The *Weekly Topic*, then edited by Wafula Ogutu, fell into trouble with religious leaders for constantly carrying a front page advert of a condom stating, 'the Bible may save your soul, but this will save your life.' At Local Councils (LC) known as Resistance Councils, in schools and at seminars, health and social workers would be invited to teach people about the disease and demonstrate correct use of condoms.

I recall attending one where a man was taught that a condom should not be washed and kept for later use, as he was doing. Others asked if the virus could be avoided if they washed with very hot water and jik, a multi-purpose bleach after intercourse.

The trouble we have at the moment is what psychologists call the curse of knowledge. Many assume that because the virus has been around for over 40 years, and there is a lot of literature in the

public space, everyone is aware of matters related to HIV/Aids infection and prevention.

So there are hardly any intentional efforts to directly take the message to especially young people and drum it into their heads, repeatedly. More funding goes into holding meetings and seminars locally and globally by experts on the issue of HIV/Aids. The end user of the information resulting from these deliberations is often left with no useful guidance, and they resort to rumours. Some even think that if one is plus size, they are healthy, or that young girls are less likely to be infected, yet many adolescents were born with the virus.

The rest run to social media. The trouble with social media is that unsubstantiated and sensational information is in vast supply.

It is often soiled with Nanyonga-like cures; paraded all over the place, including one that eating a bulb of raw onions twice a day will save one from infection. Anyone who calls themselves a doctor, sets up a page, and starts selling concoctions and often unproven advice. They are no different from crooked, money-seeking evangelical pastors who preach healing miracles for HIV/Aids. Many have to be disabused of the notion that getting infected is not that serious because there is now a 'cure' (Anti-Retroviral Treatment or ART). Preaching behavioural change, especially to young people, may not cause the desired change. It is not easy to move from what you do not properly understand to a better place.

The HIV/Aids message has to be simplified and taken down to the grassroots, in the most basic form, and spread as widely as possible.

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