

Bleak future. At least 7,000 HIV patients are to be affected as Mildmay Uganda and Protecting Family Against HIV/Aids pull out of the districts.

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Anxiety as key HIV/Aids agencies pull out of Masaka, Bukomansimbi

MASAKA/BUKOMANSIMBI. Apprehension is building up among more than 7,000 people living with HIV/Aids in the districts of Masaka and Bukomansimbi after key non-governmental organisations (NGOs) offering services for their well-being ended their operations in the two districts.

Daily Monitor has established that Mildmay Uganda and Protecting Family Against HIV/Aids (PREFA), are among the NGOs who have indicated they are on their way out.

Both organisations have played a cardinal role in HIV/Aids prevention, care, treatment and support services to the affected families with a historical focus on Elimination of Mother-to-Child Transmission (EMCT) of HIV.

They had also built their clientele over a period of time where they would extend their programmes to the communities in the remotest areas.

Explaining why they pulled out at a time they were most needed, the two partners said their projects had come to an end.

Out of the 7,000 HIV/Aids clients who are likely to be affected by the NGOs' exit, 3,500 are in Bukomansimbi District.

Many people living with HIV/Aids fear that the pulling out of the NGOs would expose their lives to danger.

"It is really bad news for us. We have been receiving good services from them and we really don't know what to expect next," a visibly worried Proscovia Nakiguli, one of the people living with HIV/Aids in Masaka, said during an interview last Friday.



On duty. A medical officer collects a blood sample from a client for an HIV/Aids test at a mobile health camp in Masaka District recently. PHOTO BY MARTINE E. SSEKWEYAMA

10.6%

THE CURRENT HIV/AIDS PREVALENCE IN MASAKA DISTRICT.

Mr Joseph Lwanga, another HIV/Aid patient, expressed fear that their privacy will be compromised since the health experts in those NGOs had become a part of their family.

He said: "We had become so much accustomed to the staff working with those organisations. They had become part of us and we were free with them. It may take some time for some of us to get used to the new staff."

But Ms Sandra Namawejje, another person living with HIV/Aids, says she is hopeful that God will pave a way for them.

"I am not shaken at all; I am very much aware that God is in charge and will watch over us all the time," she said.

Commenting about the NGOs' exit, Dr Stuart Musisi, the Masaka District medical officer, said although the NGOs are pulling out, HIV/Aids patients in the district will continue getting the needed assistance to enable them cope with life.

"It is true major NGOs operating in the area of HIV/Aids are pulling out, but there is no need for alarm. Our people will still receive services and this, time it will be in a more organised manner," he said.

He observed that most NGOs have been duplicating the work of other organisa-

Voices



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tions and that under the new arrangement, all people living with HIV/Aids will be taken care of by Rakai Health Sciences Programme (RHSP), formerly known as Rakai Project.

"Instead of having multiple organisations duplicating the same services, we shall have one to extend those services to our people," he said.

When contacted, Mildmay Uganda Communications Manager, Mr Tadeo Atuhura said after five years of their presence in Masaka, the project had to come to an end.

"There are partners to take up the responsibility that we have been carrying out, there is really no need for worry about that," Mr Atuhura said in telephone interview with this newspaper recently.

Other organisations implementing the same programmes in the district include: The Aids Support Organisation (Taso), Kitovu Mobile and Uganda Cares.

Mr Dick Bugembe, the coordinator of Masaka District Forum for People Living with HIV/Aids, said RHSP was welcome for as long as they can serve with professionalism and extend services to all their members.

"Currently, I don't know how RHSP operates, but the organisations they are replacing have been moving down to the communities and extending their services to their clients. They used to mobilise people living with HIV/Aids at parish level. So, if they can do exactly that, they are welcome," he said.

Mr George William Katongole, a biostatistician in Bukomansimbi District, said the exit of Mildmay Uganda will affect some staff as the district will retain only 14 out of the 21 staff who have been extending services to HIV/Aids patients.

Dr Musisi said the HIV/Aids scourge in the district is still a major health hazard and the prevalence currently stands at 10.6 per cent, implying that an estimated 32,637 people are living with HIV/Aids.

"Of course, pockets of high HIV incidence still exist among the key popu-

UN REPORT

Status. A report by UNAIDS released in 2014 ranked Uganda third among the 15 countries that accounted for more than 75 per cent of the 2.1 million new HIV infections that occurred in 2013. The 2013 HIV/Aids Uganda country progress report by UNAIDS showed progress, with 793,893 people living with the virus on Anti-Retroviral therapy, but 570,373 on active treatment.

In 2014 alone, 1.7 million additional people living with HIV/Aids received Anti-Retroviral therapy. HIV/Aids related deaths fell from 72,928 in 2011 to 61,298 in 2013.

Looming crisis. However, last year, UNAIDS warned of a looming crisis unless Uganda controls the 227 new HIV/Aids infections registered daily, especially among the youth.

The fishing communities such as Bukakkata Landing Site in Masaka District, are among the areas with the highest HIV prevalence rate and on some islands, it triples the national prevalence rate, which currently stands at 7.3 per cent.

lation, mostly those settled at landing sites with a prevalence of nearly 25 per cent," he said.

The district has a total population of 300,000 people.

He, however, said a total of 27,700 out of the 32,000 people currently living with the virus in Masaka District, have already enrolled on Anti-Retroviral treatment. He urged those who have not enrolled to quickly respond to the free services.

"In the past, people wondered why they had to test for HIV/Aids given the fact that there was no treatment, but currently, they test willingly with hope to enroll for treatment when one tests positive. As a district, we will continue to prioritise HIV/Aids interventions and pledge our support and commitment to this noble cause," he said.

He said the change in policies has also contributed a lot towards the increase in the number of people registering for HIV/Aids treatment whereby whoever tests positive is enrolled on treatment, unlike those days when there was consideration for one's CD4 count.

"Stigma is no longer a problem among those who test positive because they can freely associate with others without being identified," Dr Musisi says.

Majority of the people testing HIV/Aids positive in Masaka are women, according to Dr Musisi.

"But this is so because they want to seek treatment early, unlike their male counterparts who wait for such a time when they become ill and consider testing to know their status."