

THE FAWCO FOUNDATION 2011 DEVELOPMENT GRANT

INTERIM REPORT

Grant Category: THE COUGHLAN FAMILY FOUNDATION PREVENTION AND TREATMENT OF HIV/AIDS, MALARIA AND TUBER CULOSIS

Project Name: HIV/AIDS AWARENESS CREATION AMONG THE FISHING COMMUNITIES OF KATOSI

Sponsoring Club Name: AWC THE HAGUE

FAWCO Rep's Name: SARA CRABTREE

Interim Report Written by: KATOSI WOMEN DEVELOPMENT TRUST

Date that the FAWCO Foundation Development Grant money was received: 13TH. JULY .2011

Please outline how the Development Grant funds have been used -be as specific as possible. For example, if supplies/equipment, what was purchased, who was the vendor, cost. If salaries, how many workers were paid and for what positions.

The development grant has been used to implement the following activities;

1. **Launching and sensitizing the community about the HIV/AIDs program at Katosi and the importance of testing.**

The launch of the KWDT HIV/AIDS project was conducted on 7th September 2011 at Katosi Landing Site. A total number of 36 KWDT members from all the 13 groups, 10 political leaders and 8 local government leaders from the district attended the launch. The launch aimed at arousing the awareness of the community on the high HIV rates in their area as compared to other areas in Uganda and to instigate community action to redress the situation

The launch created awareness in the community about the new program that was being funded by FAWCO and implemented by KWDT.

The drama performed by a local drama group in Uganda accompanied by an open dialogue about HIV testing, aroused people's interest in knowing their status and since then many have approached KWDT women groups asking for the testing services to be taken near them.



Sumamu group, a local drama group performing during the project launch at Katosi landing site. Through drama the actors and actresses portrayed stigmatization of HIV/AIDS and empowered both the infected and the affected with measures to stop stigmatization.



After the drama Group leaders facilitated by KWDT staff discussed and shared with each other strategies to increase community's participation to redress HIV/AIDS in the community.

2. Trainings on HIV/AIDS testing, prevention and treatment.

Each of the 13 KWDT women groups and community members from 4 sub counties of Mpata, Mpunge, Nakisunga and Ntenjeru received training in HIV prevention, testing, and positive living.

KWDT members were responsible for mobilizing members of their communities to attend the training.



Members of Muwumuza women's group mobilized community members and delivered key message through music before training and testing in their community.

The trainings were conducted by an HIV/AIDS service providing organization; Kyetume Community Based Health care program (KCBHCP), with whom KWDT made an MOU for the implementation of this project. The trainings this time took place in the homes of the women, and their family members, older children, husbands all got an opportunity to attend the trainings.

The trainings incited and encouraged the women and their family members, older children as well as the husbands to take HIV test, sensitive questions regarding HIV from the women were answered, information and facts on HIV was given, and every after each training, the date set between the group and Kyetume staff for the testing was set.

In each of the groups, a date was set for the testing after the training sessions. Women were encouraged to invite their partners, older children and any members of their households to be tested as well.



Members of Katosi women fishing and development association during their training on HIV/AIDS

3. HIV/AIDS Testing among 13 KWDT women groups

A total of 260 group members and 40 community members (husbands, teenage children and household/family members of the women) voluntarily tested for HIV/AIDS, making a total of 300 people that tested for HIV. Among these 91% were women and 9% were men, most of whom were husbands to the women members of KWTD.

Prior to the testing, each member was offered counseling to enable them make an informed decision concerning the test that they were about to undergo, as well as preparing them for any possible results that they were about to receive. After the testing, counseling was done again to prepare them for the results and teaching them on how to live their lives after knowing their HIV status.

7% of the people, tested positive and ready to be enrolled on ART and palliative care. These were all put on septrine and they need their CD4 count to be done and enroll on ART treatment. These 14 members were encouraged to have a positive living

and have regular medical checkups at the nearby hospital in Ntenjeru.

Although the project had planned to test only the members of KWDT, creating the partnership with KCBHP, who provided the extra testing kits helped to extend the service to 27 spouses and 13 family members of the 13 groups.

A total of 300 people tested and got to know their HIV status. Many of these, did not know their status before and had never tested for HIV before, claiming that they feared the open public places where such tests are usually conducted, and this time women said they were happy that the testing was conducted in the home of members where they were free and did not fear as it happens when the testing services are taken to public places.

4. Home visits.

After the testing and counseling, 8 households needed special attention and home visits were arranged for them. The health workers from KCBHP visited these families on agreed dates. Some of the issues to deal with during the home visits included among others; Encouraging spouses to come for testing too, Talking to teenage children about HIV/AIDS and possibly arranging for testing for them, Helping the women to disclose to members of their families about the HIV status after testing among others.

NO	Name of group	No of KWDT members for VCT	family members	No of members tested positive
1	Katosi Women Group	15	3	2
2	Bukwaya Women group	21	6	1
3	Kulubbi women group	11	1	0
4	Bugolombe women group	52	7	6
5	Bugoye women group	20	3	1
6	Twekembe group	10	1	0
7	Bulonda group	11	1	2
8	Kisakye women group	8	2	1
9	Nakisunga Group	47	6	1
10	Bakayala kwagalana group	19	2	3
11	Ntanzi Group	7	1	2

12	Kalengera	18	4	1
13	Muwumuza	21	3	1
	Total	260	40	21

"The people that tested positive still need help, especially in facilitating them to access treatment, counseling them on disclosure and positive living. On the other hand, even those that tested negative need to carry out more testing as advised by the health workers, and they need to be equipped with skills on how to keep safe from HIV infections." *As explained in the report by the HIV/AIDS programs Officer from KCBHP*

What percentage of the Grant has been used to-date?

100 percent of the grant has now been used to implement all the above activities.

What is the percentage amount of the Grant to the total project's expense budget?

The grant covered 100% of the total project budget. Although after the implementation, more needs related to this were discovered and are still pending and KWDT is fundraising for the same.

Do you anticipate that your project will be on, under or over the planned budget?

N/A

If the project will be over budget can you briefly explain why?

N/A

If the project will be under budget can you briefly explain why?

N/A

Please describe how the project is progressing. Have you been able to execute your original plan?

With HIV/AIDs prevalence in fisher communities at 38% as compared the rising national prevalence at 6.4- 8 % the intervention was timely and still wanting. The project was a spark and as a result, many community members are demanding to be given access to testing and counseling services in their homes.

KWDT signed a memorandum of Understanding (MOU) with Kyetume Community based Health care Program (KCBHCP), that works in this

area. Although this had not been planned earlier during the project planning phase, at the time of implementation, it was realized that it is very necessary for continuity of the program and for sustainability purposes, because KCBHP operates in this area and it would be easy for members of KWDT to seek treatment and any help from KCBHP.

The project achieved all its intended objectives, but also made other needs visible. Some of the services that are so crucial but were not planned for during the project include the following;

- It was realized that the family members and spouses needed to access the services as well. Although the project initially targeted the women members of KWDT, when it was started, the women realized and requested that those who have spouses, them to should be given an opportunity to access the services and their older children as well.
- Subsequent tests for all women as advised by the health workers, that each person should test at least 3 times, so as to rule out the "window period" issue.
- Facilitating some poor members to access treatment.
- More counseling at the household level, in positive living and disclosure.
- CD4 count for some members and be enrolled on ART.

Have you run into any obstacles? What kind of obstacles? Will they prevent you from achieving your goals?

Like any other project, this project encountered a few challenges during its implementation including;

- ✓ Fear among some women to be tested for HIV. Although it was initially planned that all the 285 women be tested for HIV, at the time of testing, 260 members turned up for the testing, and 25 members did not turn up.

The chairperson of Kisakye women's group, in explaining why some women did not turn up mentioned; *"some of them told us that they have already lost their husbands, and they know their HIV status and thus no need to test"*

The above poses a big challenge for KWDT to follow up all members and still encourage them to know their HIV status and be facilitated to take the right measures. The importance for testing as the only correct diagnosis other than presumption is still lacking resulting in reckless behaviors, living under worry other than engaging in protective and positive living measures.

- ✓ Some members from poor households will need to be facilitated to go and get treatment from the nearest health centers, to ensure that they adhere to the treatment.
- ✓ Other families still need to be supported economically, to help them establish income generating activities to ensure a good life for those who are infected with HIV/AIDS.

Please describe how, up to this point, has the FAWCO Foundation Development Grant money contributed to the success of your project.

- The grant has enabled the women to get access to testing in their groups and in one of the members' homes other than the usual testing that take place in public places.
- The grant has helped other family members of the women members of KWDT also to have access to testing services.
- It has created awareness on the existence of HIV/AIDS services such as treatment and counseling. Previously many of the women did not have information on where to go for help on issues related to HIV/AIDS.
- It has helped to create and strengthen collaboration between KWDT and Kyetume, which collaboration will help to bring HIV services closer to the people in Katosi.
- The project has raised the profile of KWDT in the community for its capability to address community problems.

Please submit a copy of this Interim report to Dolores Cuellar, The FAWCO Foundation VP Programs, no later than January 30, 2012.

Completed forms may be sent via email to grants@fawcofoundation.org or through the post at:

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