

Organization Name	International Community of Women Living with HIV eastern Africa (ICWEA)
Name of reporting Person	Kanyeihamba Robinah
Position	Volunteer
Date	29 <sup>th</sup> / 03/2016
Country	Uganda
Specific location/ Place of activity	Kyenjojo District
Specific Meeting attended	World Tuberculosis day 2016

#### Brief activity description

World TB Day is held each year on March 24<sup>th</sup> and aims to build public awareness for tuberculosis a disease which despite being curable remains a destructive epidemic in much of the world. We commemorate Dr Robert Koch's announcement in 1882 of his discovery of the TB bacillus, the cause of tuberculosis on that day. His groundbreaking research opened the way toward diagnosing and curing this disease. World TB Day is an opportunity for people everywhere to join this fight by helping to educate others about TB and by urging governments to take action. <u>We believe that</u> together we can End TB for once and for all.

ICWEA uses such advocacy foras as World TB Day to advocate for the rights of Women living with HIV in the region because TB like Malaria and HIV has had devastating consequences on the lives of women and their children. The International Community of Women Living with HIV Eastern Africa with funding from Common wealth Foundation through the project title "Partnership with women living with HIV in improving health service delivery and accountability" participated in this calendar event which was celebrated under the Global Theme; "Unite to end T.B" and The slogan was "Find, Treat and cure everyone". Our message for the day was "Unite with women living with HIV to end TB".

The World Tuberculosis Day main celebrations in Uganda were held in Kyenjojo District at Kyenjojo Senior Secondary school, the event began with a march from the school's grounds through the different streets of Kyenjojo town. Among the participants were the Government officials, Implementing partners, civil society organizations and Women Living with HIV.



Some of the participants marching through the streets

#### Objectives of the Activity

• Ensure that the voices of women living with HIV are part of the many voices fighting the TB Epidemic in the Eastern African Region and world over through participation in such advocacy foras as the World Tuberculosis Day

### Output /Deliverable (Include gender where applicable) share photographs and any other documentation were possible.

• ICWEA facilitated <u>35 women living with HIV and 5 staff including one ICWEA</u> Uganda Chapter board representative (see appendix 1 for the list of participants)



Some of the ICWEA facilitated participants at the function in Kyenjojo Districts

- Developed and shared (both hard and electronic) a poster (see appendix 2)
- Developed and shared (both hard and electronic) a World Tuberculosis Statement (see appendix
  3)

#### Issues Arising: (include popular quotes, saying and voices from the members present

1. The regional Tuberculosis and Leprosy program for western region said that the government chose Kyenjojo district because is one of the districts in the country that is lagging behind as far as response to the TB disease is concerned. He further urged Kyenjojo district officials to

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combine efforts in addressing and fighting the disease with the support from Government and other implementing partners. It was further stressed out that Uganda gets about 50,000 new cases of tuberculosis every year, 15% of whom are children. The TB burden is worsened by the concurrent infections amongst people living with HIV. It should be noted that about 50% of the TB patients in Uganda are as well suffering from HIV/AIDS

- 2. According to the Country director of International Union against Tuberculosis and Lung Disease, each person has a 10% chance of contracting tuberculosis through inhalation in his/her lifetime, but the risk rises to 50% for one with HIV. It was noted that the TB burden in Uganda is still high mainly because of the HIV/AIDS epidemic. Latest statistics from the Uganda Aids Commission show the national HIV prevalence stands at 7.3% from 6.3% in 2012. On the other hand, the new TB cases in Uganda amount to 50,000 cases annually
- 3. The DHO Kyenjojo District congratulated Ministry of Health for the great work done in 2015 especially when we are transiting from MGDs to SDGs. He noted that Kyenjojo districts has 40 health Centers (17 are government aided health facilities) and has at least a HC III in each sub county. He further said that the district will be recruiting 67 health workers in April 2016, and Kyenjojo district has rollout ART guidelines in all clinical settings.
- 4. The Minister for Health Launched a Gene Expert Machine and acknowledged of service providers in Health

#### Challenges

Like any other health facility in Uganda, accommodation for health workers is a challenge, and even medical officers are not well motivated to work in the district

#### **Recommendations:**

The DHO made the following recommendations;

- Government should improve the quality of health service delivery at Health Centre III by accrediting them with standard laboratories,
- Government should increase the budget for essential medicines,
- Government should get back to ABC strategy (Abstain Behavioral change and Compliancy) and Community approach as an HIV prevention strategy

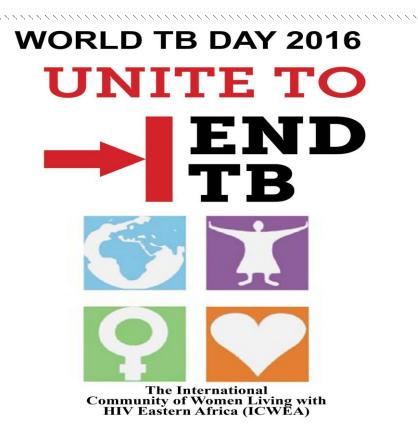
#### Agreed way forward/specific action, by who and when:

No action points were recorded since this was a one-day off

Appendix 1: Attendance list for world tuberculosis day at Kyenjojo district on 24<sup>th</sup> march 2016

Names	Email/Telephone Number
1. KWAGALA BETTY	bettykwagalasa@gmail.com/0772452936
2. KOBUSINGE	0783497301
3. KENGONZI ANNET	0785045171
4. KATUSABE PELUS	0783202967
5. TIBENDA BETTY	0782151493
6. NYANGIREKI SESIRINA	0775821748
7. SUNDAY SCOVIA	0776452162
8. TWINEMUJU KEDRES	
9. TUMUSHABE MARGRET	0778152906
10. OWAMAHURO MAWUDE	
11. NAMARA JACINTA	0789850171
12. ANAA MARY	0773329610
13. KANVELI MBABAZI	
14. KABAHUMA MARGRET	
15. KYAKYO BEATRICE	
16. KANEEMA ESTHER	
17. KAJUMBA VIOLET	0701394076
18. HAMBERE EVELYN	0782277290/0705441617
19. KABASOME MARGRET	0784694378
20. TIBASAGA TED	0779520266
21. KEZABU JESIKA	0788130164
22. BALIKURUNGI .K	
23. KAYEZU M	
24. KOMUHENDO GRACE	0783796259
25. TUMURAMYE .E	
26. KAMAKUNE ROSE	0778607090
27. KABRAMUZIEE	0785544412
28. KAMUKADA AMIN	
29. GOD NYAIRERI	
30. KABASAMI ANGELINA	0778468830
31. KABONESA GRACE	
32. MAWIINO JENIPHER	
33. KENGOZI ADREDA	
34. TUSIIME .M.FLORENCE	tusiimeflorence@gmail.com/0782870964
35. KEBISONI JESSICA	
36. NYAMYALO PENNINA	
37. NYAKATO SARAH	
38. KANYEIHAMBA ROBINAH	
39. DOROTHY NAMUTAMBA	
40. BRENDA FACY AZIZUYO	
41. NAMYALO JANET	
42. ROBERT KABWANA	

Appendix 2: ICWEA's World Tuberculosis Day Poster



Women Living with HIV unite to improve health service delivery & accountability

#### Appendix 3: ICWEA's World TB Day Statement

# Unite to End TB! Women living with HIV call for an end to the TB epidemic through improving health service delivery and accountability

March 24, 2016

## Find treat and cure all women living with HIV that need TB Treatment. Care and save over 160,000 women dying of TB every year

As The International Community of Women Living with HIV Eastern Africa (ICWEA) commemorates the World TB Day, we recognize that Tuberculosis (TB) is the leading killer of people living with HIV in Sub-Saharan Africa. The World Health Organization (Who) estimates that at least one-third of the nearly 36 million people living with HIV/AIDS are also infected with TB. But the disease kills more women each year than any other infection especially because there are more women living with HIV. Globally, women make up 52% of all adults living with HIV and 58% are in sub-Saharan Africa. TB is particularly disastrous for women living with HIV who have poor access to health services, making them particularly vulnerable to the outcomes linked to undetected or late detection of the TB disease. The 2014, Global WHO report indicates that TB killed 1.5 million people; 1.1 million HIV-negative and 0.4 million HIV-positive. The toll comprised 890,000 men, 480, 000 women and 140,000 children.

Women face acute risks of TB/HIV co-infection and subsequent TB disease, it remains among the top killer diseases of women of reproductive age. The three East African countries (Uganda, Tanzania, and Kenya) remain among the 22 TB high burden countries in the world. Case detection and treatment success are still low in East Africa. This predicament waters down efforts to control this very highly infectious disease which mostly affects women who care for the sick both in health facilities, at homes and communities. Pregnant women living with HIV and with active TB face far higher risks of maternal mortality than HIV negative women. Accordingly, universal access to TB prevention, diagnosis and treatment services is critical for women living with HIV. Despite the importance of early diagnosis and treatment of TB for successful outcomes, few mechanisms are in place to target women of reproductive age with TB services, especially for women living with HIV.

Too often, these women face the lethal combination of living with HIV and having poor access to health services, making them particularly vulnerable to poorer outcomes linked to undetected or late detected TB disease. Many women living with HIV do not get the medical care and treatment they deserve while some die undiagnosed. There is limited information in communities. TB has been left to the laboratories and health facilities and yet it is a big public health problem. Women living with HIV often miss health promotion programmes and remain unaware of TB symptoms due to the genderrelated barriers that impact women's access to TB information and services. Where women do not control family resources, they often delay seeking medical care as they many times have to seek permission and money to go to a clinic, fearful of being seen going to a TB clinic, because of the stigma. TB is treatable and curable, let us commit to diagnosing TB, effectively treat it and end the TB epidemic in our community. Community engagement and empowerment in implementation, is critical if TB is to be eradicated. Ending TB will only be achieved with greater collaboration within and across governments, let us all work together.

#### Our call

We call upon world leaders, policy makers and implementers to meaningfully involve women living with HIV and promote accountability to end the TB epidemic.

ICWEA therefore recommends that TB treatment and care for Women living with HIV be elevated as a key women's health issue. TB screening, prevention and treatment should be made part of HIV, reproductive health and maternal and child health services for women living with HIV.

We call upon our government, all partners and stake holder in TB response to urgently develop and implement clear plans for sustainable TB financing and scale up beyond current donor funding continue engagement with women living with HIV.

#### Women Living with HIV unite to improve health service delivery and accountability

### Agenda;

Programme for W	/orld T.B day 24 <sup>th</sup> /03/15
8:00am	Brass Band arrives
8:30am	Procession start
9:00am	Arrival of Guests
9:30am	Arrival of Chief Guest
	Brass band led marching to kyenjojo secondary school
10:00am	National Anthem and inspection of guard of honors
10:30am	Inspection of stalls by chief guest
11:15am	Speeches / Remarks
	DHO Kyenjojo
	WHO country representative
	Director General Health service- MOH
12:00am	Entertainment /Drama/Testimony 1, 2 and 3
12:15am	Speech by LCV/ Chairperson/ Kyenjojo District Local Government
1.30pm	Entertainment - Drama
1:55	Speech by the chief guest
	Minister of Health and recognition outstanding performance in T.B control
3:30pm:	Closure of function and Departure