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Leveraging on existing HIV community engagement to respond to COVID-19 pandemic, Challenges and Opportunities: A PLHIV Network perspective'.

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Background

- National Forum of People Living with HIV/AIDS Networks Uganda (NAFOPHANU) is an umbrella organization that coordinates networks of PLHIV, all over Uganda.
- Vision is PLHIV able to live a quality and productive life in as sustainable manner
- Uganda has 1.4 million PLHIV, about 1.2 million active on ART
- Specific Guidelines on HIV/COVID-19 exist** – The AIDS Control Programme (ACP) MOH developed guidelines on HIV/COVID-19, HIV/TB/COVID 19, FAQs fact sheets, continuously updated as issues emerge.
- PLHIV can access ART from nearby health facility

Covid 19 in Uganda

- As of 5 July 2021, COVID-19 confirmed cumulative cases were 84,979; active on admission 1,072, cumulative recoveries were 57,964, cumulative deaths 2,012, vaccine doses administered 1,027,036, total tests 1,363,101

- **Country in second lockdown**

- (curfew from 7:00 p.m. to 5:30 a.m. daily, no inter-district travel save for cargo cars, private cars for essential workers with government stickers or IDs, motor cycles only for cargo up to 5:00pm.

- All public places including places of worship and shopping arcades closed, funerals up to maximum 20 persons.

- PLHIV and other sick people can move with medical records to enable access

Covid 19 - Uganda

Bad news



Good news

- Steady recoveries
- Vaccination
- Adherence to SOPs, albeit force

Covid 19 Vaccine

Been a cycle

- Hope – Fear – Hesitancy
– Mad rush – Stock out
- Need to counteract anti vaccine campaign



PROF. VINAND M NANTULYA
*Patron,
NAFOPHANU
Senior Presidential Advisor,
VACCINES AND THERAPEUTICS*



STELLA KENTUTSI
*Executive Director,
NAFOPHANU*

TO JOIN THIS ZOOM MEETING
Link: <https://zoom.us/j/97116046910>
Meeting ID: 971 1604 6910

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Covid 19 and effect on PLHIV

- Long distances to refill centres, no public and private transport; missing appointments
- Acquiring travel permits cumbersome, including disclosing one's status
- Some facilities do not give ARVs to presumably 'new' clients, those that give range from 1-3 months
- No/limited protective gear for health workers and PLHIV peers
- Staff absenteeism as PLHIV bounce at closed facilities yet the directive is to keep facilities open
- Hunger especially the urban centred PLHIV whose livelihood of 'hand to mouth' cannot operate
- Stigma has affected PLHIV that are not yet comfortable to disclose
- Sporadic stock outs of ART
- Fear of exposure to COVID-19

PLHIV Perspectives – needs assessment surveys - 1

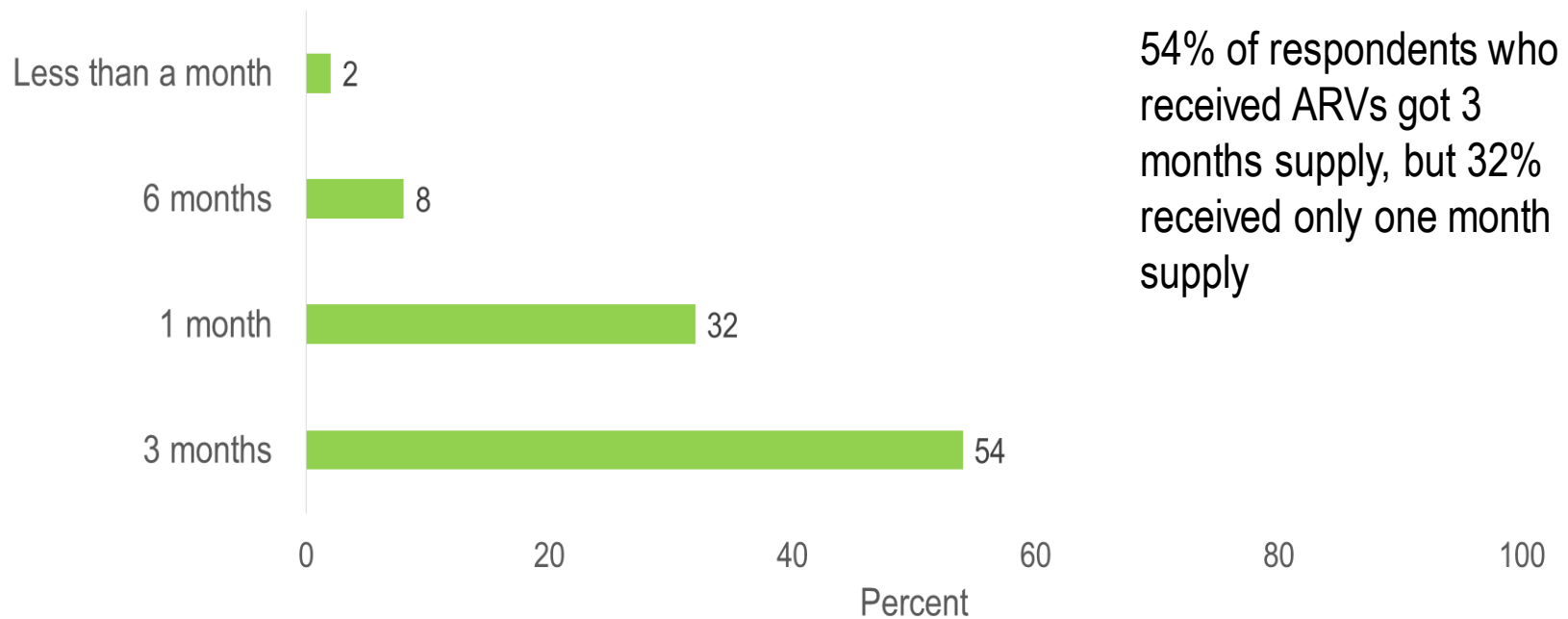
Together with UNAIDS, NAFOPHANU conducted **rapid assessments on needs of PLHIV** in context of COVID 19, late March-early April monkey survey based; reached 78 PLHIV, 55% male; 22 districts

- **60%** of participants **had two or more people** on ART in the household including the respondent
- **23% (18/78)** of respondents had children in the household who were taking ARVs
- **73%** of the respondents knew three months as the usual/standard supply for ARVs (3MMD)
- **68% of all respondents** had ARV supplies for only a month or less. **32% had ARV supplies for 2 or more months**, no significant gender and age differences
- Of the 38 PLHIV who attempted refill previous week, 35% got a partial refill and 65% did not get any refill.
- Could access TB treatment: 52% (n=27/52), condoms: 57% (n=35/61), contraception: 33% (17/51)

PLHIV Perspectives – needs assessment surveys - 2

- June-July 2020 survey, reached 630 PLHIV, 101 districts, 54% F, 46%M
- 53% had 1 month refill, 46% had 2-3 months refill

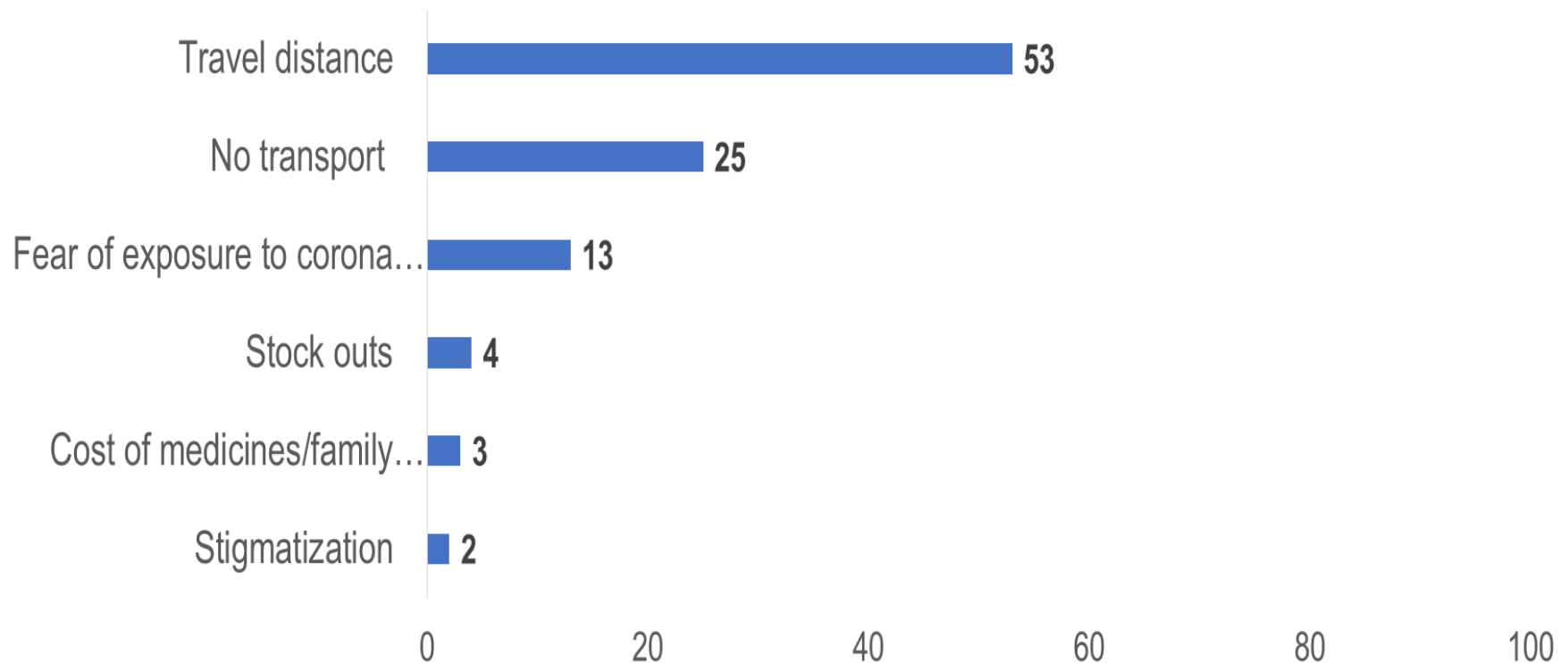
Amount of ARVs received among those who sought refill in the past week



n=136 PLHIV who received a refill past week

The analysis is based on only 136 respondents that attempted to get ARVs refills

Challenges faced by respondents since COVID19 (n=482)



78% (482/615) of respondents reported facing challenges in accessing ART due to COVID, travel distance, lack of transport and fear of exposure to Coronavirus

Major needs of PLHIV under COVID-19 context

Almost one in ten of all respondents identified the need for provision of food and means to access their treatment with ease. Other notable areas included:

- Special consideration for PLHIV on masks/PPE redistribution
- Ensure consistent supply of ARVS for three months
- Psycho-social support to address domestic violence counselling for families
- Financial support for income generating activities
- Family planning services, protection against gender based violence

Critical issues for redress

- Issues around drug resistance, unsuppressed viral load, AIDS illnesses, HIV+ babies, hunger and starvation, stigma, emotional/mental, psycho-social support, rights violations, economic issues, SRHR
- Combine bio medical with other behavioral and structural interventions if we are to survive the staggering impact of COVID19 on other lifelong chronic illnesses
- Support to PLHIV coordination structures to reach peers to mitigate the impact on access to life long treatment
- Self medication, herbal treatment and reporting late to facilities
- Exorbitant fees in private health facilities; Covid treatment and death have been too commercialized, lack of oxygen

What NAFOPHANU has done - 1

- Participated in formulation of MOH Covid 19/HIV Guidelines
- Have representatives on MOH Covid 19 Taskforce
- Formed a WhatsApp Group for PLHIV for real time updates
- Part of MOH Covid 19 WhatsApp, partners handy to address PLHIV issues
- Phone calls to PLHIV Coordinators to ascertain district status including ART access
- Food distribution
 - Embassy of Ireland (reached 3,612 households in Karamoja), Aidsfonds (reached 553 households with children living with HIV in 5 districts), UNAIDS (reached over 500 PLHIV in Kampala Metropolitan)

What NAFOPHANU has done - 2

- Hygienic pack; Reckitt Benckiser with UNAIDS; cartons of Dettol soap and Jik worth UGX 813million, distributed to over 26,568 PLHIV
- Toll free helpline
- Lobbying IPs for home deliveries,
- Support to Community Resource Persons (Expert Clients) to reach peers
- Media (radio talk shows, TV, Facebook and twitter postings, Webinars/Zoom presentations, E-posters, Fact sheets, megaphones)
- PLHIV champions who delivered/deliver to peers

E posters



Health diets are a critical response to COVID-19 pandemic, therefore eat healthy foods to boost your immunity

DAVID KABANDA

Board Member, NAFOPHANU
Executive Director,
Centre for Food and Adequate Living Rights (CEFROHT)



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Despite the challenges that COVID-19 has brought, adherence is core to positive living for People Living with HIV (PLHIV). **Therefore PLHIV should have uninterrupted access to life saving ARVS.**



STELLA KENTUTSI
Executive Director, NAFOPHANU

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COVID-19 has already claimed lives of People Living with HIV (PLHIV), so we stand a high risk of contracting the virus.

As a constituency we should follow guidelines issued by Ministry of Health:

1. Regularly wash with soap/sanitise,
2. Wear a face mask,
3. Maintain a reasonable distance of at least 2m,
4. Avoid touching eyes nose and mouth,
5. Disinfect frequently touched surfaces and adhere to ART to boost your immunity.



DR. STEPHEN WATITI

Board Chairman, NAFOPHANU



Telecounselling



Are you worried about HIV, TB and COVID-19!
For support, please call our Toll Free number:

0800100330



Masks and hygienic pack



Food distribution



Factsheets/posters

f t NAFOPHANU

COVID

— AWARENESS TIPS —

PEOPLE LIVING WITH HIV STAND A HIGHER RISK OF CONTRACTING COVID-19 THEREFORE:

-  **1. Wear a face mask**
-  **2. Regularly wash hands with soap/sanitizer**
-  **3. Maintain a reasonable distance of at least 2m**
-  **4. Avoid touching eyes, nose and mouth**
-  **5. Disinfect frequently touched surfaces.**
-  **6. Adhere to ART to boost your immunity**

IN PARTNERSHIP WITH:





FACT SHEET

USING JIK AS A DISINFECTANT








f t NAFOPHANU

HOW TO WASH YOUR HANDS?

Duration of entire procedure: 40 - 60 seconds

WHAT IS JIK

JIK is a home detergent and contains bleach and sodium hypochlorite that is strong a effective in cleaning surfaces and killing germs including those related to spore COVID-19.

- As per the Ministry of Health Preventive Guideline on COVID-19, you should;**
-  Regularly wash hands with soap and water for at least 20 seconds or use a sanitizer
 -  Regularly clean and disinfect frequently touched surfaces
 -  Maintain a reasonable distance of at least two meters
 -  Avoid touching Eyes, Nose and Mouth.
 -  Wear a face mask.
- Directions for Use**
- Washing hands**
Add 5mls (1 teaspoon) of JIK to 25 litres water and wait for 30 minutes before using. Use treated water after 24 hours to w your hands
- Cleaning and disinfecting**
- 1. Kitchen and bathroom surfaces**
Add 1/4 cup (62.5ml) of JIK to 5 litres water. Then wash floors, walls, kitch counters, showers, baths, basins and ti rinse after 30 seconds
- 2. Toilet drains and plugholes**
Add 1/2 cup (125ml) of JIK into the toilet bc drains and plugholes and rinse after minutes
- Washing clothes**
Add 1 teaspoon (5ml) of JIK to half a c (125ml) of water and apply to the hidden p of the white garment. Leave for 1 minute ti rinse

Caution

- Never drink JIK as it contains ammonia that is very harmful to your health
- Do not mix JIK with any other detergent
- Do not breathe in JIK fumes
- Do not use in a poor ventilated room

Storage
Keep away from heat or sunlight and from within reach of children

For more information, visit NAFOPHANU located on Plot 215, Seremba Rd, Mengo, Kampala
Tel: 0200 944 448 | Email: info@nafophanu.org

-  **1. Wet hands with water**
-  **2. Apply Enough Soap to cover all hand surfaces**
-  **3. Rub hands palm to palm**
-  **4. Right palm over left dorsum with interlaced fingers and vice versa**
-  **5. Palm to Palm with fingers interlaced**
-  **6. Back of fingers to opposing palms with fingers interlocked**
-  **7. Rotational rubbing of left thumb clasped in the right palm**
-  **8. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa**
-  **9. Rinse Hands with water**
-  **10. Dry hands thoroughly**
-  **11. Use towel to turn off faucet**
-  **12. Your hands are now safe**

IN PARTNERSHIP WITH:
 UNAIDS



Peer to peer support

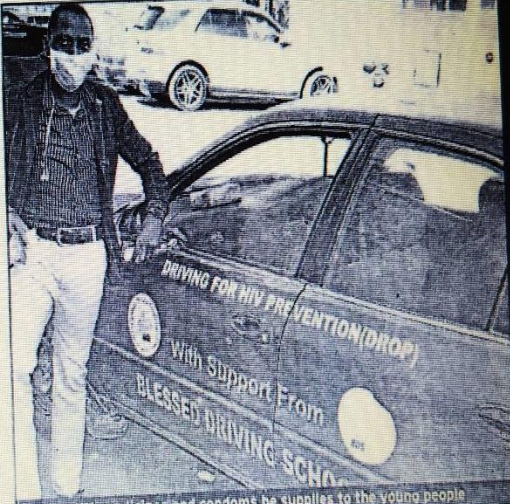
KURAISHI MUBIRU IN DOOR-TO-DOOR DELIVERY OF HIV MEDICINE, FOOT

PHOTOS BY SHAM

GOING EXTRA MILE

New Vision is celebrating people offering selfless service in the fight against the novel coronavirus. Today, **Carol Kasujja** writes about Kuraishi Mubiru, the Executive Director of the Uganda Young Positives

With dozens of cases confirmed in Uganda, the coronavirus (COVID-19) pandemic continues to be a big threat. The measures taken to control the spread of the virus have disrupted every aspect of society. Closing schools, ban on public and private transport, trade in non-food commodities, closure of places of worship, among others, have radically changed the known normal way of life.



CHALLENGES

Mubiru thought delivery of drugs was going to be an easy job.



Strategies and best practises

- Community mobilisation and sensitisation
- Working with existing structures
- Media
- Integration of disease components and programme areas
- Livelihood support programmes

Leveraging on existing structures

- Working with existing networks and community structures
- Take advantage of community embracing of vaccine uptake and conduct mass vaccination
- Strict enforcement and adherence to SOPs.
- Communication: Capitalize on mobile phones as over 90% of PLHIV have them. However, radio is still the main source of information on COVID19

Need for reprogramming

- Integrate COVID19 and other serious ongoing conditions, not to lose our already immune suppressed members of society; PLHIV on TPT, with NCDs,
- Supply chain is critical at this stage, cannot afford stock out of ART, impact will be enormous
- Support to PLHIV structures to mitigate impact on access to treatment; community systems strengthening is paramount
- Government through Office of the Prime Minister should consider PLHIV as a special category for food aid/cash handout
- Need to start planning for mitigation of COVID 19 on PLHIV now; post pandemic phase
- Increased need for Treatment Literacy
- Stigma reduction

Thank you

