Fundamental Achievements

1. Health Promotion

HIV & AIDS Prevention and Mitigation

As part of our key programs, ACODEV this year has re-dedicated its energies and resources to combating the spread of HIV & AIDS through a multifaceted and combined approaches; our key target population in this program was still ranked the high risk group in Uganda and the world over – Commercial sex workers, truckers, motorcycle riders, the fishing communities among others.

Over the three years, ACODEV staffs have continuously convened robust meetings and dialogues with key target groups and made follow up action meetings to engage other community and policy stakeholders in identifying and developing specific action strategies to contribute to the reduction of HIV & AIDS prevalence.

Our work to reweave the fabric of existing structures and community through faith-based, parents, youths, and community engagements/dialogues in ACODEV’s strategy to identify key risks that are increasing HIV & AIDS spread have been intensified. ACODEV has shared best practices and strategies and engaged adults and young people in mounting a stronger voice for change in behavior, accessing free HCT services, free health dialogues with quality HIV prevention information and evidence based and promising community building models such as the BCC & LDP models.
1) Engaging community through dialogues

“A combination approach to HIV prevention comes with lots of benefits for everyone; at ACODEV we value innovative ideas from the community itself, making them understand the magnitude of a problem and designing strategies for service improvement”.

ACODEV utilized results-oriented approaches and solutions that involved educational and behavioral change interventions through dialogues and interpersonal communication. This approach alone contributed to a direct total reach of 2,319; where 421 were commercial sex workers who were directly engaged in their groups’ experiential discussions, 348 truck drivers, 735 boda boda riders and 815 categorized in ‘other community members’.

ACODEV continued to use the approach of engaging existing community structures such as Local Councils, Religious clubs, cultural/clan groups as dialogue platforms at both parish and sub-county levels where representatives of MARPs gathered to discuss pertinent issues regarding HIV & AIDS and corresponding on factors increasing the prevalence rate of HIV & AIDS and also brainstorm on ways of reducing the scourge among communities.

2) The proven HCT approach to behavior change

ACODEV dedicated part of her resources to promote an increased access to HCT through organized outreach services in partnership with Health facilities of Kasese district; our major target
groups were the MARPs and other members of the community. At ACODEV, we believe that persons who are HIV positive may look and feel perfectly well, and be unaware that they are infected.

"Uganda is making a significant change in improving health services access like HCT to most hard to reach areas, an organization like ACODEV is contributing to this noble cause".

ACODEV went an extra mile into the uniformed people’s barracks of Kasese district to take HCT services closer; we believe in a universal access to health for everyone, thus our approach to leave no one behind our test of a humanitarian action

There has been a significant change in the rate of access to HCT services due to the increased awareness rising in the communities; this is a reason enough for ACODEV’s actions to bring services closer to the people to take a free HIV test. It is evident that a total of 2,047 people turned up for HCT services, 1,014 were males, 1,024 were females; out of the total tested, 10 people were found HIV positive – 12 male and 15 female.
3) Condom distribution and access

There was an increase in the distribution of condoms to key hotspots in Kasese district; to this end, a total of 106,320 condoms were distributed, (94.3%) 100,250 were male condoms, whereas (5.7%) 5,800 were female condoms; at the access level, male condoms remained highly utilized compared to female condoms, therefore, the access was at 96% (100,115) male condoms & 3.9% (4,125) female condoms respectively.

Condom demonstration

During condoms distribution process, ACODEV ensured there is clear demonstration on how a condom is used using the penis model to avoid improper usage and have quality and updated information.

The variation in condom access among male & female was attributed to a number of factors especially those who used the female condoms expressed such concerns as being uncomfortable, the condom being big and loose; for the MARPs such as the commercial sex workers, some lost their customers because they never felt satisfied with its quality.

4) Strengthening stakeholder engagements in promoting a combined approaches to HIV prevention

Since its beginning, ACODEV has been building strong relationships with a multistakeholder community, forging groups & allies to answer the charge and call to protect the interests of children, women and men in areas of health, also bringing together key policy makers, cultural leaders and faith based organizations’ leaderships to dialogue on the possibilities of how best HIV causes can be reduced in the communities where new generation of young people live and are able to thrive.
Such engagements have answered some of the questions around the need to know the best actions to HIV prevention; deliberate actions like HCT services, consistent and proper condom use, domestic violence prevention, and timely access to other health services like PMTCT were key recommendations from the stakeholder dialogues.

“In community stakeholders engagement in discussions of issues surrounding HIV prevention guided by the health workers and other community resource persons promotes a strong commitment to raise a healthy generation”

**Level of community engagement in stratetic discussions around HIV prevention**

![Stakeholder engagements on HIV prevention](chart)

In respect to the engagements above, it is clear and evident that key stakeholders successfully participated in the discussions around Combined HIV prevention. The general community were engaged with a total of 595 female, 537 male; secondly, the HUMCs were brought aboard in the discussions around sustainable availability and access to HIV services in the health facilities where 489 female and 463 male were directly engaged. More engagements targeted cultural leaders, farmer groups, religious leaders and PLWHIV among others.
5) The approach of utilizing skills among Community Owned Resource Persons in response to HIV prevention through awareness creation, counseling and referrals.

ACODEV’s strategy to train & equip Community Resource Persons with information and knowledge on HIV/AIDS and the various causes; in the same way, empowering them with skills to cause behaviour change Communication, counselling and linking them to various health systems have contributed to an improvement in the reach of a number especially the MARPs through dialogues, one-on-one meetings, clients accompanied visits to access health care services. To this end, 11,265 people have received key messages on (1 timely referral for HIV testing & counseling, (2 behavior change communication, (3 condom use and access, (4 HIV modes of transmission among others. It is evident from the graph above that more females participated in these engagements than their male counterparts where 5,847 were female and 5,418 male. Bwera, Isango and Mpondwe Lhubiriha town council had a more total reach than other sub counties due to their location and population, this also goes with the level of their vulnerability to HIV prevalence.