



# USAID LOCAL PARTNER HEALTH SERVICES (LPHS) - ANKOLE AND ACHOLI ACTIVITY

## ACHOLI SUB-REGION QUARTERLY NEWSLETTER

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Dr Anna Lawino (L), Project Director - USAID LPHS Ankole & Acholi Activity (Acholi Region) in a candid conversation with Amb. William W. Poop during his visit to Awach HC IV in November 2023 |Credit: Agatha Angwech

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Proscovia Katrina Oroma, PEPFAR DREAMS Program beneficiary and Liaison Officer with the USAID LPHS Ankole & Acholi Activity shows off a jelly made by a DREAMS group to the US Mission Director - Richard Nelson during a GBV Knowledge Cafe event in Gulu. |Credit: Agatha Angwech

IN FOCUS

## World AIDS Day 2023 Commemoration



### DID YOU KNOW

1.

USAID LPHS Ankole & Acholi Activity (Acholi region) operates in all eight Districts and one City of Acholi sub-region

2.

Kitgum General Hospital and Gulu Regional Referral Hospital offer MDR-TB services in Acholi Sub-region

3.

You can access HIV/TB integrated services at over 70 public healthcare facilities in Acholi sub-region

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# TELLING OUR STORY!

## A message from the Project Director



Dr. Anna Lawino  
Project Director

USAID LPHS -Ankole and Acholi Activity (Acholi sub-region)

Dear partners and friends,

It is my pleasure to present to you the latest edition of the USAID LPHS Ankole and Acholi Activity (Acholi region) quarterly newsletter.

The AIDS Support Organization (TASO) is implementing the Local Partner Health Services (LPHS) - Ankole and Acholi Activity funded by the United States Agency for International Development (USAID) under the President's Emergency Plan for AIDS Relief (PEPFAR). The Activity has supported the Government of Uganda (GOU) in making substantial progress in increasing the availability, accessibility, and utilization of quality integrated HIV/AIDS and TB services in twelve (12) and eight (8) districts in

Ankole and Acholi sub-regions, respectively. In the Acholi sub-region, the project continues to support eight districts - Agago, Amuru, Gulu, Kitgum, Lamwo, Nwoya, Omoro, Pader, and Gulu City.

The USAID LPHS Ankole and Acholi Activity (Acholi region) continued to support the implementation of structural, behavioral, and biomedical HIV prevention interventions across 84 public health facilities in the region and communities with a focus on case finding for missing persons living with HIV as well as averting new infections through the scale up of voluntary male medical circumcision, pre-exposure prophylaxis (PrEP), post exposure prophylaxis (PEP), and the Determined, Resilient, Empowered, AIDS-Free, Mentored and Safe (DREAMS) programming others.

In this Newsletter edition, we showcase the key activities such as high-level visits and achievements for the quarter.

Some of our achievements are showcased through success stories. We hope these stories will inspire and motivate us, illustrating the power of collective efforts and collaborative partnerships in creating meaningful change.

We appreciate your partnership and encourage you to continuously share your thoughts and contribute to the changes that we all so yearn to see. Together as a community, we can enhance our collective understanding, strengthen our practices, and ultimately, impact the lives of those affected by HIV/AIDS.

Enjoy reading!

# Key Achievements in the Quarter (Oct 2023 - Dec 2023)



**374**

Key Populations reached with prevention services



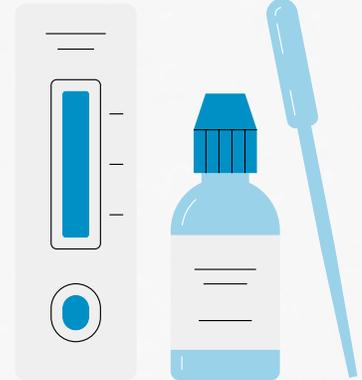
**1,994**

Priority Populations reached with prevention services



**5,112**

Males were circumcised



**56,280**

Individuals received HIV test services and received their results, cumulatively.



**43,718**

active clients maintained on ART

**99.8%**

PMTCT ART Coverage



**409**

infants tested for HIV at 2 months &

**469**

at 12 months respectively

**89%**

Viral Load coverage

**92.4%**

Viral Load Suppression rate



**85%**

TB Treatment Success Rate (TSR) and

**69%**

TB Cure Rate (CR)



**1,426**

HIV+ women on ART were screened for cervical cancer



**1,499**

People receiving post-gender-based violence (GBV) clinical care based on the minimum package



**3,801**

AGYW were enrolled into DREAMS representing 98.7% achievement against the COP22 annual target



Collaborated with Green Label to collect and transport waste from 16 VMMC sites in the Acholi region

Sources: DHIS2/PIRS/HYBRID/CPHL-Dashboard

# PRE-WORLD AIDS DAY ACTIVITIES

The USAID Local Partner Health Services (LPHS)—Ankole and Acholi Activity championed the 2023 pre-World AIDS Day commemoration activities in the Acholi sub-region. These pre-WAD events were held at four different locations: Gulu University in Gulu City, Bobi HC III and Pukony in Odek subcounty, Omoro district; Awach HC IV and a community served by the HC IV in Gulu district.

Annually, on December 1, World AIDS Day (WAD) is commemorated. People around the world unite to show support for people living with HIV and to remember those who have died from AIDS-related illnesses.

This year's World AIDS Day (WAD) theme, "Let Communities Lead," reinforced the need for purposeful and participatory engagement of the community and all stakeholders to redouble efforts jointly to ensure the success of the HIV response. This stresses the USAID LPHS Ankole and Acholi Activity's work in supporting the Government of Uganda (GOU) to make substantial progress in increasing the availability, accessibility, and utilization of quality HIV Prevention, care and treatment and community interventions to contribute to improved health outcomes ultimately leading to epidemic control by 2030.

For successful pre-WAD commemoration, the USAID LPHS Ankole and Acholi Activity collaborated with Gulu City Council, Omoro and Gulu District Local Governments; and other implementing partners supported by PEPFAR through USAID among others USAID LSDA, USAID UHA, USAID North West Activity, and USAID SBC Activity.

## Integrated HIV/TB Services

The site visit to Awach HC IV by the US Ambassador to Uganda H.E William W. Popp focused on the work of the USAID mechanisms in the Acholi region – USAID LPHS Ankole & Acholi Activity, Uganda Health Activity, OVC North West Activity and USAID SBC Activity. He toured and interacted with staff at the different service points at the facility namely; outpatient department, laboratory, theatre, ART Clinic, maternity among others.

The team showcased the differentiated service delivery (DSD) models for patients—modified community client-led ART service delivery



Ronald Beja (L), the ART Clinic In-charge of Awach HCIV explains HIV health outcomes of the ART Clinic to Amb. William W. Popp |Credit: Agatha Angwech

model for children and adolescents living with HIV (CALHIV) (MCCLAD) service delivery, young and adolescent peer support (YAPS) program, Caregiver Directly Observed Treatment Support (DOTS) model, people—centered metrics and provider feedback loops (PCM).

Mother-to-child transmission of HIV is the most common way young children contract the virus and happens when HIV is passed from a mother to her unborn baby during pregnancy, birth, or breastfeeding. An effective Prevention of Mother to Child Transmissions (PMTCT) program requires mothers and their babies to receive antenatal services and HIV testing during pregnancy, have access to antiretroviral treatment (ART), practice safe childbirth practices and appropriate infant feeding, and make use of infant HIV testing and other post-natal healthcare services. During the visit, five mothers who went through the PMTCT-EID program and had HIV-negative babies gave their testimonies of the program detailing different support they received from the facility. This was followed by a graduation



Photo Credit: Agatha Angwech

and award of certificates to the mothers and their babies by Amb. William W. Popp and the PEPFAR Uganda Coordinator, Mary Borgman



Amb. William W. Popp pose for a photo with a PMTCT program beneficiary (family) at Awach HCIV, Gulu district |Credit: Agatha Angwech

## Integrated Community Outreach

The integrated community outreach had service points for HIV testing, TB screening, exhibitions for DREAMS program beneficiaries, family health, and nutrition. The massive participation of the community members and entertaining and informative performances by the DREAMS program beneficiaries, children and adolescents living with HIV (CALHIV) under the modified CCLAD attached to Awach HC IV made the event memorable. It re-emphasized the gospel of HIV prevention, positive living, and adherence to treat-



Program beneficiaries perform a skit on peer-led client literacy and health services provided in community care models at Payuta village, Awach sub-county, Gulu district |Credit: Agatha Angwech

ment. The CALHIV showcased the different support that they receive from their respective groups with support from Awach HC IV.

## Addressing special needs of young mothers

The visit to Bobi HC III in Omoro district aimed at demonstrating the impact of USAID support on the well-being and health care outcomes of pregnant and lactating Adolescent Girls and Young Women (AGYWs) aged 10-24 at Bobi HCIII, through the implementation of group antenatal care (G-ANC/PNC). The USAID Uganda OHH Director, Jessica Healy led the delegation.



Photo Credit: Agatha Angwech



OHH Director Jessica Healy having a sharing with beneficiaries of Group ANC at Bobi HC III, Omoro District |Credit: Agatha Angwech

Group Antenatal Care (G-ANC) is a differentiated antenatal care (ANC) delivery model intended to address the special needs of young mothers and keep them in care. The unique health needs of adolescent girls and young women include high-risk pregnancies, contracting HIV and other Sexually transmitted diseases and socio-economic challenges.

The unique MCH/PMTCT health care needs for pregnant and breastfeeding adolescent girls and young women (AGYWs) and suggests friendly interventions tailored to meet these special needs. G-ANC empowers young mothers to meet as groups, take their own observations such as weight, height, mid upper arm circumference

measurements, and share their motherhood experiences before attending routine individualized clinical assessment and examination. The G-ANC model has Gender-based violence (GBV) services integrated within. This approach produces better health outcomes for the young mother during the antenatal care and postnatal care (PNC) periods because of attending their care in groups and giving birth with the support of skilled personnel.

It is noteworthy that Bobi HCIII, which is located in Omoro district, plays a significant role in addressing these challenges. The facility serves as a high-volume Antenatal Care (ANC) clinic within Omoro district, with first ANC attendance accounting for 21% (1,017 out of 4,954) during FY23, a notable proportion of the district's total ANC attendees. Additionally, 6% of the attendees (64 individuals) are HIV positive.

## Improving Livelihoods through DREAMS Program

The delegation led by Jessica Healy also visited Ribbe Ber DREAMS Group, Omoro district, Odek Sub County, Opong parish, Konocuna village. The visit aimed at interacting with the impact of USAID's support to adolescent girls and young women (AGYW) through the PEPFAR DREAMS program emphasizing services provision.

The PEPFAR Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) Initiative targets Adolescent Girls and Young Women (AGYW) aged between 10-24 years with the overall goal of reducing new HIV infections among the AGYW who are at higher risk compared to boys of the same ages. It is an evidence-based, age appropriate and comprehensive program contributing to efforts towards achieving HIV epidemic control by addressing biomedical, behavioral, and structural barriers that predispose or increases the risk of HIV Acquisition among AGYW.

The USAID LPHS Ankole & Acholi Activity is

implementing the PEPFAR DREAMS program in the three districts of Gulu, Omoro and Agago. Age-appropriate services are layered to the eligible AGYW upon enrolment into the program comprising of primary individual-based interventions such as screening for HIV testing services, mental health, PrEP, STI, HIV and violence prevention curricula interventions that include stepping stones, Journeys plus and No Means No, basic socio-economic strengthening approaches, and social asset building. A wide range of needs-based secondary interventions such as Rapid HIV



A delegation led by Jessica Healy tours the maize garden of a PEPFAR DREAMS Program beneficiary, member of Ribbe Ber DREAMS Group. |Credit: Agatha Angwech



A DREAMS Program beneficiary, member of Ribbe Ber DREAMS Group |Credit: Agatha Angwech

testing, education subsidy, enhanced socio-economic strengthening, contraceptive mix, post-violence care, condom promotion, PrEP are available to the eligible AGYW. DREAMS also offer an array of contextual services that aims at providing an enabling environment for the AGYW, including reducing risks in sex partners through VMMC, HIV testing services, SASA! among others; addressing harmful community societal norms, community dialogue sessions with caregivers, and training of health care providers on adolescent friendly health services, to create an enabling environment for AGYW to thrive.

# Youth Engagement

The USAID LPHS Ankole & Acholi Activity supports public health facilities to offer HIV differentiated service model intended to address the needs of all populations among whom are young persons in higher institutions of learning. The unique health needs of young person's include high-risk pregnancies, HIV/STIs, GBV, stigma and socio-economic challenges. This offers a platform for collaboration and partnership in designing friendly interventions tailored to meet these special needs.



The university environment provides unique challenges to the students, lecturers and communities. A sero-behavior survey conducted in six universities in Uganda by EAC/Amref Lake Victoria Partnership (EALP) Programme in 2010, indicates a high prevalence of risky sexual behavior among university students. These behavior's include multiple sex partnerships, unprotected sex, transactional sex, cross-generational sex and sex for favors such as marks in exams. This has been compounded by peer pressure to conform to the expensive lifestyles associated with the university environment.

In commemoration of World AIDS Day, the USAID LPHS Ankole and Acholi Activity in collaboration with Gulu Regional Referral Hospital (USAID G2G), Laroo HC III and other USAID implementing partners in the region organized a community outreach Gulu University aimed at addressing the unique health challenges faced by the young people in the region, where the lingering effects of a protracted conflict have had a significant impact on young people, contributing to a high HIV prevalence. The services provided included; HIV/STI screening including HIVST and management, VMMC, condom promotion, PEP, PrEP, Contraceptive mix, psychosocial support and Mental health screening, GBV screening and management, cervical cancer screening and management, HPV Vaccination, Hepatitis B, and TB.



Panel discussion attended by USAID Uganda staff during the health camp at Gulu University |Credit: Agatha Angwech



USAID OHH Director-Jessica Healy talk to Gulu University students during the health talk |Credit: Agatha Angwech



Gulu University Guild president-H.E Okot XXX giving opening remarks |Credit: Agatha Angwech



MOSAIC CATALYST study team demonstrating to students on how to use the PrEP ring |Credit: Agatha Angwech



Displayed HIV SBC message at the health camp |Credit: Agatha Angwech

# Social-economic Strengthening through DREAMS Program

Enhanced Socioeconomic Strengthening (ESES) is a livelihood intervention within the DREAMS program aiming at providing practical hands on skilling to AGYW 16-24 years out of school to ensure self-reliance and subsequently address poverty, a leading predisposition to HIV infection



Instructors assemble a sewing machine at a graduation ceremony in Awach sub-county, Gulu District. |Credit: Agatha Angwech

among the older girls. Across the DREAMS districts—Gulu, Omoro and Agago, a total of 1908 AGYW were eligible for ESES screening, 1352 were screened (71%), 248 (18%) were found critically vulnerable, 1158 (86%) were identified as moderately vulnerable and 140 (10%) were not eligible for ESES. A total of 100 (40%) AGYW of the 248 critically vulnerable AGYW were prioritized in FY23.

During the quarter, Acholi sub region held graduation 100 AGYW 16-24 years previously enrolled on ESES (Gulu 24, Omoro 24 and Agago 52) and subsequently distributed individual startup kits to 77 AGYW for tailoring, 21 for hairdressing and 02 for catering to support them start individual income generating activities for self-reliance.



Credit: Agatha Angwech



Photo Credit: Boniface Bongonyinge

The successful implementation of ESES is premised on then willingness

and attitude of critically vulnerable AGYW portray towards vocational skills training. It's important for implementing cadres to engage AGYW at individual level to understand their interests and passion, family background and the kind of support needed at household level and how prepared the Artisans and vocational institutions are in handling these delicate group of youth.

## Quality Improvement and Knowledge Management

USAID supports Uganda in preventing and responding to Gender Based Violence (GBV) in alignment with the 2023 Gender Equality and Women Empowerment Policy. Annually, USAID and partners globally advocate for ending violence against women and girls during the 16-day GBV Activism (Nov 25 - Dec 10). This year's theme is "UNITE! Invest to prevent violence against women and girls." USAID's participation in the regional GBV Knowledge Café underscores our ongoing commitment to eliminating GBV.



US Mission Director interacts with religious leaders and law enforcement at the Knowledge Cafe. |Credit: Agatha Angwech



US Mission Director interacts with the USAID LPHS Ankole & Acholi Activity at the Knowledge Cafe. |Credit: Agatha Angwech



Photo Credit: Agatha Angwech

A knowledge café, also known as World Café, is a structured conversational process that facilitates open and meaningful dialogue among participants to explore and exchange ideas, insights, and knowledge on a particular topic or issue.

The regional gender-based violence (GBV) Knowledge Café held on December 5, 2023 focused on raising awareness about GBV prevention and response efforts by USAID partners and stakeholders while emphasizing: a) sharing resources, best practices, and strategies for GBV prevention and response; b) building collaboration and synergy among stakeholders and; c) promoting actionable solutions for quality GBV service delivery.

IPs and stakeholders showcased GBV prevention and response work across the GBV cascade. The USAID-supported GBV campaign, "Let's Change Our Stories," was officially unveiled, targeting all stakeholders nationwide. Thematic discussions covered community-level prevention and response, non-clinical response (DREAMS/OVC), aggravated GBV case management, targeted SBC interventions, legal support, justice for survivors, quality improvement for GBV services, and OVC support.

# SUCCESS STORY

## Integrated Health Outreach Excites Awach Community

To commemorate World AIDS Day (WAD) 2023, the USAID Mission Uganda team, in collaboration with implementing partners in the Acholi subregion, organized pre-WAD events involving facility and community interactions. Among these events was an integrated community outreach at Payuta village, Awach sub-county, Gulu district. Aimed at improving access to service delivery, the integrated health outreach provided services including condom distribution, Pre-Exposure Prophylaxis (PrEP), HIV counseling and testing, malaria testing, TB screening and treatment, health education on nutrition, family planning, and dialogue on Gender-Based Violence.



Amb. William W. Popp reviews the digital X-ray film with a health worker while touring the mobile TB clinic at the community outreach in Puyuta village in Awach. |Credit: Agatha Angwech

During his visit to the community of Payuta in Awach sub-county, the U. S Ambassador to Uganda, H.E. William W. Popp, toured the outreach, interacting with beneficiaries of the integrated services.

The integrated outreach was a one-stop center with participants getting all required services on spot without going to the facility for other services. Dr. Bongonyinge Boniface, the HIV Prevention Manager with the USAID Local Partner Health Services (LPHS) - Ankole and Acholi Activity explained, “there is no need for the people to go the facility. This is a full integration of services at the community level; they can get all services provided at the facility. They are tested right here, and results are provided immediately. Those found positive are linked to care through referral to the health facility. If they are negative, there are other services such as preventive measures like condom provision and initiation on PrEP if eligible. At this outreach, we have both adults and children because we provide services for both.”

The USAID LPHS Ankole and Acholi Activity worked closely with the community structures attached to the facilities, such as the village health teams (VHTs), to mobilize the community to participate in integrated community outreach. The facility usually has comprehensive plans for outreaches they intend to conduct monthly. These plans are shared with the VHTs, who mobilize the community members for the different outreaches providing details such as dates, venues, and services to be offered.

The availability of a mobile TB van at the venue excited the community and attracted many participants. During the outreach, the team provided Chest X-ray and Gene X-pert tests recommended by the World Health Organization (WHO). Dr. Olum John Paul, the USAID LPHS-

Ankole and Acholi Activity's TB Technical Officer noted, that the X-ray machine only takes two minutes to generate results. As part of the Pre-WAD event across five communities in Awach sub-county, 486 people with TB signs and symptoms were screened, and 215 were from the outreach at Payuta village. Nine patients were diagnosed with TB and started on treatment.

In HIV service provision at the community outreach, 64 people were screened for HIV testing eligibility, out of which 32 were found to be eligible for HIV testing. All 32 were tested, and none were diagnosed as positive. In HIV prevention, sixteen clients received pre-exposure prophylaxis (PrEP), and over 430 condoms and 50 HIV self-test kits were distributed, respectively at the community outreach.



Amb. William W. Popp receives HIV prevention package from the prevention tent at the integrated community outreach

A total of 58 people were tested for malaria and 31 diagnosed with malaria and started on treatment.



Participants line up at the TB mobile clinic awaiting screening at Payuta villagel, Awach sub-county, Gulu district. |Credit: Agatha Angwech

The area local council one leader of Payuta cell—Christopher Kinyera expressed his appreciation to the people of America and the government of the United States of America for their unwavering support to the people of Uganda. He noted support to his community through USAID supported projects such as the Uganda Health Activity, USAID LPHS Ankole and Acholi Activity implemented by the AIDS Support Organisation (TASO), NAFOPHANU and others. “I am so happy because in this area that I care take, this is the first time I am receiving a guest of this level.” Noting that “this kind of outreach will ensure that we have a healthy community. As a leader in this area, it gives me so much joy that that my people are healthy, as a result of assessing health services.”

# SUCCESS STORY

## Enhanced linkages and referrals through AGYW peer facilitators improve access to post-violence care in the Acholi sub-region

At a tender age of 15, Lamunu (not real name), already disadvantaged, having dropped out of school in primary six due to lack of school fees, faced her worst nightmare while returning home from fetching water. She was brutally raped by someone she least expected, a young man in her neighborhood! Stories she had painfully heard quite often from her community became her reality. Devasted, shattered, and confused, she pondered all night, wondering what to do and who to tell.

“Who will believe me? Won’t I be blamed that it was my mistake, that why was I moving at night? What if I get pregnant?”

With all these questions lingering in her mind, she remembered Collins Abonyo—one of the adolescent peer facilitators from her parish who supports girls in her community to access various health services. In the morning, she got the courage to visit her and disclose her experience of violence.

“Collins listened to me without judging, the fear that I had vanished. She explained to me that I did the right thing to come to her timely, that I was not alone, and we would overcome this together. She further said we needed to visit the health facility (Patongo HCIII) to receive medicines that would prevent me from getting HIV and becoming pregnant and other support that I needed. She escorted me to the health facility and handed me over to a health worker who was very kind and helped me access all the support that I needed. They asked me whether I was comfortable letting my mother or anyone else know about this incident, and I said yes.” Lamunu, recollected

Collins supported Lamunu in disclosing to her mother, and subsequently, her mother reported to the police, who arrested the perpetrator and later he was remanded to Patongo Government prison.

“Collins continued to check on me to ensure I was taking the medicines well and helped me to cope. After a while, I tested negative for HIV, and I did not get pregnant. She introduced me to the DREAMS program and took me



Prosovia Katrina Oroma demonstrates how the produced jelly by a DREAMS group works to Ayida Abate, Communication Advisor with USAID Uganda |Credit: Agatha Angwech

through how I could benefit. When the DREAMS team returned to my community to enroll new girls in the program, she ensured I was enrolled and assigned a group.”

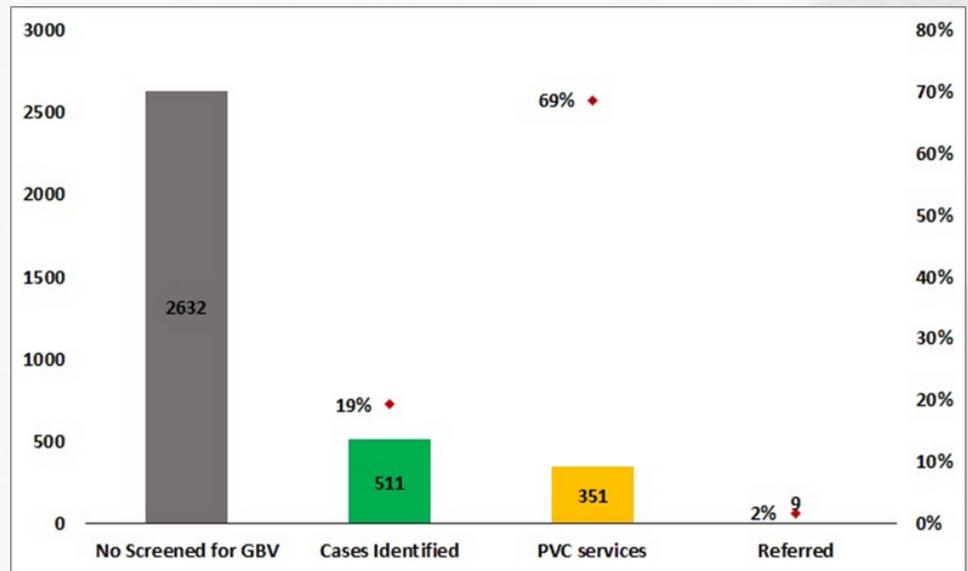
“I regained my self-esteem and I returned to school when the program selected me to receive school fees and other scholastic materials (books, a school bag, pens, sanitary pads, and a school set). I am now in primary six and I hope to study well and become a nurse and ensure girls in my community do not continue to experience any form of violence.”



Christine Akori the USAID LPHS Acholi Gender and Psychosocial Officer reviews GBV referral forms at the facility with a health worker

The USAID Local Partner Health Services Ankole and Acholi Activity has deployed trained Adolescent Girls and Young Women (AGYW) Peer facilitators like Collins across all parishes with high cases of GBV in the DREAMS-supported districts.

These peer facilitators received comprehensive training in the LIVES approach for managing GBV. They are instrumental in GBV identification and supporting linkages and referrals to health facilities for timely post-violence care and other support services.



Number of AGYW reached with post violence care services by end of September 2023

**“The DREAMS program was the best thing that happened to me; I found people to talk to, I was no longer lonely, and I got a second chance to study and achieve my dreams.”**

## Group Antenatal Care: A Beacon of Hope to Young Mothers

Sumaya, 21-year-old resident of Bobi sub-county, in Omoro district, is a survivor of sexual and gender-based violence. While in senior one, living with her stepmother, she lacked necessities and underwent torture and mistreatment which, prompted her to seek refuge with a friend's family. She narrated her story during a pre-World AIDS Day event at Bobi Health Center III, attended by the United States Agency for International Development (USAID) Health Office Director, Jessica Healy, Omoro district local government representatives, USAID-funded implementing partners in the Acholi region, including Local Partner Health Services-Ankole and Acholi Activity, and the community of Bobi.

One day, while still with the friend's family, she was left alone with an elder brother who took advantage of the situation. He requested that she help to clean his room. While there, she recollected that he started touching her inappropriately, which she tried to resist; however, she he eventually over powered her, subsequently raping her.

“When his parents and my friend returned home, I did not tell them what had happened in their absence because I was scared. I had nowhere else to go. I thought if I told someone, I would be kicked out and rendered homeless.”

Being a student, she returned to her father to take her back to school for the second term, which he did. When she returned from school, her stepmother noticed the changes and confronted her with the news that she was pregnant, which she denied, stating that she had never been in a relationship with a man.

“Realizing that I was lying to her, she beat me to a pulp until I told her the truth – about the incident at my friend's house. She asked me to abort the pregnancy so as not to disgrace them and the family. Still, I refused, telling her I do hear from the radio about the dangers of abortion, most especially for young girls my age! She then beat me up again, stating I would stay like a slave in her home since I had refused to abort the pregnancy. She took advantage of my father working away from home and mistreated me worse than before, taking me to work in the garden from morning till evening without food.” Narrated Sumaya.



Photo Credit: Agatha Angwech

Her mistreatment continued, which she lived through without complaining. When she requested to go to the health facility for antenatal care, her stepmother refused, saying they had community birth attendants who would help her when she came to term; therefore, going to the health facility was not necessary. “One day, while she had gone to the market leaving me at home with no food nor water, I picked a can to fetch water from the nearby water source where I met a friend who was also pregnant. She told me about group antenatal care, which she is a beneficiary of and is helping many young girls. When I narrated to her why I had not yet gone to the hospital for antenatal, she asked me to sneak out of home and go with her to the facility, which I heeded.”



Sr. Auma Linda Grace has continued to provide guidance and counselling to Sumaya even after her delivery. |Credit: Agatha Angwech

While at the Antenatal clinic of Bobi Health Center for her first visit, she was reviewed and a blood sample was drawn for an HIV test. She was asked who her husband was and why he did not go with her to the facility. This prompted her to narrate her story, mentioning that she was a survivor of sexual violence to the midwife – Sr. Auma Linda Grace, an enrolled midwife at the Antenatal clinic at the facility who counseled her, advising her to avoid any stress that could affect the growing baby. After this session, she was added to an antenatal care group.

Sr. Linda Grace noted that the facility provides integrated antenatal care services to the mothers, such as group antenatal care – which Sumaya is a beneficiary, family planning, immunization, HIV counselling and testing, screening, management, and referral for Gender-Based Violence (GBV), TB and nutritional screening, DREAMS program for HIV prevention for adolescent girls and young women, and OVC referrals among others. She appreciated the US government, the government of Uganda, and USAID Local Partner Health Services-Ankole and Acholi Activity, who are working collaboratively to offer these services to the adolescents and young mothers.

“We receive numerous survivors of GBV who are adolescents and young mothers at the facility. The desperation is vividly evident on their faces and body language.” The young mothers are supported through group antenatal and post-natal care – differentiated care designed to handle adolescents and young mothers according to age groups. This grouping allows them to freely share experiences, discuss their problems, and find solutions. The midwives provide counseling and management of survivors of sexual violence by providing contraceptives to prevent unwanted pregnancies, post-exposure prophylaxis to prevent the acquisition of HIV, treatment for sexually transmitted infections, and referrals for legal and OVC support whenever applicable.

“It is not easy as a young girl facing sexual violence and getting pregnant as a result.” Sumaya states, adding that “you are looked at as an outcast when such a situation befalls you. Stigma is is high among survivors of sexual violence and those with teenage pregnancies.” She advises young girls to speak out when they face rape or defilement, encouraging them to always report to a trusted person – parent, guardian, friend or even authorities to ensure they receive support timely. “Right now, when I look at my baby, I smile because she is very beautiful. She makes me forget the hardship I went through. She is my motivation. When I talk to her, I smile and always tell her she is my angel.” A jovial Sumaya affirmed

Gender-Based Violence (GBV) is one of the risk factors for HIV infection. Speaking at Awach Health Center IV in Gulu district, the US Ambassador to Uganda, H.E William W. Popp, stated that GBV is a problem faced by girls and women all year round. Noting that at Awach HC IV, survivors shared their experiences with violence, which creates a cycle where they are separated either from a spouse or family and become more vulnerable to abuse and health challenges like HIV/AIDS. Also, in scenarios where women who test positive are subjected to stigma or violence by either a partner or the community.



H.E. Amb. William W. Popp and PEPFAR Coordinator Mary Borgman participate in a GBV dialogue in Payuta village, Awach sub-county, Gulu district. |Credit: Agatha Angwech

children into this world who are HIV negative, who are not subject to violence, and who have the opportunity to live a healthy life.

He expressed great joy with the different projects supporting the communities in the region through the US Government assistance. This is an integrated approach where the women coming to the clinics receive not only support to find out their HIV status but also other support such as counseling and referrals if they are subjected to violence, support to break that the chain of violence and to see men in their lives changing or recognizing that GBV is not a way to take care of a family or have a happy and healthy marriage/relationship.



Sumaya lead a group of young mothers and men through a traditional dance during a USAID delegation visit to Bobi HC III, Omoro District. |Credit: Agatha Angwech

He added that addressing violence against women and girls living with HIV is critical in supporting them to live positively and to help them to bring



Photo Credit: Agatha Angwech

## USAID LPHS - ANKOLE & ACHOLI ACTIVITY (ACHOLI SUB-REGION CONTACT)

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