

District-wide, door-to-door, home-based HIV voluntary counselling and testing in Bushenyi

Programme setting, Objectives, and Strategies

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Program objectives

Goal: To implement 100% Full Access HB-VCT and offer basic care to those HIV positive

Targets groups: Household members > 12 yrs and children at risk of HIV infection

Objectives I

- To achieve 100% awareness on HIVCT among all community members living in Bushenyi District.
- To provide HIVCT to at least 300,000 people in a period of two years
- To reduce the risk of HIV infection in the population
- To obtain quantitative data on various indicators for program monitoring and evaluation.

Objectives II

- To provide basic care for HIV positive clients, ongoing support and counselling.
- To increase awareness of VCT beyond Bushenyi district
- To document and disseminate good practices.
- To improve Bushenyi district capacity to handle referred people living with HIV/AIDS

Bushenyi District Profile

- Population: Approx 800,000 (Males - 48%, Females - 52%)
- Households: Slightly more than 142,832
- Villages: 2034
- Parishes: 170
- Sub-counties: 29
- Land area: 3949 Km²

Population profile

Age group (years)	Percentage
Population 0-14	49.7
Population 15-60	45.5
Population over 61	4.8
Children < 1	4.0
Children 1-4	17.0

Strategies I: Mobilization

- Weekly radio program
- Resident Parish mobilisers (RPMs)
- LC1 committee

Strategies II: Counseling and Testing

- 29 teams (one per sub county)
- Guided by RPM/LC
- Offer Home-based VCT at home
- Rapid testing algorithm
- Results given at home

Strategies III: Services for HIV+

- Bed nets
- Safe water system
- Cotrimoxazole Prophylaxis
- Referral for ART and others
- Ongoing counselling and support
- Prevention with positives

Strategies IV: Quality control

- 1 in 50 samples of HIV -ve retested
- All HIV+ retested
- HIV test performance in the field is as good as CDC lab
- Prevalence similar to that of Uganda sero-survey
- Prevalence similar to facility based PMTCT

Strategies V: Data management

- Collected in field by RPMs and teams
- Monthly summaries by testing and lab teams
- Entered in a computer data base for analysis and storage
- Information shared with stakeholders

Strategy VI: Linkages with the district health system

- Training of district staff
- Improvement of infrastructure
- Provision of logistics

THANK YOU