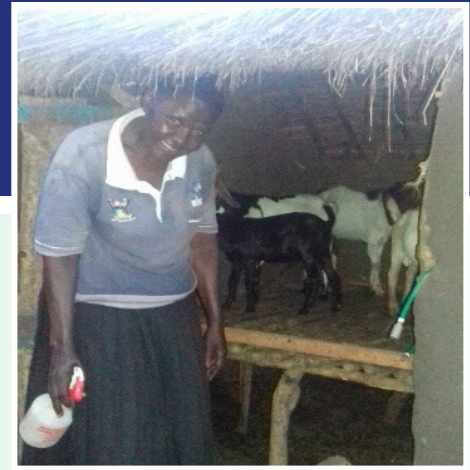


SUCCESS STORY

A Peer mother's efforts to reduce Early Infant Diagnosis positivity rates in Buliisa district



"Before we started serious follow up under IDI, there were very many positive children here at Buliisa Health Center (HC) IV" said Alice

Alice Othieno a 56-year-old lady works at Buliisa HC IV as a peer mother in the Early Infant Diagnosis (EID)/Prevention of Mother to Child Transmission of HIV (PMTCT) clinic. She is also the People Living with HIV/AIDS (PHLA) representative for Buliisa district, a member of the district Continuous Quality Improvement committee, and a mother of four.

In 2001, Alice's husband passed away from an unknown illness which she suspected was HIV. However, due to community stigma towards the epidemic, Alice avoided taking an HIV test. "One day a clinical officer counselled me, and told me that he was positive and said that being positive was not the worst that could happen and encouraged me to test and get enrolled in care if I turned out positive." Alice took an HIV test which turned out positive and within a month she was enrolled in care. The care and counselling Alice received from the health worker resulted in improved health and confidence albeit being a victim of HIV. It was against this background that Alice decided to use her life as a testimony to serve her community.

For the past nine years, under the Mid Western and West Nile HIV/AIDS project, Alice has been working as an AIDS community volunteer, and an expert client in the ART clinic at Buliisa HC IV. The project is implemented by the Infectious Diseases Institute (IDI) with funding from the Centers for Disease Control and Prevention (CDC).

In 2015 when Alice became a peer mother in the EID clinic where she found that the EID positivity rates were as high as 17%, Alice began household outreaches to families of mothers she knew had missed their infants' Polymerase Chain Reaction test (PCR) appointments. The follow up of these families helped to improve the number of children whose PCR was completed on schedule.

"I would walk to their homes, counsel them and try to find out why they were not coming to the facility" says Alice.

Alice has since encouraged fellow peer mothers, Client Linkage and Retention Facilitators (CLRF) and other health workers to actively get involved by talking about her successes at the different fora in the district. Alice has also encouraged people to disclose through her own testimony which has improved retention in care. The home visits and extensive health education conducted by Alice and her peers also led to the reduction of EID positivity rates from 17% in 2016 to 3.1% in 2017 in Buliisa district

At home Alice has an open home policy where clients come to her home to take their medication as she encourages them to disclose instead of abandoning treatment. She sometimes has to carry medication of the lost clients to make sure that they get their treatment in time.

"I thank IDI for supporting Buliisa HC IV and Buliisa District because there is so much that has improved since IDI started working with us as peer mothers and PLHIV," said Alice.

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