



THE BAYLOR MAIL

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Above and Beyond!!



18 years at the Helm...
ED Baylor Uganda
Dr. Addy Kekitiinwa
walks us through a
journey of endurance
and service

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Dr. Adeodata R. Kekitiinwa
Executive Director
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The past two years have been unprecedented. The impact of COVID-19 has been felt across the world, including Uganda. Amidst the disruption, we placed emphasis on ensuring our services remained operational. Thus, our second priority was to keep our operations running, applying all the required preventative health and safety measures to deliver on our mandate and support our clients. Many of our services are essential to assist in the response to COVID-19. We, therefore, worked overtime to ensure they are supported as part of our efforts to reduce the impact of the pandemic. We are grateful for the dedication and commitment of our staff, the support of our Board of Directors, and the strong relationships we have with all our stakeholders.

Despite the hiccups along the way, we have grown in leaps and bounds and we continue to provide services at our Centre of Excellence and Post Natal Clinic both located at Mulago Hospital Complex and 150 health facilities in the Rwenzori, Bunyoro, Elgon regions, and other centers. We are very proud to have partners like the Ministry of Health, CDC, USAID/PEPFAR, UNICEF, Global Fund, EMLA, among others, supporting our work in all the districts across Uganda.

Collaborations remain one of the strongest ways of ensuring our services are well delivered. We recently signed an agreement with Population Services International (PSI), to provide a service that will pilot calls for HIVST under the Akanamba project. Our National Pediatric and Adolescent HIV/AIDS/TB Call center (NAPAC) provides consultative call support services in the domain of pediatrics and adolescent HIV/AIDS/TB management. The 24/7 call center operations, help to reduce the incidence of HIV infection and HIV/AIDS/TB-related morbidity and mortality among children and adolescents in Uganda, by offering technical responses to the consultations raised by health workers all over the country. The center also provides technical support to HPTN084 research study calls.

Beyond the pandemic, supporting our clients remained crucial to our mandate. To curve out a clear direction in which we operate, our new Global Health Services project has been at the forefront of promoting Mass Vaccination and other global health challenges across Uganda. This being our first issue of the Newsletter after a long time, we bring you some of the events and milestones achieved as an organization. You will also see reports on impacts created by supporting the Ministry of Health and District Local Governments to decentralize HIV and other health services, in order to increase accessibility, availability and utilization of quality health services to the people of Uganda through a health system strengthening approach.

I am confident that our operations are well-positioned to contribute to high-quality health care and education and research worldwide. We look forward to enhanced engagements and better performance as we work towards a world where children and their families live a healthy and fulfilled life. Enjoy the read!

Dr. Adeodata R. Kekitiinwa
Executive Director



18 YEARS AT THE HELM; THE STORY OF ASSOCIATE PROFESSOR, DR. ADEODATA RUKYALEKERE KEKITIINWA

Dr. Adeodata Rukyalekere Kekitiinwa, known by her peers, workmates, subordinates, and colleagues as Dr. Addy, is an accomplished and renowned physician, lecturer, and Associate Professor of Pediatrics at Baylor College of Medicine Children.. She was conferred as Associate Clinical Professor of Pediatrics, in Houston, TX, USA in 2014

Dr. Addy is the Executive Director of the Baylor College of Medicine Children's Foundation- Uganda. She also more than triples as a Clinical Research Leader (CRS) at Baylor-Uganda, IMPAACT P1115 Investigator of Record,

Site Principal Investigator for the ODYSSEY trial, CO-investigator- SMILE trial, Site Principal Investigator D3 trial, and Principal Investigator Breather Plus trial.

Hers is a story of determination, resilience, tenacity, and fortitude to impact the lives of children and families of all those infected and affected by HIV/AIDS.

Since 2005, Dr Addy has walked the talk, practically leading successful teams, establishing, managing, and running many technical HIV pediatric and adolescent campaigns at Uganda's Ministry of Health, and

formulation of policies that guide the implementation of pediatric and adolescent HIV prevention programs across Africa. Addy hands over ED leadership in Baylor on 31st of July 2022.

Baylor's Communication Specialist Joseph Basoga, caught up with her to briefly recount the story of her uniquely excellent service at Baylor for the last 18 years..

An accomplished and renowned physician, Lecturer and associate professor of pediatrics

How Baylor Uganda was birthed.

The story of improving pediatric management in Uganda is a long one but the Baylor story itself is a Godly intervention tale that started far away in the small country called Romania. Before Dr. Addy became part of the Baylor Story, a then young doctor from Texas Children's Hospital, Dr. Mark W. Kline was visiting Romania. Dr. Mark, now Professor Mark W. Kline discovered that nearly all children at the Hospital in Romania were helpless, hopeless, and dying for there were neither drugs nor an alternative medical solution. He tried to offer the little help he could until a Houston (USA) based, award-winning photographer and friend, Smiley Pool, visited Romania, photographed and told stories through

the pictures that later attracted the attention of charity organizations that provided the initial funds to support this initiative. Later on, the Baylor International AIDS Initiative (BIPAI) was born. His vision was to set up Children's Clinical Centers of Excellence. Dr. Mark started a network of children's clinical centers to offer specialized Pediatric HIV/AIDS care and treatment services that have spread to 11 countries, Uganda inclusive.

Baylor Uganda

AND DR. ADEODATA R. KEKITINWA (DR. ADDY), A JOURNEY OF DETERMINATION.



Dr. Adeodata R. Kekitiinwa
Executive Director (Baylor Uganda)

In 2003, the U.S. Centers for Disease Control and Prevention (CDC) Uganda office noted that pediatric HIV/AIDS care and treatment services represented a significant gap in Uganda's overall strategy for addressing HIV/AIDS. The CDC Global AIDS Program (GAP) and University Technical Assistance Program (UTAP) later invited BIPAI to Uganda to build Uganda's capacity using the experience gained in the Botswana Paediatric care and treatment program. CDC approached the Paediatric and Child Health department to plan how to work with BIPAI on this activity.

Prof. Philippa Musoke, then head of the Department of

Paediatric and Child Health, asked Dr. Addy to take over the Pediatric Infectious Diseases Clinic management at the Child Health Centre, Mulago, Hospital. At that time, Dr Addy was a senior consultant for a diarrhea ward where over 50% of the children admitted there were born with HIV, and were registering a very high death rate. "There were no Prevention of Mother services in the country save for those women participating in research. Over 50% of the children born with HIV died before their second birthday. "Recalls Dr. Addy adding that the majority of people, including health workers, thought that the clinic services were prolonging the suffering of HIV-infected children.

In October 2004, Dr. Addy was appointed the first Clinic Director. Within a short time of reorganizing the clinic with support from Dr. Denis Tindyebwa, now the Executive Director of the African Network for Care of Children Affected by HIV/AIDS (ANECCA), the clinic started to realize some successes for the children and their families. In 2006, with support from BIPAI, Baylor Uganda under

Dr. Addy registered to become an NGO and formed governance structures, hired staff, and opened an account. The NGO embraced Baylor College of Medicine's best practices in every aspect of the operation. Up to this time, ACLAIM Africa Limited, a leadership and management consulting firm hired the Baylor staff and managed the Organization funds.

In 2007, Baylor Uganda won its first CDC PEPFAR grant to expand Paediatric HIV care outside Kampala. This maiden grant opened everybody's eyes to realize that children are not small adults and could live a healthier and more fulfilled life if supported.

In 2010, Dr. Addy led a team that established the first Paediatric and Adolescent unit at the Ministry of Health. Still, at the helm of Baylor Uganda, she aggressively expanded Paediatric and adolescent services nationally. ***"I implemented five other CDC grants and in 2019, we expanded our scope to include Global Health Security. Then in 2021, we got our first USAID Comprehensive HIV/AIDS grant for 15 districts in the Eastern region"*** says Dr. Addy with an approval smile

of a person who has been in the trenches of hard work.

Dr. Addy says that she is happy and proud to see what Baylor has become because the last 18 years have been nothing but hardwork and resilience. ***"I am immensely grateful to the Board, the Ministry of Health in Uganda, the CDC leadership, and our other partners who have trusted and believed in me to steer this organization"*** she appreciates.

Baylor Uganda started as a small clinic, operating for one day a week. Baylor Under Dr. Addy now boasts of over 25 projects, some of which are research-related, 17 active studies, and seven evaluations. "I have attracted and enabled several partnerships and collaborations that have yielded the achievements we present today. Our programs and research studies are now a mix of HIV/AIDS, Global Health Security, and Maternal, Newborn, Child, and Adolescent health" she affirms

Dr. Addy says that Nineteen years ago when USA's President Bush commissioned PEPFAR, no one knew that there would be a strong organization called Baylor Uganda. She adds that's that PEPFAR has contributed significantly to Baylor Uganda's growth by providing the organization an opportunity to compete for funds, build systems, and serve the people of Uganda. ***"We began with US\$640,000 from a CDC grant to Baylor College of Medicine for technical assistance to Pediatric HIV in Uganda. To date, our budget is close to \$40M,"*** she remarks with the exclamation, typical of a resolute administrator that understands what it takes to mobilize funds for community intervention.

According to Dr. Addy COVID 19 response opened Baylor to the world of global health security and other infectious diseases. Baylor Uganda's systems built over this period have exposed the organization's resilience in protecting and ensuring that there is no loss of

the hard-earned HIV/AIDS gains even when the COVID Pandemic struck.

She says and I quote ***"I learned how to be flexible and swift in decision-making to save lives and further appreciate the partnership with the district leadership"***

Over the years, Baylor Under Dr. Addy has put up a spirited fight to provide technical and leadership capacity that has built infrastructure especially laboratories, and improved collection and coordination of Maternal Child Health, surveillance, and health information data. This data has informed health policy and service provision in Uganda. With most of these good policies in place, the board and management must ensure that these systems established are sustainable and resilient to prevent and respond to HIV/AIDS and other diseases.



DR. ADEODATA R. KEKITINWA

She fervently appreciates many people who have left a mark on her life and inspired her to achieve. First, Mr. Michael Mizwa, who has served as board chair for all the time she led.

Dr Addy has the following words for Mr. Micheal Mizwa a man who recently conducted her last performance appraisal and awarded her an excellent 4.5 ***"You walked the journey with me as an individual, mentored me, and kept me calm"***

even when things were not moving in the right direction. I thank you for your dedication and service to Baylor Uganda. Your selflessness is challenging to match. You have served as if you were in Uganda, and most of us did not realize the 8 hours difference between us. You truly reflect the American generosity that Uganda has continued to enjoy for the last 19 years through the PEPFAR program. I hope to continue learning from you as I transition into retirement."

She continues to say that she enjoyed the vigor and rigor of the entire Board as Mr. Mizwa performed his oversight roles, with an excellent mix of talent.

Mr. Micheal Mizwa, the founding Board of Directors Member and chairman of Baylor Uganda since 2005, is quick to state in his most recent performance appraisal of a lady that has walked the talk for 18 years and scored excellently. ***"the score of 4.5 makes Addy a near-perfect leader. I would have awarded and rated her 5.0 but I must leave room to grow even more. Otherwise she deserves that 5.0 in many ways"***.

He adds that ***"Dr. Kekitiinwa successfully transitioned to leading exclusively from behind, like shepherded with a trusted flock; ever-present, always guiding forward down the safe passage and trusting her senior leaders to stay the course even when unavailable in attendance"***.

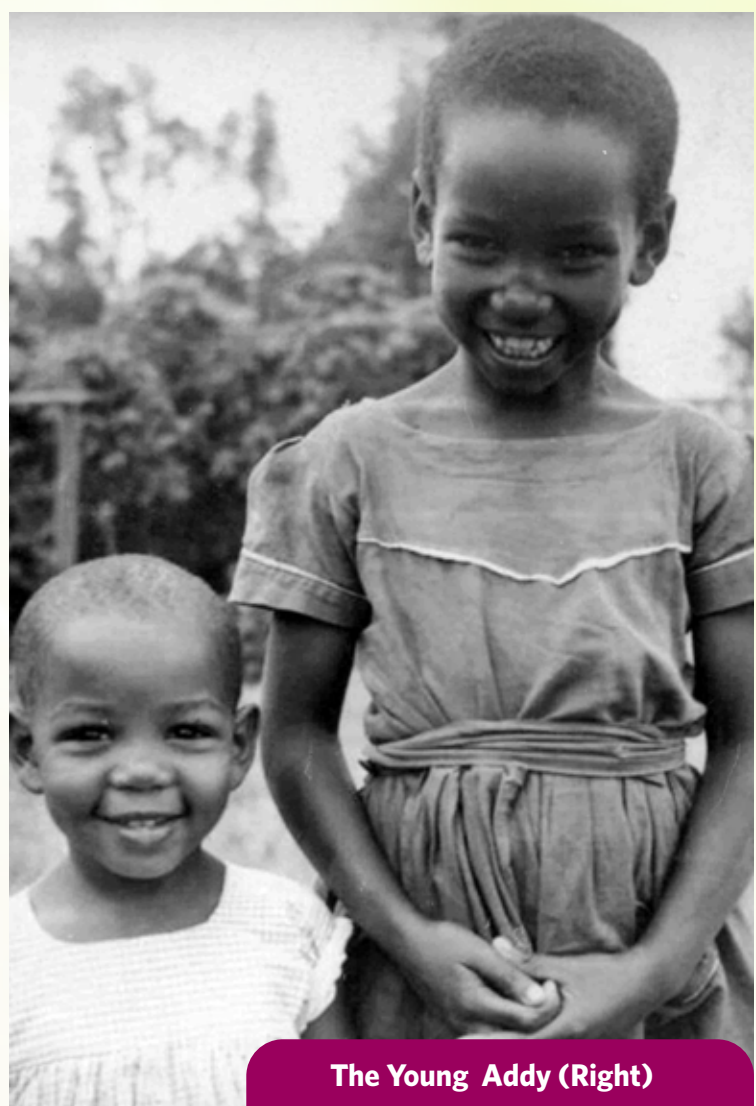
Dr. Addy is also whole-heartedly grateful to her Senior management team and the entire Baylor staff, for believing in her and for working together to achieve Baylor's organizational goals. Baylor's work is very demanding, but she says that her colleagues accepted that they all needed to serve above and beyond to realize Baylor's vision and mission.

Her prayer is that they remain focused and loyal to each other and Baylor's internal and external clients. ***"I have asked each of them to continue the journey of succession planning for each***

directorate to avoid the high cost of poor succession. The Board needs to keep a keen eye on the succession pipeline and processes if we are to retain talent to achieve our mission" she concludes.

But Dr. Addy is not all gone, she will actively participate as a member of the Advisory Council to keep Baylor Soaring high. Thank you Dr. Adeodata R. Kekitiinwa for your service.

To the Baylor family: Our next issue will be dedicated to memories we all have had with Dr. Addy. Please submit them, in time, to jbasoga@baylor-uganda.org.



The Young Addy (Right)

SAVED FROM MALNUTRITION AND TUBERCULOSIS; BAYLOR UGANDA INTERVENES IN TIME TO SAVE EDMOND'S LIFE.

By Honorata Twebaze & Raymond Kamara Atuhaire- ACE Bunyoro.

Globally, poor nutrition and hunger are responsible for the death of 3.1 million children annually. That's nearly half of all deaths of children under the age of 5 in Africa. One such child to survive fangs of death due to malnutrition is Edmond, 9 months from Muuro Masindi District in Uganda.

Edmond was diagnosed with TB at Bijwanga Health Center in November 2021. At the time, Edmond's mum Akumu Margret narrated that Edmond was sickly, weak, had a poor appetite and had lost weight progressively for 4 months. He had a recurrent cough that had often been treated poorly and survived on local herbal medicine. ***"I've come a long way to seek help for my son from Baylor, he is wasting away and coughs repeatedly"***, said Edmond's mother who had trekked for over 2 km to find help.

Baylor's case management officer Hellen Abitegeka and another team of doctors carrying out a needs assessment at Edmond's home, established that Edmond's condition was precipitated by poverty, secondary smoking from the nearby drinking joint operated by his mother. Akumu survives on selling local potent gin and she was a casual laborer. ***"We advised that the mother distances the child from her job because Edmond's health would never improve in such an environment"***. said Hellen.

The team that is coordinated by, Dr. Elizabeth Kabajuni a Care and Treatment Officer at Baylor



Baylor Staff during a home visit at Edmond's home

also provided Ready to Use Therapeutic Food (RUTF) to Edmond. The aim of the Therapeutic Feeding Programmes (TFP) is to provide treatment to severely malnourished individuals to quickly gain some weight and improve appetite as a way of reducing the risk of quick mortality and morbidity.

3 weeks following the intervention, Edmond gained weight up to 12kgs from 5kgs. He could now play and feed better and was out of danger. ***"Edmond can now smile and run. We are exceedingly grateful for all the support. We promise to adhere to our treatment"***, said Edmond's grandmother.

Edmond's story shines a light on many children living in impoverished families and communities within the Bunyoro region and the wider poor communities of Uganda and Baylor Uganda is committed to impacting lives and making lasting impressions in the lives of the people of Bunyoro.

Baylor-Uganda is implementing a 5-year Accelerating and sustaining Epidemic Control in Bunyoro (ACE Bunyoro) programme in Uganda, to reduce the incidence of HIV infection and HIV/AIDS-related morbidity and mortality among children and adults, in line with UNAIDS 95-95-95 targets for epidemic control.

The programme under the President's Emergency Plan for AIDS Relief (PEPFAR) is funded by Centers for Disease Control & Prevention (CDC). It also offers comprehensive HIV prevention and treatment, Prevention of Mother-To-Child Transmission (PMTCT) and maternal health, Sexual Reproductive Health, HIV/Family Planning integration, adolescent and young people-friendly services, and Gender-Based Violence services. The Project supports 106 Health Facilities in the eight (8) districts of Bunyoro region that include Buliisa, Hoima, Kagadi, Kakumiro, Kibaale, Kikuube, Kiryandongo and Masindi.



Baby Edmond with his mother at Bwijanga Health Centre for the refill of his therapeutic meal.

BARBARA KEMIGISA

IS FOCUSED ON SPREADING HOPE NOT FEAR.

By Honorata Twebaze- Communications & KM Officer ACE Bunyoro.



The winding and dusty roads of Kidaiko Village, in Hoima City western Uganda, lead you to the Barbara Kemigisa Foundation head fondly referred to as Aunt Barbara, Ateenyi. Ateenyi is an ambassador of hope in Kidaiko village, inspiring, mentoring, and providing optimism and courage to many women, children, and youth infected, affected, and vulnerable to HIV. Barbara herself a victim of sexual abuse, teenage pregnancy and rejection, uses her tough and traumatic long-gone experience to preach love and hope to a hurting and broken world.

Sexually abused by her uncles between the ages of 6-11, Kemigisa later engaged with multiple sexual partners as a way of life. She indulged in all types of drugs and when conditions became unbearable at home, Barbara sought refuge on the streets of Kampala.

In her teen years, she became pregnant and later tested HIV positive. During her first antenatal care visit. She gave birth to a baby girl (Kourtney) and was forced to breastfeed her because she could not afford anti-HIV treatment for infants. This, exposed her baby, to HIV. ***"At this point, I felt so helpless and destitute, because I knew I was going to die and so was my baby."*** she said with a sad face.

Barbra later joined the youth ministry of Watoto Church, which was then Kampala Pentecostal Church (KPC) where, during one of the school outreaches, she noticed that other girls were going through the same kind of life she had. Not knowing how to help the many girls she was meeting, in the same situation, she realized that the sexual network was indeed a widespread issue to be solved. This desire to help led her into activism hence founding Pill Power Uganda, a project that started identifying people living with HIV/Aids, training them to recycle empty ARVs

tins into useful objects.

This determination paid up. At 30, Barbara is a 2018 Mandela Washington Fellow for Young African Leaders, has a couple of accolades for her work from notable organizations like Rotary Uganda among others. She has taken part in different campaigns to spread knowledge and awareness for HIV/AIDS and founded a Community Based Organization,

Barbara Kemigisa Foundation with plans to turn it into an NGO.



ACE-Bunyoro Project Manager -Dr. Betty Nsangi shares a light moment with Barbara Kemigisa (in black dress) of the Kemigisa Foundation at the foundation's World AIDS Day commemoration.

The Barbara Kemigisa foundation has created safe spaces for persons living positively with HIV/AIDS especially women, children, and youth. Here, they find personal growth, peer interaction, and capacity building in both interpersonal and economic skills like farming, recycling, art and craft, music dance and drama, community service among others.

But the accolades to her name are not everything she has done. Barbara has created more impact using social media. The HIV AIDS activist has innovated recycling and jewelry making, bracelets, necklaces, flower pots and empowers affected youths to learn this skill for survival. She also uses this work to curb stigma and encourages adherence to drugs. Her work in recycling opened doors to international fora like the 2015 international conference on recycling and waste management in Singapore, the IAS conference in Paris, AIDS 2018 conference in Amsterdam. She is the winner of a scholarship to study civic leadership at Wagner college New York City as a 2018 Mandela Washington Fellow.

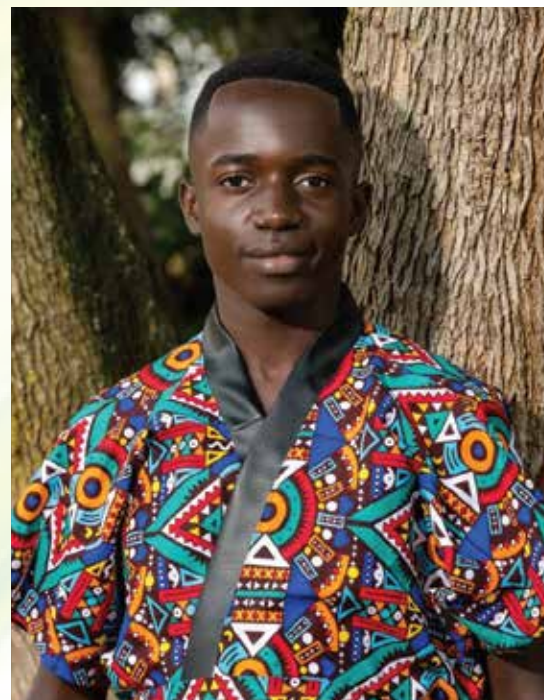
"Every time I look back at where resilience and determination has picked me from, I think about the next youth on the street that could become like me and even better ounce impacted with this message of change," says Barbara with a smiling face .

Barbara has created and skilled over 6 youth groups with dexterity in recycling in Uganda. But she has also taken over to train vulnerable older persons in Kidaiko by providing social amenities ***"Maama built a pit latrine for me, she saved my home from open defecation and its dangers"*** said Mzee Christopher Kasamba. The foundation has done the same for more vulnerable people in the area.

The foundation is also working to improve welfare and livelihood by empowering women living with HIV/AIDS. ***"She has helped us set up this pigsty housing 4 pigs. We have also learned to grow our own vegetables and we make crafts"*** said Ms. Annet Mbiira

The story of the Barbra Kemigisa Foundation

cannot be complete without mentioning Lawrence Agaba, the reigning Mr. Y+. He has become a champion for HIV/AIDS advocacy after Ms. Kemigisa encouraged him to openly declare his status during the Y+ pageant which he won. ***"She was with me from the very first day we met at the ART clinic and I am assured she is always supporting me. I cannot let her down by missing my treatment or not sharing my story the way she shares hers"***, Lawrence said adding that Kemigisa is also an ardent advocate for young people to take their drugs in time.



Lawrence Agaba. Mr Y+ 2021 / 22

Kemigisa is now stationed in Kidaiko village, Hoima District with limited access to most of the services that were easily accessible when she was in Kampala. ***" I left Kampala for Kidaiko at the height of the 2020 COVID-19 lockdown because the rent was expensive and I had so many youthful dependents. The landlord was not pleased to see huge numbers that used to come in for help"***, she says.

This move, though, came with blessings. Having been a regular at the Baylor COE clinic where she used to collect empty ART bottles, she reached out to the team for support having

noted the huge gap for ART among the youth and women in Kidaiko and that is how she got financial support from Baylor Uganda with funding from CDC.

Beaming with joy, she mentions the follow-ups of Dr. Jacqueline Balungi (Medical Care manager - Medical & psychosocial) and Dr. Betty Nsangi (Project Manager ACE-Bunyoro). ***"It is refreshing knowing that women root for me, more so great women doctors at that. They check in with me to ensure I am still on track with my very many dreams in pursuit of an HIV-free generation. Or should I say A world where children and their families live a healthy and fulfilled life like Dr. Betty always says."*** she concludes.



Baylor programme Manager ACE Bunyoro-Dr. Betty Nsangi visits a display table for Barbara Kemigisa of the Kemigisa Foundation. (in black dress)

BAYLOR-UGANDA IMPROVES HEALTH CARE WORKER LIFE-SAVING SKILLS IN DURING UGANDA'S COVID-19 RESPONSE.

By Diana Loy Akongo- Public Relations, Advocacy & Communications Officer ACE- FORT



An practical session at an EMS workshop in Fortportal.

Scenario! Kiconco Andereya 27 (Not real names) a resident of Karo-karungi in fort portal Western Uganda, was diagnosed with COVID-19 during the second wave of the pandemic in Uganda. He was admitted at the local health center III but later developed breathing problems and was referred to a better health facility. While being transported to the referral, Kiconco (Not real names) got worse and the in-charge nurse had both limited skills and resource capacity to manage such cases. Kiconco (Not real names) succumbed to COVID-19! Such scenarios have been common in many areas of Uganda leading to many deaths.

This is the reason why Baylor -Uganda through its United States Centers for Disease Control and Prevention (US CDC) funded Global Health Security (GHS) Project is supporting Ministry of Health (MoH) efforts towards implementing the Emergency

Medical Services (EMS) programme. This includes building the knowledge and technical capacity of clinicians and auxiliary staff in triage to be able to respond and manage referrals and critically ill people (including COVID-19 patients) better.

In a country where the doctor-patient ratio is estimated at 1:25,725 instead of the recommended 1:1000, It becomes even more critical to help the few health workers gain a better understanding of how to handle emergencies.

The ongoing COVID-19 resurgence caused by the new variant strain Omicron has created a need to build a critical mass of health workers with life-saving skill to handle critically ill patients.

Baylor-Uganda has also donated medical equipment kits that include Oxygen cylinders, stethoscopes, Temperature guns, clinical beds, protective gear and others items to aid better case management and create efficiency in diagnosing patients. The technical assistance will also include training and follow up mentorship of over 500 health care workers from over 135 health facilities in the regions of Rwenzori, Bunyoro and Soroti. The CDC funded GHS Project managed by Baylor-Uganda is working in collaboration with the MoH EMS department, Seed Global Health, and other partners to build the capacity of health care workers from lower-level health facilities of Rwenzori, Bunyoro and Soroti regions on emergency care principles and its application to COVID-19 case management.



This how you wear it. EMS Senior trainer Dr Francis Ntuhwera shows participants how to use protective gear to avoid infection

WHAT IT MEANS TO BE A CENTER OF EXCELLENCE ; PALLISA BAYLOR SUPPORTED HOSPITAL LABORATORY ACCREDITED ISO 15189 STANDARD .

By Joseph Basoga- Communications Specialist

USAIDs Local Partner Health Services Eastern Region Activity (USAIDs LPHS-E) programme implemented in Mbale, is facilitating the accreditation of Laboratories in Eastern Uganda. Baylor Uganda aided facilities will be accredited to ascertain technical competencies, that will define whether the services that are offered by the health facilities are rated to international standards. The exercise is also part of Baylor Uganda's big agenda of augmenting its position as a center of excellence in all services offered by the organization across the Uganda.

Baylor Laboratory technical officer Ronald Mangeni says, that after accreditation, Laboratory results and services from facilities like Pallisa Hospital will be internationally putative, recognized as accurate, reliable and consistent with global standards.

Baylor is accrediting services of Pallisa hospital Lab to acquire ISO 15189 standard. Pallisa Laboratory Manager Opio Moses says that "ISO 15189 technical requirements are meant to ensure that the Laboratory has adequate qualified personnel, quality laboratory equipment, reagents and consumables.

"They also accredit the standard of pre-examination, examination processes and post-examination processes, the quality of testing processes, and reporting of results" Said Opio.

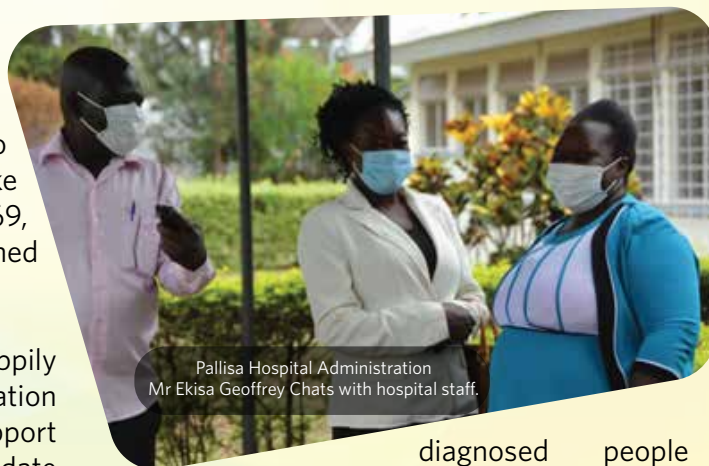


MOH technical staff during an exercise to accredit Pallisa Hospital Laboratory

Pallisa Hospital mainly serves 4 districts of Kibuku, Butebo, Budaka and the host Pallisa, but it also receives a lot of patients from neighboring Kamuli, Bukedea Kaliro and Serere because it is accessible via Lake Kyoga. The hospital that was built in 1969, serves millions of people beyond the planned 20,000 at the time it was established.

Hospital Administrator Ekisa Geoffrey happily welcomed the Baylor supported accreditation services, but was quick to ask for more support to create more space to accommodate equipment and the growing number of patients that has been upgraded with time.

Baylor Uganda is implementing a 5-year USAID awarded cooperative agreement, to improve HIV and TB services in Eastern region and to promote the scaling up of quality facility-based HIV and TB prevention services. The programme will also provide high quality, high yield, facility-based HIV testing and counselling. The Programme will ensure that all



*Pallisa Hospital Administration
Mr Ekisa Geoffrey Chats with hospital staff.*

diagnosed people living with HIV and TB are promptly initiated on treatment, that those on treatment achieve viral suppression. Above all Baylor will provide institutional capacity services to sustain epidemic control and maintain the response in all areas of implementation. The fifteen districts covered by the programme Budaka, Bududa, Bukwo, Bulambuli, Butaleja, Butebo, Kapchorwa, Kibuku, Kween, Manafwa, Mbale, Namisindwa, Pallisa, Sironko and Tororo. The implementation also includes Mbale City.



Figure 1 Wadada at his homehome in Nakaloke

ROBERT WADADA

POSTIVE LIVING IS THE REASON I AM ALIVE AND HEALTHY.

By Emmy Sidney Akuma- Communications & KM officer Baylor USAID LPHS-E

man who has beaten all odds to live positively to with HIV. When his wife tested positive, Wadada did not believe he too could be positive and lived in denial for over a year. Months later, Robert started having constant fevers and severe malaria. ***"I had accompanied my wife to the health center, I tested and the result turned out positive"***.

But prior to testing he had started presenting symptoms similar to his wife's condition. He used to escort his wife to the hospital for treatment. During one such a trip as he escorted his wife to the Baylor Supported Nakaloke clinic he tested positive. ***"We were in and out of hospital until one day the health worker performed an HIV test which turned out to be positive"*** said the father of five. The couple was enrolled onto the Ant- Retroviral Therapy (ART), but Robert later went into a depression and started drinking. This greatly affected his immunity and attracted field health workers from Baylor Uganda to provide counselling and care., Robert later learned that positive living is a life practice that calls on one not to use drugs like alcahol in order to keep their immunity to live longer, was the only way he could live longer. ***"I'm proud to be an example of positive living and good adherence, I now have a suppressed viral load and I receive my drugs for several months because the doctors now trust that I will take the drugs"*** says Robert.

Robert has regained strength and now takes on some causal work to earn a living. He is able to feed his family and is proud that Baylor and its partners have made him an honorable father again.

Nakaloke HC III Anti-Retroviral Therapy clinic which is supported Baylor under USAIDs Local Partner Health Services-Eastern Region Activity. Baylor has partnered with USAID, in a five-year project whose main objective is provide quality facility-based HIV and TB prevention services. The programme that is implemented in the 15 districts in Bugisu, Sebbi, Bukedi regions and Mbale city. Mbale has enrolled forty-three thousand nine hundred twenty-nine clients.



BAYLOR SUPPORTS THE NATIONAL ACCELERATED COVID-19 MASS VACCINATION CAMPAIGN

By Joseph Basoga- Communications Specialist

Baylor Uganda, the World Health Organization (WHO) and PATH supported a two-day workshop on Accelerated Mass Vaccination against COVID-19 for Bunyoro and Rwenzori regions with a call to workshop participants to mobilize and vaccinate more people to contribute towards a government target of 22 million vaccinated people by the end of 2022.

In 2021, the Ministry of Health (MoH), with support from

various partners, adopted the accelerated COVID-19 Mass Vaccination campaign (AMVC) approach to increase COVID-19 vaccine uptake to more than 70% among persons aged 18 years and above. Under her Global Health security Programme funded by the United States Centers for Disease Control and Prevention, Baylor-Uganda sought to ensure that the entire unvaccinated population gets both the first and second doses in time.

Among those that participated in the micro-planning workshop to enable implementation of the two-phase COVID-19 accelerated mass vaccination campaign was District Health Team (DHT) members, including the District Health Officer, District Biostatistician, the EPI Focal Persons, and District Cold Chain Technicians (DCCTs). The workshop promoted the microplanning methodology to achieve high AMVC figures.



Participants at the Accelerated Mass Vaccination against COVID-19 for Bunyoro and Rwenzori regions

MP for Kibanda South County Hon Karubanga Jacob Ateenyi called on participants to take this exercise even more seriously because the life of many people depends on it. ***“COVID-19 is still with us and what is even more important is that it does discriminate between the haves and have nots, so will need this vaccine,”*** He said, adding that the team participating in the micro-planning workshop provides ambassadors in this war and must help the citizenry to adapt to this new normal.

RDC Hoima Tumwebaze Yosam encouraged participants to take this as a

rare gift from the Government of Uganda/MoH, Baylor-Uganda and supporting partners because such effort and goodwill is given to only people prepared to receive and use it well.

The two-day micro-planning workshops supported by Baylor-Uganda, WHO and PATH brought together over 120 district leaders from 17 districts and two cities to develop district-level micro plans. Project technical officers were empowered to provide direct technical support for micro-plan implementation at the district level through the provision of data clerks to clear

data backlog accumulated during the previous campaign, support the rollout of Smart Paper Technology (SPT) (an innovative approach for real-time data capture), strengthen vaccine safety surveillance and monitoring and evaluation and provide logistics support for the distribution and redistribution of vaccines. Uganda continues to manage COVID 19 under the now fully opened economy. By mid-much COVID-19, infections were reportedly decreasing in Uganda, with 18 new infections reported on average each day. That's 1% of the peak.



Baylor GHS manager Rogers Kisame speaking at the GHS AMVC in Tooro

HOME BASED ADOLESCENT PSYCHOSOCIAL SUPPORT BRINGS BACK HOPE FOR A 15-YEAR-OLD – HE COMMITS TO A HEALTHY POSITIVE LIFE.

By Saul Walugembe- Adolescent officer ACE-FORT

The introduction of paediatric/Adolescent ART regimens was meant to bring hope to perinatally infected children, adolescents and their families. Unfortunately, this was never the case for Mago Grace (not real names) who lost his biological father at a tender age. Even though his mother is alive, she couldn't move with him to her new marriage. His only hope rested in the hands of his aunt – who qualifies to be his granny and a few other relatives of mixed ages.

On one of the support visits to Bundibugyo Hospital focussing on provision of adolescent services, a team comprising the Paediatric and Adolescent Coordinator, Early Childhood Development Officer and Adolescent Officer identified a very worrying file. Mago's file did not only raise a red flag, but prompted an immediate home visit. The team wanted to identify the cause of Mago's failure to attain a suppressed viral load. Gazing at us, Mago quietly sat on one of the rocks that acted as natural chairs in the compound. Standing at 122cms and weighing only 20kgs, it is hard to believe that Mago is indeed an adolescent of 15 years. Enrolled at 2 years, his outcomes had to be moulded by those around him. Mago's file indicated that his viral load had shot through the roof with 712,000 copies and a CD4 of 6 Cells.

Accompanied by the Clinical Medical Officer, ART In-charge and an expert client- all from Bundibugyo Hospital, the team was introduced and received in the home. Key to note was the fact that Mago was fully disclosed to and aware of his sero status. He could correctly explain how he takes his medicine and what happens when he visits the facility. This calmed our nerves as we had feared he might be unstable mentally. Nothing could stop the friendly chat between him and the adolescent officer, the latter offering a tin of yoghurt; Mago's craving at the moment.

"Ever since his mother refused to take him when she visited, he started rebelling and becoming stubborn. He refused to eat some foods and always demanded expensive foods. He is not in school because he was always sickly and we gave up on taking him to school. Now he spends most of his time in video halls and in trading centres. He therefore comes home late and sometimes we don't know whether he takes his pills even though he tells us he has." Said the Aunt.

He acknowledged that he misses a number of doses due to the discomfort in swallowing pills; LPVR specifically. Because of his poor eating habits, he doesn't take any drug on an empty stomach. All this compromised treatment success.

All adults within the home were called and given a treatment literacy session as well as a session on managing Adolescents Living with HIV like Mago. The team recommended an urgent nutrition assessment and support. He was referred to and physically escorted to the hospital's nutrition unit where he was assessed and counselled.

"I promise to improve my eating habits now that I know that my weight is considered while putting me on selected medicine (regimen)" promised Mago.

Follow-up updates from the Clinical Medical Officer showed an improved attitude towards life and self-care management. Even without an older relative, he could show up at the clinic whenever he ran out of something or had his pills misplaced. He kept appointments with the nutritionist until he gained 24kgs and was transitioned to DTG based Regimen in October 2021.

Exactly 28 days after this transition, he was bled for Viral Load. The results showed only 356 copies on VL done on 5th/11/2021. This called for celebration and reward – Mago had kept his part of the deal and above all, ART was finally a ray of hope for this adolescent.

Baylor-Uganda is implementing the Accelerating Epidemic Control (ACE FORT) programme in Fort Portal Region in Uganda under the President's Emergency Plan for AIDS Relief (PEPFAR) the programme that ends in-2023 supports comprehensive HIV/AIDS/TB services in the 9 districts of Bundibugyo, Bunyangabu, Kabarole, Kamwenge, Kasese, Kitagwenda, Kyegegwa, Kyenjojo and Ntoroko and Fort Portal City and one municipality (Kasese Municipal Council).

BAYLOR HOIMA RELOCATES TO A MORE WORK-FRIENDLY ENVIRONMENT

By Honorata Twebaze- Communications & KM Officer ACE Bunyoro

In most cases, when a business grows, there is a need for more staff and that comes with the need for more room to accommodate the growth like reducing congestion and implementing the COVID-19 SOPs among many other factors. This was the case for the Baylor Uganda-Hoima Regional Office which moved offices at the start of Quarter 1(January 2022).



Former Offices

We are pleased to inform everyone that the Baylor Uganda-Hoima Regional Office moved

from Plot 7 Kikwite Road, Hoima Municipality to Plot 240 Bujumbura Rwenkobe Road, Hoima Municipality effective January 2022.



Current Offices

BAYLOR UGANDA SEEKS TO COMPLIMENT BUNYORO KINGDOM'S EFFORTS TO MASS HEALTH.

By Honorata Twebaze- Communications & KM Officer ACE Bunyoro

The Bunyoro Kitara Kingdom Prime Minister Owek. Rt. Hon. Andrew Kirungi Byakutaga Ateenyi hosted the Baylor ACE-Bunyoro Project Manager, Dr. Betty Nsangi and team, who are seeking to complement the Kingdom's efforts to the health improvement of the people in the Bunyoro region. Dr. Betty made an introduction about Baylor Uganda and shared what ACE-Bunyoro is doing in the region. The team, in the discussion, shared their findings on issues that affect the people of the Bunyoro region mostly maternal and child health, teenage pregnancies, the high prevalence of HIV/AIDS among others. According to Uganda's Census of 2014,

Bunyoro-Kitara Kingdom has a total population of between 1,800,000 and 2,100,000 living in 350,000 - 400,000 households and about 48% of the children are orphans with about 54% of the population being illiterate.

The Prime Minister was impressed by the work being and yet to be done in the region that he requested the team to return when invited and meet the Kingdom's cabinet to share more. He also pledged support on behalf of the kingdom to improve the living conditions of the Banyoro, for a better future.

The Kingdom continues to engage various stakeholders to participate in its development plans and Baylor Uganda is pleased to be part of them.

The meeting was attended by Owek. Owek. Rt.Hon.Andrew Kirungi Byakutaga Ateenyi (Prime Minister), Mr. Alex Katusabe (Chief Secretary of Bunyoro Kingdom) Dr. Emmanuel Mugisa (Prevention Manager) , Emmanuel Tumwine (M&E Manager) and Twebaze Honorata (Communications & Knowledge Management Officer)



PICTORIAL



L-R: Mr. Albert Maganda Director Strategic Development, M & E, Dr. Denise J. Birungi - Director Medical and Community Programs, Ar. Addy- ED Baylor, Dr. Winnie Akoby - Director Technical Services LPHS-E, Dr. Betty Nsangi - Project Manager ACE Bunyoro, Dr. Paul Tumbu - Project Director LPHS-E.



Front row: L-R: Juliet Kasule- CDC, Dr. Amy Boore-CDC, Dr. Addy Kekitiinwa- Baylor Uganda, Connor Schultz-CDC, Dr. Peter Elyanyu - Baylor and others at the GHS briefing at COE.



Dr. Adeodata R. Kekitiinwa - ED Baylor Uganda sharing a light moment with Dr. Amy Boore - CDC Programme Director for Uganda after the GHS briefing at COE.



Prof. Dr. Jay Brooks Jackson (center) the Vice President for Medical Affairs, Dean of Carver School of Medicine at University of Iowa, USA, and a Professor of Pathology, with specialty in laboratory medicine visits Baylor Uganda.



Assessors from SANAS, Fortportal Regional Referral Hospital Laboratory team and Implementing Partners pose for a group photo following recommendation for accreditation.



Front row: Dr. Betty Nsangi - Project Manager ACE Bunyoro and the Prime Minister Owek. Rt. Hon. Andrew Kirungi Byakutaga Ateenyi pose for a photo after the courtesy visit to the Kingdom.



Mbale LPHSE staff feedback meeting.



UNICEF and Baylor Uganda team in a group photo after participating in the planning meeting to prepare for the next Program Cooperative Agreement (PCA) 2022/2023.



Pose of a winner! Baylor Uganda is proud to associate with the Newest DAID Scholar on the HPTN Scholar program. Dr. Victoria Ndyabangi: MBChB, Master of Public Health(Public Health) Medical Officer-Lead DAIDS Studies.



*New Director Technical services Baylor LPHSE
Dr. Winnie Akoby.*



Barclays Bank donates Laptops to Baylor Uganda



Beatrice Nagadya winner of BIPAI excellence award

FORT PORTAL REGIONAL REFERRAL HOSPITAL LABORATORY SUSTAINS SANAS ACCREDITATION.

By Diana Loy Akongo- Public Relations, Advocacy & Communications Officer ACE- FORT

Uganda subscribes to the South African National Accreditation System (SANAS), therefore, laboratories within government health facilities are accredited by SANAS. Laboratory accreditation provides a means of evaluating the competence of laboratories to perform specific types of testing, measurement and calibration.

The Fortportal Regional Referral Hospital laboratory was initially assessed in 2018 for SANAS accreditation and an annual assessment is done to renew the accreditation. International accreditation means the results produced at the hospital laboratory are accurate and credible, and can be trusted by the doctors in the treatment of patients.



The Assessors preparing for assessment sessions in the Fort-portal Regional Referral Hospital lab.

Following a one day assessment by a team from South Africa, the hospital laboratory was recommended for accreditation the fourth time. The accredited tests are clinical chemistry, Haematology, Tuberculosis, Serology (which includes HIV) and Microbiology and this makes Fortportal Regional Referral Hospital have the largest scope of tests in a single laboratory within the country.

The team applauded the laboratory team for working as a team and encouraged the hospital to

keep up the support towards the laboratory so that tests are not lost.

“There is evidence of team work here and I request the hospital administration to look into the few non-conformities that we have noted, especially availing reagents. The laboratory needs reagents to function.” Said Lead Auditor

Maintaining this accreditation has been an effort of multiple stakeholders that have supported the laboratory over the years and they include the Ministry of Health, Baylor-Uganda, JCRC, and The East African Public Health Laboratories among others. The hard work of these partners has resulted into a well-equipped laboratory that not only serves the Fortportal region and peripheral districts, but also neighboring countries like the Democratic Republic of Congo.

It should be noted that the same laboratory has previously collected and tested samples from suspected Ebola, Congo Crimean fever patients around the Uganda-Congo border.

Currently, the hospital is able to run 45 tests which has reduced the burden of patients travelling to Kampala to have some tests done.

The Hospital Director, Dr Alex Adaku who also doubles as the Laboratory Director congratulated the team for having maintained the SANAS accreditation and promised to closely follow up the issues requiring improvement.

Assessment in the Clinical Chemistry unit.



BAYLOR'S MEDICAL OFFICER DR. VICTORIA NDYANABANGI SELECTED AS DAIDS/HPTN 2022-2023 SCHOLAR.

By Joseph Basoga- Communications Specialist



Dr Victoria Ndyababangi the newest Division of
AIDS (DAIDS) HIV Prevention Trials Network (HPTN)
Scholar for the year 2022-2023

Baylor has again made history as Dr. Victoria Ndyababangi was selected as Division of AIDS (DAIDS) HIV Prevention Trials Network (HPTN) Scholar for the year 2022-2023. This means that Dr. Vicky joins a rare professional team of science scholars, with the knowledge, skills, and connections to further their careers as independent investigators in the HIV prevention research field. She will be required to develop a research project using data from a completed or ongoing HPTN HIV prevention study, present the findings of her project at the HPTN annual meeting and submit a manuscript at the end of the scholarship cycle.

She is part of the selected few that will receive funding for 18 months, subject to certain restrictions. Dr. Victoria now pursues to become a self-reliant Investigator/researcher who can conduct her independent research projects.

Dr. Victoria Joins Dr. Rogers Sekabira who was selected in the last round. The visibly happy Dr. Vicky wrote, "This is a wonderful opportunity for me to work with the team at becoming a better and yet independent researcher."

Dr. Vicky as she is fondly called by her peers is a current Principle Investigator (PI) IMPAACT 2026, Investigator IMPAACT 2009, Medical officer Lead - DAIDS STUDIES, Medical Officer CoVPN, and HPTN 084 Studies. The medical doctor who graduated with a Bachelors of Medicine and Surgery.M.B.Ch. B from Mbarara University of Science and Technology (MUST) also holds a Master of Public Health from the University of Manchester.

Dr. Victoria has over 40 professional certifications some of which include the Clinical Quality Management Plans (Policy eLearning), DAIDS Critical Events Policy and Manual Training, Clinical Site Monitoring (CSM) System Training, DAERS - New User Introduction Training Webinar (1250), DAIDS Policies on Enrolling Children (including Adolescents) in Clinical Research, DAIDS Protocol Registration System (DPRS) Vicky who started as an Intern medical officer at St. Raphael of St Francis Nsambya before joining Nakasero Hospital Limited as a Medical officer also worked as a CoVPN Studies Medical Officer, an HPTN-084 Baylor-Uganda CRS Medical officer, a Study Medical Officer-Back up overseeing clinical and toxicity and other issues,

In her message, Baylor ED Dr. Addy Kekitiinwa said "Congratulations once again, this opportunity now puts her at another level where she has to work hard and fulfill all the requirements of the scholar. I am confident that with the support of all of us and your mentor, she will excel just like others. We congratulate you Dr. Victoria Ndyababangi!!

DAID Studies are funded by the National Institute of Health(NIH) which is under the American Govt health system



The winner Dr Victoria Ndyababangi
Steps out in style

BAYLOR-UNICEF DISCUSS PROGRAM COOPERATIVE AGREEMENT FOR RMNCAH PROGRAMME

By Honorata Twebaze- Communications & KM Officer ACE Bunyoro

Baylor Uganda, at the invitation of UNICEF, participated in the planning meeting to prepare for the next Program Cooperative Agreement (PCA) 2022/2023.

The two-day joint planning meeting took place in Mbarara at UNICEF offices and Baylor Uganda was represented by a delegation of 10 members comprising staff currently working under the UNICEF funded project from different clusters, COE, and a member of SMT.

By the end of the two-day meeting, the team had discussed the status of the current PCA, MNH/PMTCT & Child Health Adolescent Health & Emergencies, Nutrition & WASH, writing of work plan, budget, and way forward for the next PCA 2022/2023.

Baylor-Uganda signed a one-year Program Cooperative Agreement (PCA) with UNICEF entitled: ***“Strengthening technical and management capacity of District Local Governments for Reproductive, Maternal, New-born, Child, Adolescent Health (RMNCAH), WASH and education services in 10 districts in Western and East-Central zones of Uganda.”***

The PCA is aimed at improving access and utilization of RMNCAH, education, and WASH services in 10 districts of Uganda as well as the reduction in the supply and demand

bottlenecks in the health systems in underserved populations in the 10 selected districts in the Western (Kasese, Kamwenge, Kyegegwa, Kikuube, Mubende, Isingiro and Ntungamo) and East Central zones (Kamuli, Tororo, and Namayingo)




The team in a group discussion during the PCA meeting



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