

AIDS INFORMATION CENTRE-UGANDA (AIC)

Capability Statement

The AIDS Information Centre (AIC) Uganda is a catalytic not-for-profit Non-Governmental Organisation established in 1990 as a thought-leader in HIV programming, Health Systems Strengthening and Knowledge Management. AIC was the pioneer HIV Counselling and Testing Centre in the whole of Africa. With 8 Centres of Excellence spread across the country, AIC boasts of a national footprint, providing comprehensive HIV prevention, care and treatment services, TB/HIV and Sexual and Reproductive Health (SRH) services to adolescents and young people, particularly Key and Priority Populations (KP/PPs) such as Female Sex Workers. AIC meets the health needs of over 15 million people in Uganda.

Our Vision: *"A population free from all preventable and non-preventable health problems in Uganda and beyond."*

Our Mission: *"To contribute towards the elimination of communicable and non-communicable diseases in Africa in a sustainable, collaborative and integrated approach leaving, no one behind,"*

Our Slogan: *"Good Health and Well-being for all."*

AIC Core Values:

- Ubuntu (Humanity),
- Pursuit of Excellence,
- Equity,
- Strategic Partnerships,
- Integrity,
- Innovativeness and
- Continuous Learning.

Our Core Business: Health Service Delivery (Comprehensive, integrated HIV Services e.g. HIV Testing services (HTS), Anti-Retroviral Therapy (ART) provision to 69, 873 PLHIV, Post Exposure Prophylaxis (PEP), Pre-Exposure Prophylaxis (PrEP), TB screening and management, Sexual and Reproductive Health (family planning, Voluntary Medical Male Circumcision (VMMC), Cervical Cancer Screening, STI screening and management, Gender Based Violence prevention and Post-Violence Care, Social support and protection for Children (OVC programming), DREAMS, Key Populations Programming, Health Systems Strengthening (HSS), Disability inclusion, Global Health Security, Non-Communicable Diseases Management, Refugee Programming, Climate Change and Health, School Health Programming, One-Health Approach and Knowledge Management (Research, Training and Organizational Capacity Development).

Governance: AIC has a competent Board of Trustees with representatives from the different regions of the Country, Uganda AIDS Commission, Ministry of Health, Research, the academia and people living with HIV (PLHIV). The board provides strategic guidance and oversight and is

the highest decision-making body of AIC. Each region has a Regional Advisory Committee (RAC) with similar roles as the BOT but at a lower level. RACs ensure regional implementation of BOT decisions.

Management Capacity: AIC is headed by the **Executive Director, Dr. Bakashaba Baker**) a seasoned leader with over 8 years of senior level experience in managing large and complex health programs. He has a broad range of experience, encompassing; technical roles, M&E, leadership, clinical training and project management.

The **Director Program Management & Capacity Development, Dr. Katamba Henry Stanley** is a Public Health Specialist with a wealth of experience of over 15 years of program management and leading various technical working groups at national and international level.

The **Director Finance, Mr. Edward Okech** is a Certified Public Accountant, with over 15 years' experience managing large donor grants.

The **Director Human Resources and Administration, Mr. Samuel Mukulu Joshua** is an Organizational development expert with over 12 years' experience in managing human resources. Each of the 4 Regional Managers (Central, Eastern, Western and Northern) holds a Masters in Public Health with extensive experience in managing and implementing health programs. **Associate Prof. Dr. Misaki Wayengera, the AIC Senior Research Scientist, is a Geneticist and Senior Lecturer** at Makerere College of Health Sciences with vast experience in scientific research.

Dr. Levicatus Mugenyi, PhD, is the AIC Senior Biostatistician, with vast experience in statistical modelling and epidemiological investigation.

The **M&E Advisor, Mr. Musinguzi Brian** is a Biostatistician and an accomplished expert in data management systems, analysis and reporting for HIV, TB and SRH programs.

Dr. Opito Ronald is the Senior Knowledge Management Advisor, a Public Health Specialist and Lecturer at Soroti University, with over 8 years' experience in Public Health Research. He leads the Research function at AIC.

Dr. Openy Abraham, the Research Scientist, is an experienced Medical Doctor and Public Health Specialist with over 6 years increasingly professional experience in Global Health Security and Research.

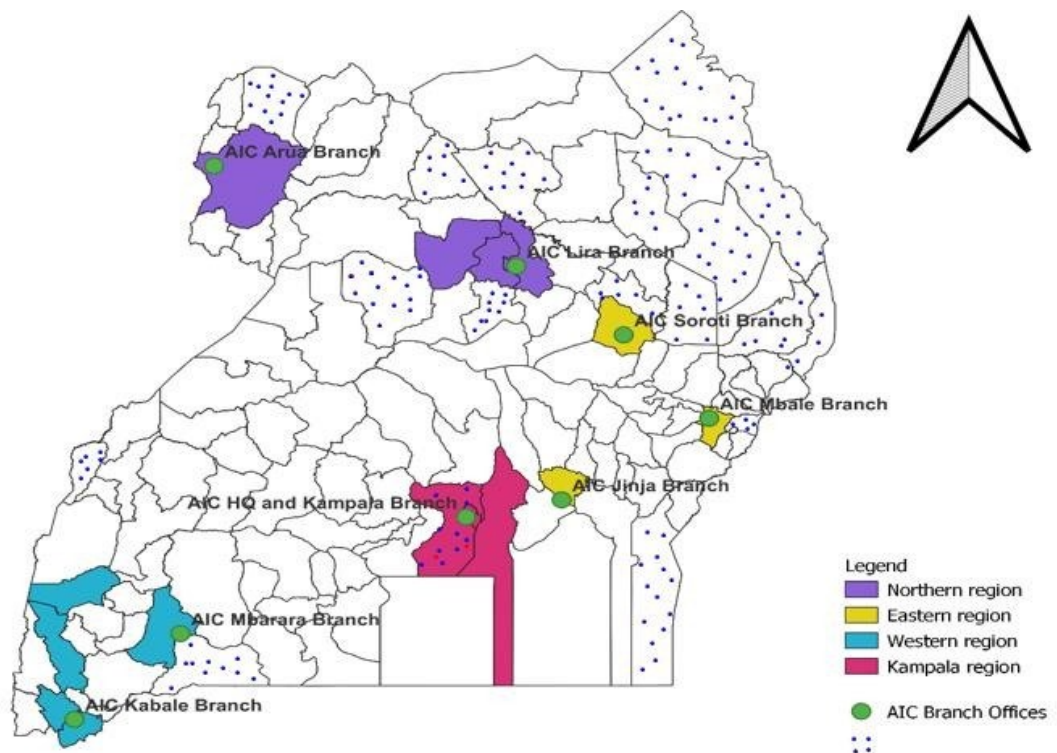
Mr. Timothy Otaala is a seasoned Medical Laboratory Technologist with over 15 years of hands-on experience in clinical laboratory practice, laboratory management, research and capacity building with emphasis on system strengthening, quality control and assurance.

Based on the above exhibited leadership and technical capacity, AIC is therefore well positioned to implement multiple, large and complex public health projects as well as conduct both clinical and public health research in Uganda and beyond. AIC is currently the Regional Comprehensive HIV Implementing Partner for CDC-Uganda for SOROTI region which is comprised of Amuria,

Soroti, Bukedea, Kaberamaido, Kalaki, Kapelebyong, Katakwi, Kumi, Ngora, Serere districts and Soroti City. This \$ 32 million dollar 5-year PEPFAR-funded implementation mechanism is aimed at reaching and sustaining epidemic control in TESO sub-region, Eastern Uganda. AIC draws lessons learnt, best and promising practices from her 34 years' experience in HIV programming given our national footprint, historic and strategic positioning. Over the years, we have demonstrated capacity and willingness to implement PEPFAR and other Partner interventions in all parts of the country.

AIC is fully registered with the NGO Board as a national NGO and it operates in 8 Regional Centres of Excellence; Arua for West Nile region, Lira for Northern Region, Soroti for North East Region, Mbale for Eastern Region, Jinja for East Central Region, Mbarara for Western Region, Kabale for South Western Region with a liaison office in Moroto for Karamojong Region. All the 8 AIC centres of Excellence are fully registered and accredited ART clinics and Laboratories and work in collaboration with government and private health facilities within the region to provide for the health needs of over 15 Million beneficiaries.

Map showing AIC service coverage



Technical expertise in managing and implementing a comprehensive HIV service delivery and health systems strengthening program in multiple districts across a facility-community continuum, including strengthening district and facility supply chain systems, laboratory quality management, utilization of HHS, and institutionalization of data use and CQI approaches.

AIC has highly competent and experienced technical teams with multiple years of executing comprehensive HIV service delivery and health systems strengthening programs in over 65 districts. Its services delivery approaches are particularly glued by a strong anchorage on facility-community linkages that are pivotal for people-centered programming, systems strengthening using QI approaches.

- **Health Service delivery:** AIC continues to be at the helm of providing integrated HIV services and meeting health needs to over 15 million beneficiaries in Uganda. AIC has employed different approaches in providing integrated HIV Testing Services (HTS) targeting key and priority Populations (KPs/PPs) especially Adolescents and Young Women, and Female Sex Workers. AIC has taken lead in providing integrated HTS for these populations in collaboration with partners, district leadership, community structures as well as cultural institutions. These integrated services provide quality facility and community services for Sexual Reproductive Health (SRH) services including family planning, medical male circumcision, cervical cancer screening, STI screening and Management among other services. AIC acknowledges that in order to successfully achieve ambitious target of ending HIV as a public threat by 2030, laboratory support is the most basic and fundamental tool. All the regional centres of excellence are equipped with equipment's, supplies personnel and as well work with government laboratory support systems to ensure routine and uninterrupted monitoring of antiretroviral therapy, diagnosis of HIV and associated infections and evaluation of response to therapy among its clients. To ensure optimal utilization of laboratory support in providing quality care and reliable diagnostic support to our clientele, AIC employs innovative community and facility based laboratory service approaches including hotspot HTS outreaches, community viral load blood draws among others. AIC plays a key role in the control of TB through its regional centres and particularly in Kampala where it is one of the GeneXpert sites handling over 500 samples per months.
- **Health and Community Systems Strengthening:** AIC has for over 33 years worked with Ministry of Health, Ministry of Gender Labour and Social Development and Ministry of Education and sports and religious and cultural institutions through districts to build and strengthen sustainable health systems. This has been largely through supporting districts in priority setting, planning, work plans implementation, mentorship, performance monitoring and reviews, support to data and information generation for informed decisions and implementation. Significant effort has been directed towards strengthening strategic information, supply chain management systems and laboratory services, as well as improving human resource capacity through mentorship, onsite support and infrastructural modifications. . AIC apply Health Systems Strengthening approach in all regions with key proven interventions towards epidemic control, including Assisted Partner Notification, HIV self-testing, and recency testing among others. Capacity building also extends to community volunteers for improving access to HIV/ TB and SRH services including management of the same using people-centered approaches.

- Creating enabling environment for health service delivery through advocacy for good policies:** AIC over time has continuously supported the formulation of policy agendas and briefs on HIV/ SRH and TB. AIC participated in the formulation of Cultural briefs and protocols for all cultural institutions in Uganda, worked with Uganda AIDS Commission (UAC) and Ministry of Health to review and popularize national HIV/TB and SRH policies and frame works and most recently supported the development of National Strategy for Integration of Sexual Reproductive Health, HIV, Gender Based Violence response, Tuberculosis and Nutrition Services (2021 – 2025) the National Condom distribution guidelines and The National Multisectoral Action and Accountability Framework 2020 for Ending New HIV Infections among Adolescents and Young People (AYP) in Uganda. We work with civil society organizations, networks and small size grassroots key populations organizations which play a strong local anchorage and a pivotal role in advocacy, mobilization of clients/patients, referrals, and follow-up of patients. AIC is also a secretariat of CSO Advocacy Coalition for Integrated SRHR/HIV/GBV in Uganda with a membership of over 24 CSOs from across the country.
- Social support and protection for Children (OVC Programming)** and other Vulnerable Populations Programming for the rehabilitation of communities affected and infected by HIV/AIDS by supporting District Local Governments, District Health Teams and Health Facilities to scale up Comprehensive HIV/AIDS Service Delivery through Health & Community System Strengthening addressing social support, economic family support and education. AIC has implemented two DREAMS projects in Northern Uganda and with support from UNFPA provided economic empowerment schemes through the provision of seed fund to over 3000 AGYWs particularly those vulnerable to commercial sex exploitation and those who recognize themselves as sex workers. AIC in collaboration with UNRA has empowered communities to be able to identify, prevent and address violence against children and Gender Based Violence. AIC with support from PEPFAR provides HIV related services to over 2000 persons with disability in Kampala
- Financial Management:** A financial and accounting manual stipulating all procedures is in place and it identifies and gives guidance on roles and level of authority. AIC staff are supervised through an established financial management system, recognized and accepted by the various donors. An automated accounting software (Dynamic Office 365) is used and all funds are managed along the established financial management system of AIC. Additionally, various levels of approvals are made before a financial transaction is conducted. AIC has an internal auditor who plays a crucial role of ensuring adherence to systems and improved usage of funds, resources and accountability. Quarterly audit visits are made by the internal auditor to check on compliance. AIC has a history of handling large budget portfolios and has also been tested to having international final systems and internal controls together with a robust M&E system.

Regional Implementation experience (Experience and capacity in the region(s) indicated in the Geographic Capacity Statement, or regions with a similar context):

- Over the years, the Soroti Regional Centre of Excellence has been operating in collaboration with local and national partners through established government structures. Key implementing partners include UNFPA, that has supported capacity building of lower health facilities through the 2gther4SRHR Joint UN program implemented by 4 UN agencies of UNFPA, UNICEF, WHO and UNAIDS through the regional referral mechanism using integrated SRHR/HIV/GBV mentorship approach in Amudat and Katakwi from 2018 to 2022. This involved ministry of health, regional referral mentors, district teams, consultants and program implementing partners.
- Since 2016, AIC regional and national office working together with district local governments ,ministry of health and ministry of Gender Labour and Social Development and National population Council supported by UNFPA through the UNJoint GBV program, has supported the 18 districts of Amuria, Kaberamaido, Kiryandongo, Bundibugyo, Gulu, Kotido, Kaabong, Nakapiripirit, Napak, Moroto, Yumbe, Pader and Kampala (Including KCCA Divisions such as Central, Kawempe, Rubaga, Nakawa and Makindye).The outcome of this led to creation of enabling policy, legislative and accountability framework for elimination of GBV and improvement of SRHR and these are translated into action. AIC also work with partners to reduce social tolerance for gender based violence and improved sexual reproductive health rights, and support Increased utilization of quality integrated GBV and SRH services in the target districts through Strengthening coordination, partnerships, learning and innovation for integrated SRHR and GBV multi- sectoral response and prevention.
- AIC has established community structures country-wide, for example in Soroti Regional Centre of excellence, AIC established community structures including KP Peer supporters, trained VHTs on Behavior change communication (BCC), trained young people through post-test clubs, trained and equipped YAPS and worked with PNFPs to create demand and uptake of HTS.
- AIC conceptualized and established Demographic dividend clubs in Amudat and Katakwi as a pilot to nurture self-driven young people clubs who are out of school in their diversity. This focused at building community competence on the role of SRH in building individual and community socio-economic potential and self-actualization within prevailing contexts. This was as well a platform for mobilizing for increased uptake of SRHR/HIV/GBVservices and engagement in SRHR and socio-economic programs exploiting both personal/community development entry points. Over 800 young people were engaged under this pilot intervention and a DD narrative was developed jointly with the national population Council and pilot tested in 2022 and now under review.
- AIC supported Grievance management committees established by Uganda National Roads Authority (UNRA) while constructing Tororo- Mbale –Soroti- Lira -Koon Kamudini in 2019.These were equipped with skills to handle GBV and other SRH/HIV related concerns that arise as a result of road construction workers interacting with vulnerable communities

- AIC through Soroti regional Centre of excellence works with partners including CBOs and NGOs. For example, Charity Women's association Soroti supported to offer integrated HIV services, Teams4U supported to offer targeted HTS in Kumi and Bukedea in 2019.
- AIC has built capacity for health workers across Soroti region. For example, World Vision International contracted AIC to offer capacity building to "HIV care givers and peer educators in schools in Soroti and Amuria in 2020, Hope after rape (NNGO) Contracted AIC and offered HTS in Serere district, Parasocial workers trained in GBV referral pathways and has built capacity of AYP groups to reach out to their peers along North East Road Asset Management project (NERAMP project) routing from Tororo, Bukedea Soroti to Lira. These were trained in financial literature.
- Through the Key Population Investment fund, AIC increased identification of KPs and linkage to prevention services in Soroti district. Supported health centres to roll out DSD targeting KPs. Established 3 CCLAD in Kikinjagi HC III which consequently contributed to increased ART retention and VL suppression in the district.