

"United for Health": *Recap of AIC SORP Project. Year 1*

February 2025

Edition I

EDITOR'S REMARKS



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With 34 years of service, AIDS Information Centre-Uganda (AIC) launched the Soroti Regional Project in October 2023. As we conclude our first year, we take this opportunity to reflect on our achievements, challenges, and valuable lessons learned in our ongoing fight against the HIV/AIDS epidemic in the Soroti region.

As we step into a new year, we look back at our past efforts, emphasizing our accomplishments and the obstacles we've faced. We are grateful for your unwavering support and look forward to enhanced collaboration, growth, and success in the coming months to better serve our communities. I would like to extend my heartfelt appreciation to the team for their dedicated support and collaboration in creating this newsletter.

Wishing you an insightful read.



REMARKS FROM ACTING EXECUTIVE DIRECTOR



Acting Executive Director
Dr. Baker Bakashaba

Despite our accomplishments, we acknowledge several challenges that we have strategized to overcome in the coming year as we strive to achieve the 95-95-95 goal.

Welcome to the inaugural issue of the AIC SORP newsletter. The AIDS Information Centre (AIC) was awarded a five-year grant by PEPFAR through the US Centers for Disease Control and Prevention (CDC) under Cooperative Agreement Number 5NU2GGH002506-01. This initiative, titled “Soroti Regional Mechanism for Reaching and Sustaining Epidemic Control in the Republic of Uganda under the President’s Emergency Plan for AIDS Relief (PEPFAR),” commenced on September 30, 2023, and will run until September 29, 2028.

As we reflect on our journey this year, we celebrate significant achievements in our mission to combat HIV and empower our community. Our dedicated efforts have enabled us to provide HIV Testing Services (HTS) to over 299,000 individuals, with 2,019 new positives initiated on Antiretroviral Therapy (ART). While we have experienced numerous successes, we also faced challenges such as funding cuts and the ongoing impact of the pandemic. Nevertheless, our remarkable team and committed leadership have allowed us to adapt and continue serving our community effectively.

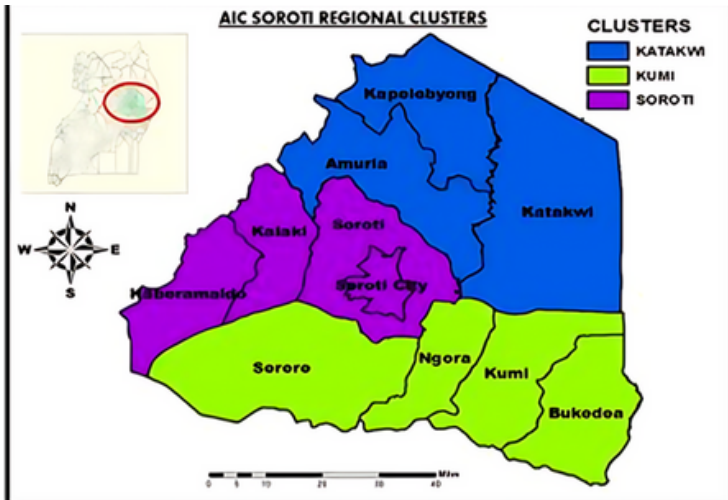
I am immensely grateful for the dedication of our staff, facility teams, community teams, district teams, city team, SRRH and partners from the Ministry of Health, METS, CDC, and PEPFAR. Your support has been crucial to our progress.

As we look forward to an exciting second year, we aim to expand our outreach programs and strengthen community partnerships. Our plans include:

- Targeting educational institutions (higher education, tertiary, and vocational) for HIV prevention.
- Engaging uniformed institutions (Police, Barracks, and Prisons) for HIV prevention efforts, particularly through Voluntary Medical Male Circumcision (VMMC).
- Integrating services to provide a broader range of support to communities.

We appreciate your unwavering support. Together, we can promote good health for all while working towards AIC's vision of **“A population free from all preventable health problems in Uganda and beyond.”**

OUR IMPACT



430,896

Reached with HIV Services

2,804

New Infections

39,426

Accessing ART Services

31,631

Received VMMC Services

93%

Suppression rates

1,721 WLHIV

Received PMTCT Services

4,658 WLHIV

Accessed Cervical cancer services

2,237

Accessed TB services

3,935

Received PrEP

11 Districts

111 Supported sites

86 ART Sites

79 EMR Sites

42 Sites Implementing Point of care

5 HRH

153 linkage facilitators

91 Mentor Mothers

17 Support counsellors,

46 data volunteers

398 VHTs

SETTING THE FOUNDATION FOR SUCCESS



Staff being inducted on CDC project

At AIC, staff induction is more than just a formality – *it's a cornerstone of our culture. It's about creating clarity, fostering collaboration, and igniting the passion needed to achieve extraordinary results.* With this, the orientation for project teams was thoughtfully organized to familiarize members with the AIC mission, vision, core values and as well as align them with the project goal and objectives. This essential step set the stage for a cohesive and purpose-driven team.

During the orientation, an in-depth overview of the project was presented, introducing the SORP project team and clearly outlining their duties and responsibilities. A strong emphasis was placed on the power of teamwork as a critical driver in achieving the project's objectives, ensuring every member understood their role in the bigger picture before officially stepping into their responsibilities.

The team was also briefed on the reporting structure to maintain accountability and track progress effectively. Key reporting periods were highlighted, including quarterly reports and the annual report compiled at the end of each year. These measures were designed to keep the team aligned and focused throughout the project's duration.



AIC SORP Staff induction

DISTRICT ENTRY MEETINGS



Manager HSS, Mr. Godfrey Muzaaya during on of the district entry meetings

To introduce the AIC SORP project to stakeholders across the Teso region, district entry meetings were held in 10 districts and 1 city. These sessions formally presented AIC's mission, the project's core objectives, and their alignment with district development priorities.

Facilitated by the Health Systems Strengthening and Surveillance (HSS) team, including the HSS Manager and District Liaison Officers, the meetings emphasized collaboration and partnership with district leadership. Key attendees included Chief Administrative Officers, (CAO), District Health Officers (DHOs), health secretaries, Mayors, Local Council 5 Chairpersons, cultural leaders, PLHIV Networks and other key stakeholders.



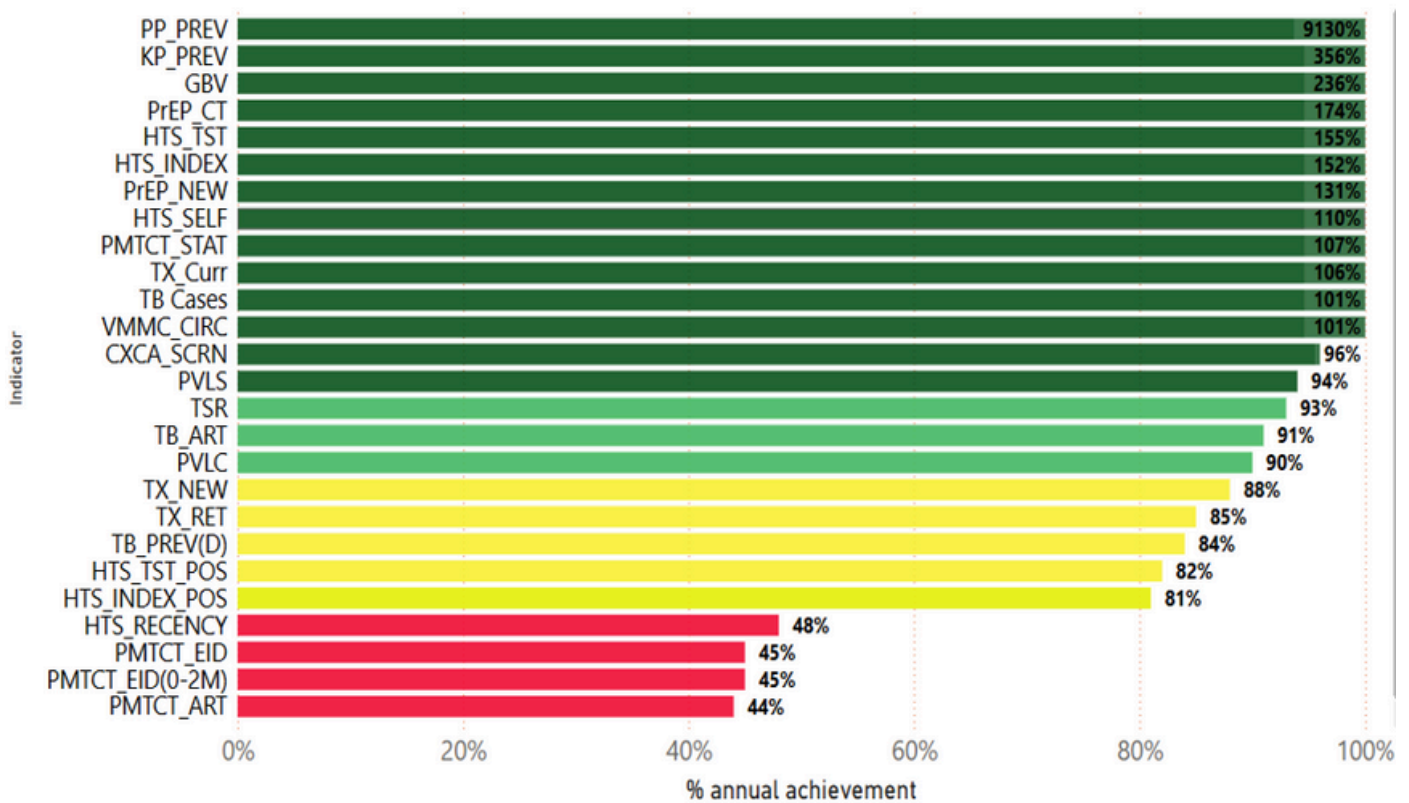
Serere District team after entry meeting at the Serere district offices

AIC reaffirmed its commitment to supporting districts in tackling HIV/AIDS, TB, GBV, NCDs, FP, and strengthening health systems to ensure the success of the Soroti Regional Project. District leaders reciprocated with pledges of partnership, fostering a foundation for sustainable implementation in year one and beyond.

We extend our gratitude to the Teso region districts for their unwavering support and look forward to continued collaboration to improve community health outcomes.

AIC SORP OVERALL PERFORMANCE

FY23 FY24 Summary Indicator performance



HIV Prevention Services: AIC supported 111 public health facilities in Teso region to provide HIV testing services (HTS) to **430,896 individuals** from the various testing points and **2,804** new persons with HIV were identified during the first year of the project, with the overall positivity rate below one percent (0.65%). Tracing of the sexual contacts of the identified new HIV-positive individuals (Index client testing) contributed significantly to the overall identification of new positives at 15%. HIV testing at first antenatal visit (1st ANC) was at **100%**. All the **1721** pregnant and lactating women living with HIV were enrolled into the PMTCT program, with **1942** babies receiving their first PCR testing in the program period (107% EID coverage) and a mother-to-child transmission rate controlled to below 0.5%. As part of HIV prevention, AIC provided voluntary medical male circumcision to a total of **31,631** eligible boys and men, of which all were followed up until complete recovery.

HIV Care and Treatment Services: A total of **39,426** PLHIV received treatment in the region, of which **2,804** were newly initiated on treatment in the one-year period. Nine in ten (91%) of these clients were monitored for viral load and of those monitored, about 9 in 10 (93%) had suppressed viral load. 85% of the newly identified and initiated clients were alive and active in care 12 months after initiation. **TB** treatment services were provided to **2,237** new and relapsed patients, with a TB/HIV co-infection rate of **35%** (793/2237) and **100%** (793/793) were provided ART. PLHIV received screening and management for other diseases, including STIs, other opportunistic infections and non-communicable diseases such as hypertension and diabetes.

Human Resources for Health (HRH): There were **5** HRH, **153** linkage facilitators, **91** Mentor Mothers, **17** Support counsellors, **46** data volunteers and **398** VHTs engaged and facilitated to contribute to epidemic control in the region.

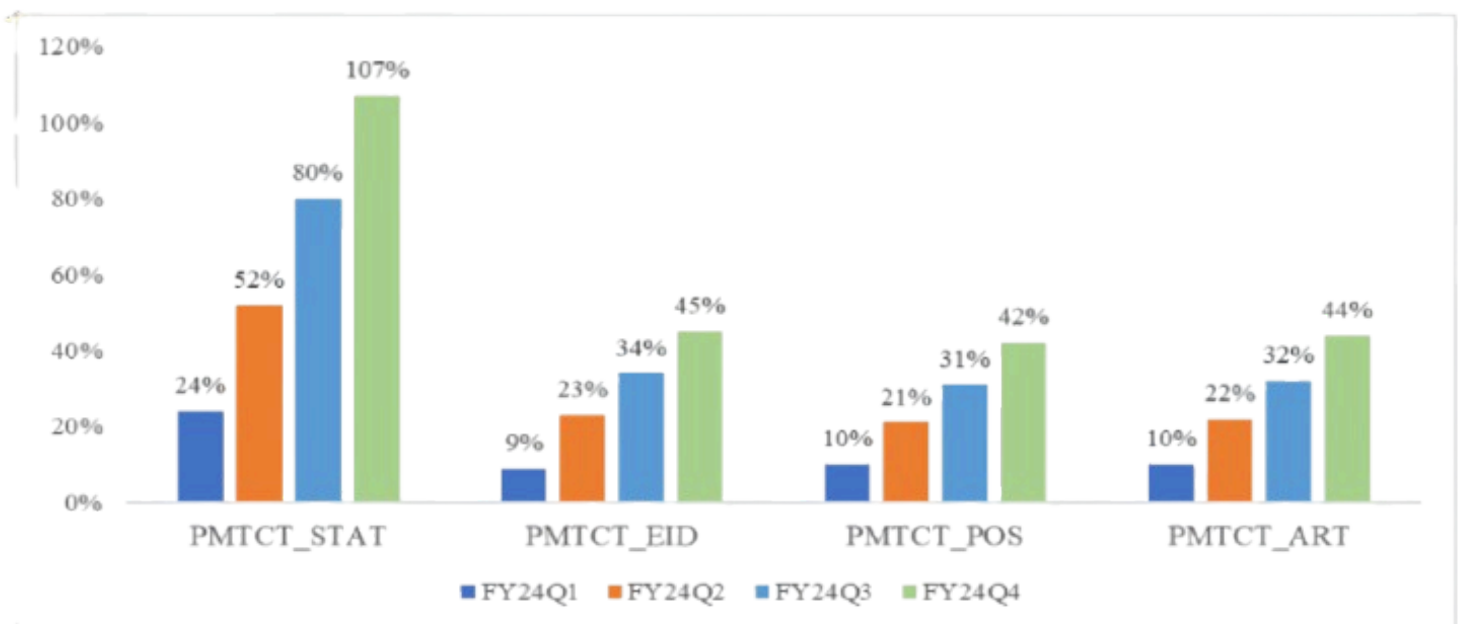
AIC SORP OVERALL PERFORMANCE CONT

Strategic Information/HIS: 42 sites were enrolled and maintained to implement UgandaEMR point of care on Tier I and 44 on Tier II EMR with 100% (86/86) EMR coverage. Viral load Health Information Exchange utilization was sustained at **85%**.

Despite the above achievements, challenges remain in fully attaining the UNAIDS' 95-95-95 targets more especially in identification of the new positives, and TB prevention services.

To counter these, AIC has designed strategies that include:

- Implementing HTS surge activities through continuous quality improvement (CQI) projects. These are meant to improve regional performance.
- In addition, AIC will prioritize offering technical support to districts to close case identification gaps. The districts will be supported on consistent utilization of HTS screening tools most especially at high yielding entry points at facility. In communities, support will be through leveraging on the Munonye campaign to identify new HIV positives, close gaps on documentation and reporting gaps.
- AIC will also leverage the implementation of integrated community service delivery model (ICSDM) across all high-volume sites to improve additional case identification, intensify outreaches including the fishing community.
- Community health workers will be supported to reach men and women 50+ in the communities through increase on uptake of HIV self-test (HIVST) kits.
- Additionally, AIC will work with The Global Fund subrecipients (CDFU and CUAM) to integrate HTS into TB contact tracing activities and also,
- AIC will also scale up social network strategy, integrating HTS in NCD clinics and MNCH points to reach, as well as forging collaborations with private for-profit outfits including community pharmacies.



PMTCT performance against annual target FY24

ADVANCING CARE & TREATMENT FOR BETTER OUTCOMES



CHW engagement & mentorship at Kaberamaido Hospital



Team at WERA HCIII offering mentorship services on daily surge reporting, Care & Treatment

With the goal “*Good health and well-being for all*”, at AIC, we have been dedicated to improving our care and treatment section to ensure that all individuals receive services effectively and with ease of accessibility. This is being effected through strengthening our connections with health facilities, stakeholders and the communities we serve, enhancing follow-up systems, and expanding patient support. This is with the aim of improving health outcomes and promoting adherence to treatment plans. The strategy is being implemented through regular training and supporting of CHWs, who are empowered to provide compassionate, informed care directly in their communities while ensuring that individuals receive timely services, follow-ups, treatment adherence support, and preventive care services.



AIC YAPS team at the Y+ Summit

AIC has supported the implementation of the Young People and Adolescent Peer Support (YAPS) strategy at 33 health facilities with 68 YAPS in Amuria, Bukedea, Kaberamaido, Kalaki, Katakwi, Kumi, Serere, Soroti district, and Soroti city. This model aims to reduce HIV-related morbidity and mortality among adolescents by increasing access to HTS, strengthening linkage to ART, supporting adherence, disclosure, and stigma reduction.

Laboratory standardization and system improvement

A sustainable health laboratory system is critical to supporting HIV/AIDS care, treatment, and managing other infectious diseases across all healthcare levels. In collaboration with the Ministry of Health, AIC organized Laboratory Quality Management System (LQMS) mentorships to enhance the capacity of 90 peripheral facilities in the Soroti region. This initiative aimed to improve access to quality laboratory services and strengthen the laboratories' quality management systems.

The updated laboratory standards emphasize addressing risks and opportunities for improvement while prioritizing patient welfare. They encourage continuous advancement within medical laboratories and integrate requirements for Point of Care Testing (POCT) to enhance service delivery.



Simple one Step (SoS) test at Apapai HCIV laboratory

To complement these efforts, laboratory staff received ISO training, followed by internal audit training to equip them with the knowledge and skills needed for effective internal auditing. These steps are vital in driving continuous improvement and ensuring high-quality, sustainable laboratory systems that better serve the healthcare needs of Soroti region

TOGETHER TO ELIMINATE TB & LEPROSY



AIC team during the commemoration of the International TB and Leprosy day 2024 in Isingiro district

➤➤➤ INTERNATIONAL TUBERCULOSIS AND LEPROSY DAY

AIC Joined the country in commemorating the International Tuberculosis Day and Leprosy Day in Isingiro on 27th March under the theme, “Yes! We Can End TB”. AIC carried out different CAST+ activities in Soroti region. These included conducting weekly data reviews; ensuring updates of the data sources and conducting community TB screening activities; integrating TB screening with HTS; conducting targeted mentorships to Health Facilities in systematic screening of TB at the Service Delivery Points. These were aimed at increasing public awareness of TB prevention, and the continuing burden of leprosy in Soroti Region and generally countrywide.

➤➤➤ CAST+ TUBERCULOSIS

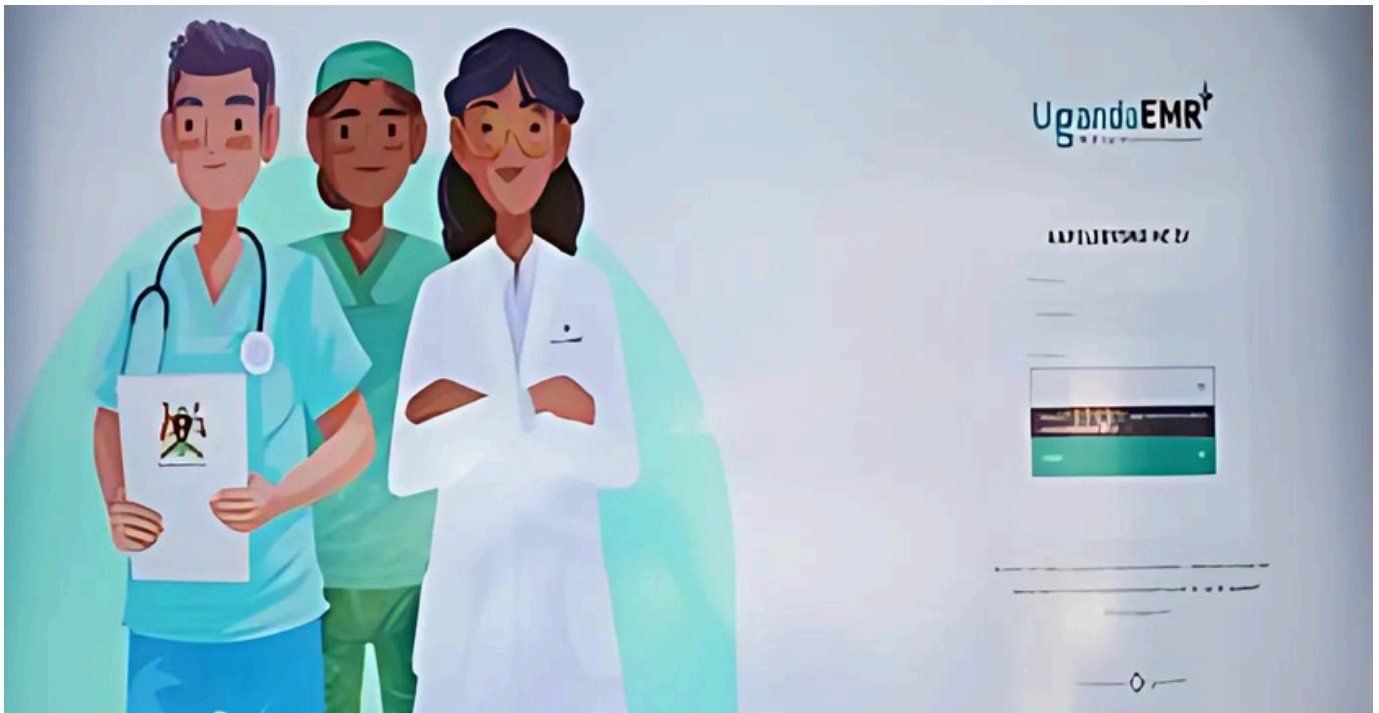
During the 2024 CAST+ TB campaign, a dedicated team—including the TB Advisor, TB focal persons, and the PR & Documentation Officer—visited the home of a suspected leprosy patient in Kapelebyong district.

The elderly, malnourished man had been living with a persistent skin condition for five years, during which he was also diagnosed and treated for TB. However, his records revealed inconsistencies in keeping appointments and a history of TB and fungal infections dating back to 1991 and 2013.



TB focal persons during a Leprosy and TB case identification in Kapelebyong

Further testing confirmed that he had Post-TB Lung Disease, and efforts were made to initiate appropriate treatment. Despite challenges such as TB LAM stockouts in several health facilities, the team ensured that health workers were re-oriented on TB screening using ICF forms and GenXpert to improve diagnosis and care for people living with HIV.



AIC rolled out UgandaEMR+ in the Soroti region. The UgandaEMR+ is an advanced electronic medical record (EMR) system designed to streamline patient management including reduction of waiting period, track treatment progress, monitor drug adherence and adjust treatment on a need basis; clinical documentation like retrieval of patient records; and reporting within healthcare facilities.



METS System developer during EMR+ TOT

➤➤➤ UGANDAEMR+ TOT:

A team from Monitoring and Evaluation Technical Support (METS) conducted a ToT for all the M&E and I.T teams in the region. The training equipped the teams with the knowledge and skills in installation, upgrade, usage and managing of the system.

ROLLOUT OF UGANDAEMR+ ◀◀◀

After a successful ToT, the M&E and I.T teams together with the team from METS conducted a rollout of the system at the 2 POC sites of Kapelebyong HCIV and Ocheru HCIII and Kaberamaido district in the Soroti region. The rollout included upgrading the current version of UgandaEMR to UgandaEMR+, training of the health workers to use the systems and a survey on the uptake of the system.



M&E manager giving opening remarks during the EMR+ TOT

AIC INTEGRATION OF SERVICES



AIC team joined in the Celebration of World Diabetes Day 2023 at Kopkin PS in Atutir, Kumi district



On November 23, 2023, AIC participated in World Diabetes Day at Atutur Hospital in Kumi District. The event featured free screenings and testing for diabetes, hypertension, HIV, and other health conditions conducted by healthcare workers. During this event, community was sensitized on diabetes. During the event, partners were encouraged to integrate non-communicable diseases (NCDs) into their programs. NCD tools to health facilities were distributed, mentoring health staff on NCDs, and support on collaborating with other civil society organizations to enhance NCD integration within the health sector were also conducted.



AIC team at the World Diabetes Day 2023



Celebration of World Suicide prevention day 2024

Additionally, AIC joined Soroti City in observing World Suicide Prevention Day on September 11, 2024. Under the theme “Changing the Narrative on Suicide,” the event emphasized the importance of initiating conversations about mental health with a powerful call to action: “Start the Conversation.” This initiative aims to promote open dialogues about mental health, raising awareness and highlighting the significance of compassionate discussions as crucial tools for prevention.

Recognizing the growing burden of NCDs among people living with HIV, AIC is actively engaging communities and supporting healthcare providers in adopting a holistic approach to care. This is being implemented through sensitization, capacity building, and strategic partnerships by encouraging health programs to incorporate NCD screening, prevention, and management into HIV services.

DEMAND CREATION STRATEGIES



Starlight SS Orungo, Amuria teenagers undergoing pre-VMMC and condom usage sensitization

AIC has been actively supporting communities in HIV prevention through various demand-creation strategies. These initiatives are designed to enhance awareness, understanding, and the eventual demand for HIV prevention, testing, and treatment options among individuals and communities in the Soroti region.

Through community sensitization on comprehensive HIV prevention approaches, we have successfully generated demand for services such as Voluntary Medical Male Circumcision (VMMC), HIV self-testing kits, condoms, and Pre-exposure Prophylaxis (PrEP).

We employed a peer-to-peer mobilization strategy, utilizing individuals who previously benefited from these services to educate, influence, and motivate their peers to engage with available options.

This approach was particularly effective

for VMMC and among Adolescent Girls and Young Women (AGYW), promoting behavioral change and positive living among those infected, as well as among Key Populations (KPs).

Community mobilization efforts included leveraging satisfied users who shared their experiences with VMMC among their peers. We also highlighted the benefits of these services in high schools, vocational institutions, and uniformed groups. This strategy helped to address barriers to service uptake; some peers even accompanied their colleagues to access services, fostering trust and confidence in the VMMC program.

Additionally, AIC provided mentorship and ensured the distribution and supply of essential prevention and testing tools across various facilities and communities. This support extends specifically to Key Populations (KPs) to enhance HIV prevention efforts.



Condom demonstration and VMMC sensitization at Akampala landingsite Kaberamaido district



Condom demonstration by VMMC volunteer at Amuria Hospital

TOGETHER AGAINST GBV



A drama skit on GBV in a family setting during the 16 days of activism 2023 at Temele PS, Amuria District

Gender Based Violence (GBV) has continued to negatively impact on HIV prevention efforts in Soroti Region.

AIC participated in several activities in the fight against GBV in Soroti region. Among these included, the 16 Days of activism against GBV international campaign which is held yearly as an organizing strategy by individuals and organizations around the world to call for the prevention and elimination of violence against women and girls.

Stirring conversations around the different forms of GBV. This was aimed at motivating and triggering audiences to stand up against GBV in their communities and also seek timely post violence care.

AIC contributed towards sensitizing the communities through use of media houses (Radio Stations like Veritas Kyoga radio 91.5 FM) and other digital platforms such as X (Twitter) etc. as well as cultural institutions, that included the Kuman Chieftdom in Kalaki and Kaberamaido districts. These were aimed at prompting actionable solutions towards quality GBV service delivery among all involved stakeholders.

It was noted that the cumulative cases per district reported throughout Q1 necessitates urgent and continuous GBV interventions to mitigate the problem. Female gender continues to have the biggest burden when it comes to GBV.



AIC SBCC Advisor, Senior CDO and Incharge FCP Unit East Kyoga region at KVR sharing on GBV status in the region

COLLABORATIONS

It is vital to note that collaborations are pivotal in project success. AIC is working with different partners that include GoU, NGOs, Parastatals, CBOs, Academic and Research institutions as well as the private sector to achieve project goal and objectives.



TB PARTNERSHIP WORKSHOP

TB Constituency Engagement partnership workshop

On 30th May, AIC with STOP TB Partnership hosted the TB Constituency Engagement partnership. This was aimed at providing updates on the Global Fund's Grant Cycle 7 (GC7). Through the engagement, insights on current TB issues in the region, national TB response review, and discussions on refining the constituency's communication or advocacy plan were shared. The engagement brought together different partners in the region including the RCC Soroti City, CAO Soroti, City Mayor, Religious leaders, Cultural leaders TB survivors, PLWHIV among others . AIC ‘

ENGAGEMENT OF MEDIA TEAMS WITH UAC



Uganda AIDS Commission and AIDS Information Centre came together to empower journalists in Soroti and Bugisu regions with vital HIV prevention knowledge. The engagement aimed to equip the media teams with knowledge and information on how to report accurately and in a balanced manner.



AIC & UAC engaging media teams in Soroti

CONTINUOUS PROFESSIONAL DEVELOPMENT



SORP team together with Mbale and Jinja representatives at a training on Consolidated Guidelines for Prevention and Treatment of HIV/AIDS in Uganda

At AIC, we prioritize the growth and expertise of our team as they serve on the front lines of HIV/AIDS prevention, treatment, and advocacy. With the belief that learning never stops and our commitment to continuous professional development (CPD) at the heart of our vision “population free from all preventable health problems in Uganda and beyond”, providing CPD sessions is an integral part of our commitment. AIC staff are equipped with the latest knowledge, skills, and best practices in HIV care.

Teams have been trained and upskilled on different areas including: Consolidated ART guidelines 2022, Munoonye Campaign, PI/EID/PMTCT integration, GBV awareness, QI collaborative, Cervical Cancer Training, Report Writing Skills, Quality Improvement, HIV



Training program on EPI/EID/PMTCT integration by Ministry of Health and Baylor College of Medicine

prevention: HTS, VMMC, KP/PP, PrEP, Management of 3rd Line ARVs, IAC and VL considerations, HIV Prevention strategies for KPs, Change Management, MPox among others.

It is during the first year that our team also participated in a series of workshops and training sessions on innovative treatment options, holistic support for clients, and new strategies and tools to support the team in making greater impact in our communities.

Stay tuned for more updates as we continue our journey of learning and dedication to improving lives across the community!



Staff after a 6-day TOT workshop on the Start, Awareness, Support, Action (SASA) implementation Project

KNOWLEDGE MANAGEMENT

O'Dell, Essaides, and Ostro (1998) describe knowledge as “information in action.” Knowledge management is about using the brain power of an organization in a systematic and organized manner in order to achieve efficiencies, ensure competitive advantage, and spur innovation.

At AIC, we recognize that knowledge is one of our most powerful tools in the fight against HIV/AIDS. Our Knowledge Management (KM) initiatives ensure that valuable insights, data, and best practices are effectively captured, organized, shared, and efficiently applied across our organization to improve performance, decision-making, and innovation.

During the course of the year, we are pleased to announce that some of our staff were engaged in different conferences where knowledge sharing, innovations, and learnings were actively embraced. These events provided our team with valuable insights into the latest trends in HIV/AIDS prevention, treatment, and advocacy, as well as opportunities to exchange best practices with peers from around the world. By participating in these conferences, our staff have returned inspired and equipped with new strategies and ideas to enhance our programs and better serve our communities. Likewise, as AIC, this knowledge is always shared through our Continuous Professional Development (CPD)-Knowledge gained is knowledge empowered and knowledge shared is knowledge multiplied.

AIC Team at different 2024 conferences



Dr. Saadick Ssentongo at the INTEREST 2024 in Cotonou, Benin



Dr. Bonniface Orykot making presentation on VL suppression among pediatrics and adolescents at PEPFAR SUMMIT 2024.



Mr. Timothy Otaala presenting his research on Hospital Acquired Infections (HAIs) during the Annual Scientific Conference by Uganda Society for Health Sciences



Dr. Saadick Ssentongo, Dr. Ronald Opito, Mr. Timothy Otaala and Dr. Bonniface Orykot representing AIC at the PEPFAR SUMMIT 2024.

LIST OF ABSTRACTS AND MANUSCRIPTS SUBMITTED

- “Swallowing these drugs every day, you get tired”: a mixed-methods study to identify Barriers and facilitators to retention and HIV Viral Load suppression among the Adolescents living with HIV in TASO Mbale and TASO Soroti centers of excellence. Dr. Oryokot Bonniface
- Community-based TB screening using artificial intelligence (AI) software-aided chest X-ray improves Tuberculosis case finding in Katakwi district, Northeastern Uganda. Dr. Saadick Ssentongo
- Effectiveness of Community-Owned Resource Persons in Improving TB Case Finding in Teso Sub-Region, North Eastern Uganda. Dr. Saadick Ssentongo
- Using an Outreach Model of Service Delivery to Improve Uptake of Cervical Cancer Screening Among Women Living with HIV in Northeastern Uganda, 2021-2023. Dr. Saadick Ssentongo
- Decentralizing Uganda’s Early Infant Diagnosis (EID) Services to Improve the Efficiency of Community EID Point of Care (PoC) Testing in Teso Region. A Pilot Cross-Sectional Study. Timothy Otaala
- Improving the efficiency of community health workers' financial facilitation using mobile money services. Experience from Teso region in Eastern Uganda. Edward Okech
- Successful Integration of Recent HIV Infection Surveillance in Routine HIV Testing Services to Identify Risk Factors Among Newly Diagnosed HIV Individuals Aged 15 Years and Above in North-Eastern Uganda, 2020-2023. Dr. Saadick Ssentongo
- Potential Effects of Community-Based Mentor Mothers on HIV Viral Load Suppression and Infant Positivity in Southern Karamoja, Uganda. Dr. Saadick Ssentongo
- Prevalence of Human papillomavirus Among Female Sex Workers in Eastern Uganda: A Pilot Cross-Sectional Study. Dr. Opito Ronald
- Establishing a robust logistics and supply chain system to reach and sustain HIV epidemic control in the Teso region of Uganda. Isaac Esiru
- Improving viral load suppression and retention; A group ANC approach among Adolescent girls and young women living with HIV; A Group ANC approach in Uganda. Dr. Saadick Ssentongo
- Breaking barriers, empowering Adolescents and young girls living with HIV at AIDS informational Center, Kampala. Nakazibwe Hannah
- Maternal and Infant predictors of mother-to-child transmission among HIV-exposed infants in Northeastern Uganda, a Cross-Sectional study. (Manuscript under development). Dr. Saadick Ssentongo
- Using Peer to Peer Approach to Improve Voluntary medical male circumcision among a Traditionally non-circumcising nomadic population in North-Eastern Uganda, a cross-sectional Study. (Manuscript under development). S Sekiranda Peter
- Enhancing HIV Case Identification through Assisted Partner Notification: A Key Strategy for achieving UNAIDS 95-95-95 targets in Kampala. Nume Ivan
- Improving TB Case Detection Rates By Mobilizing Corps For Effective Door To Door TB Screening In Kisenyi Slum Kampala District. Muwonge Robert
- Mitigating the Burden of Substance Abuse on Tuberculosis Control in Urban Areas. Mayambala Dauda
- Enhancing Quality Health Systems Through Data Quality Assessment at AIDS Information Centre. Naigaga Mwamini
- The Impact of Community-Based Interventions on Tuberculosis (TB) Detection Rates in Kisenyi Slums Kampala District: A Case at AIDS Information Centre. Muwonge Robert
- Hospital-acquired infections of some multi-drug-resistant patients at a large referral hospital in eastern Uganda. Otaala Timothy
- Determining Hematologic, Immunologic Virologic, and Outcome characteristics of HIV and COVID-19 co-infected patients in Eastern Uganda. Otaala Timothy., etc.