Welcome to the new edition of the SRHR Umbrella newsletter! In this issue, we focus on economic empowerment. It has become clear with the COVID-19 pandemic that economic vulnerabilities impact health outcomes.

Out of pocket payments such as transport to facilities as well as food and basic necessities can hinder access to sexual and reproductive health and rights (SRHR) services and affect young people’s ability to live a healthy life. To address this, the SRHR Umbrella programme partners are integrating economic empowerment interventions that complement other interventions and contribute to the programme’s objectives. In this newsletter, you will hear about current projects using a Savings and Loan Association model and supporting young people to develop businesses, and about the journey of some successful young people. So read on to hear the stories of Pamelah, Machriss, the ‘Golden Stars’ and others!

The SRHR Umbrella team
Stepping into a new career to live positively

Youth Alive Uganda (YAU) implemented an innovative economic inclusion project under the SRHR Umbrella programme, with funding from the Swedish International Development Cooperation Agency (SIDA). The Economic Inclusion Program for Adolescent girls and young women and Key populations (EIPAK) project ran from October 2020 to June 2021 in the Mubende, Luwero, and Nakaseke districts.

Through this project, YAU provided economic strengthening services to groups of young people who are based at youth corners in health facilities, and drop-in centers that are partnering with them under the SRHR Umbrella programme.

Kasambya HC III is one of those health facilities, which is working with the Twebereremu (meaning ‘self-help’ in Luganda) Youth Group, one of five supported by the project in the Mubende district. Members of the group have improved their skills through training in areas including financial literacy and savings, governance, entrepreneurship, and vocational skills.

During immunisation and health visits, the health workers of Kasambya HC III always encourage mothers to find out their HIV status. Twenty-one-year-old Pamelah joined the Twebereremu Youth Group during an appointment to immunise her six-month-old baby. Although she already knew she was HIV positive, she had declined starting antiretroviral treatment (ART) while she was pregnant.

“I was aware of my situation, and exhibiting all the symptoms [of HIV], including weight loss, fatigue, a persistent sore throat, and a skin infection. I was supposed to be happy and excited as a first-time mother, but I wasn’t. My boyfriend and I had no idea about HIV, and he always assured me that taking antiretrovirals would drive me insane. Since we had young love, I always agreed and did what he said, so I didn’t take any medication or reach out for help.”

Once she joined the Tebereremu Youth Group, Pamelah was really motivated by the chance to learn tailoring skills. Through her newfound passion for sewing, she taught herself how to design and sew different outfits. As a self-employed tailor, Pamelah has turned this into a promising career. Thanks to support provided by the youth group she has good financial literacy, and she deposits at least 14,000 Ug shillings (about $4) savings weekly through the Village Savings and Loan Association.

At the Tebereremu Youth Group, she also meets other HIV-positive young mothers who have given her the courage to start ART treatment. With the peer support and life skills sessions offered there, she has grown in confidence and is keen to live a healthier and independent life.

Machriss’ inspiring journey through peer education

Womugisha Machriss shared his journey with us, from volunteer to paid employment and economic independence through peer education with Child Rights Empowerment and Development Organization (CEDO).

“I joined CEDO as a volunteer in November 2019 when I didn’t know about sexual and reproductive health and rights. I was given a training opportunity to become a peer educator for the SRHR Umbrella programme and was attached to Kigorobya health center IV, where I helped bridge gaps in service delivery for young people.

As a peer educator, I gained a lot of knowledge and skills on SRHR concerns, such as administering family planning; condom education and distribution; and outreach and referral methodologies for young people. I conducted health talks and sexuality information to spread SRHR information to both my fellow young people and adults.

Peer education made me famous in my community and I am even referred to as “doctor”, which helps me to reach many people. I’ve also gained the confidence to test myself for HIV without anyone pushing me to do so.
Machriss’ inspiring journey through peer education (continued)

Due to my genuine enthusiasm, hard work and the qualities I displayed – being result-oriented, consistent, accurate, and always empowering young people in the community – I was offered a position at CEDO as a Data Support Officer under the SRHR Umbrella programme. This was the greatest moment of my life because I was now fully employed, and this position has assisted me to progress my career much further than my expectations.”

Machriss also decided to save and invest his monthly income in pig farming to supplement his salary; this has been a great success. Now an employed and self-sufficient young man, he is grateful for the opportunities that CEDO gave him.

“They had faith in me, and I have never let them down. I compliment and thank CEDO for supporting me and becoming the best that I can be. I’ve never regretted my willingness to engage in peer education with CEDO. This has transformed me into a responsible, open-minded, knowledgeable, dependable, and skilled young gentleman.”

Economic empowerment for better mental health and SRHR

Following a previous project which identified a correlation between socio-economic vulnerability and mental health disorders amongst young people living with HIV, Alive Medical Services (AMS) is implementing a pilot focused on integrating economic empowerment, mental health, gender-based violence, sexual and reproductive health and rights (SRHR) and HIV. The aim is to reduce the vulnerability of participants through economic empowerment, enabling them to make informed decisions, negotiate for safer sex practices, improve their mental health as well as their retention in care and adherence to ART.

“Being able to meet at the facility on a weekly basis has enabled me to understand that there are services offered at the facility [other] than treatment. I am now able to refer my fellow peers to the facility to access services and to attend dialogues and health education”

Project participant

The project currently supports 100 beneficiaries with vocational training. To strengthen the integration of SRHR services and economic empowerment, the young people formed Young Village Saving Groups through which they meet weekly, save money and run sessions related to SRHR. “Being able to meet at the facility on a weekly basis has enabled me to understand that there are services offered at the facility [other] than treatment. I am now able to refer my fellow peers to the facility to access services and to attend dialogues and health education” said one participant.
Using a savings platform to reach boda boda riders and sex workers

Sex workers and young boda boda riders (motorbike taxis) tend to have a limited saving culture, few links to financial institutions and low access to SRHR services. With its SRHR Umbrella innovation project, Action for Community Development (ACODEV) uses the Youth Savings and Loans Associations (YSLA) approach to support 120 sex workers and 120 young boda boda riders who are organised in groups of 30 members.

In their YSLA groups, with the help of peer educators, they discuss health issues affecting them and how best to address them. These peer educators have received training in how to mobilise and enrol participants into groups of self-selected members. Peer educator Happy Godfrey was finding it a challenge to bring together young boda boda riders for SRHR sensitisation, but through YSLA groups, he can now reach them easily, and every week he discusses important SRHR topics with them such as HIV prevention or family planning.

“I know something on how to take care of my sexual life in addition to savings now” said a group member in Kamwenge.

About SRHR Umbrella

The Sexual and Reproductive Health and Rights Umbrella is a seven-year programme funded by the Swedish International Development Cooperation Agency (SIDA).

It is managed by Frontline AIDS and implemented by Ugandan NGOs across 15 districts, coordinated by Alive Medical Services (AMS).

Thank you

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We would also like to thank SIDA for their support.

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frontlineaids.org/our-work-includes/srhr-umbrella-grant/