“What if we all loved each other”
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Messge from the
Executive Director

Dear friends and family,
I congratulate you all for concluding yet another year with Alive Medical Services. I would like to appreciate my team upon the publication of this first issue of the AMS annual report, 2015. As we continue to grow, there is continuous need to share our achievements, challenges and prospects.

More than ever before, the need of holistic HIV care, prevention and support services must be at the forefront. We at AMS have realized growth in the number of clients we serve which only re-echoes the need to serve more diligently to the marginalized and poor people living with HIV.

AMS is very grateful to all 2015 partnerships that are the core reason that we are able to serve our clients with love and dignity. The year 2015 was a remarkable one for AMS. We registered great achievements in our overall 2015 goal of continuing to provide top quality comprehensive, dignified HIV prevention, care, treatment, and support services. AMS engaged in a number of activities that enabled us to continue providing a unique approach to HIV/AIDS treatment, which addresses the medical, social, and economic factors that affect people living with HIV and their families.

As of December 2015, AMS is serving over 13,000 clients with an average addition of 100 new clients each month. AMS has used its comprehensive care and community-based model to welcome, enroll, and retain a continually increasing number of clients. By embracing all clients with love and dignity, AMS has set a new standard for HIV care in Uganda.

The clinic continues to attain a client retention rate well above the national average and has successfully eliminated mother-to-child transmission of HIV/AIDS (since 2013 all mothers actively enrolled in AMS treatment have given birth to healthy, HIV negative babies). AMS is able to deliver the highest quality, comprehensive HIV care because of the essential support from all our partners.

We will continue to seek innovative and sustainable solutions to our clients’ health needs that deliver value for partnerships in order to pave way for more resource mobilization.

Dr. Pasquine Ogunsanya
Executive Director,
Alive Medical Services

www.amsuganda.org
On behalf of the Alive Medical Services Board of Directors, I take this opportunity to thank you for your unwavering support towards the poor and vulnerable clients we serve.

I also wish to present the AMS 2015 Annual Report which highlights our achievements throughout the year. In the same spirit, I wish to commend Dr. Pasquine and the entire AMS team for developing this publication.

As you may be aware, there have been some constraints on health service delivery due to economic disparity. The affluent who can afford health care are the ones that are catered for however the poor are the most affected as they cannot afford to pay for the simplest of drugs. However, on a brighter note, we have devised means to increase our resources in order for us to keep serving the community.

In 2015, we supported over 12,183 HIV-positive clients. They received holistic care, prevention, and psychosocial support. AMS engaged in a few activities that enabled us to continue providing a unique approach to HIV/AIDS treatment, which addresses the medical, social, and economic factors that affect people living with HIV and their families.

To enable us accomplish these, we focused on targeted activities, which were intended to;
(1) ease the daily struggles and risks associated with living with HIV,
(2) reduce the transmission, prevalence, and incidence of HIV, and
(3) diminish the morbidity and mortality of HIV/AIDS and TB.

I would like to thank AMS family with the support of our partners for achieving milestones in 2015 as reflected in this report.

We look forward to continued cooperation to enable us attain an AIDS-free generation.

Mr. Francis Gimara
Chairman Board of Directors
Alive Medical Services
Summary profile:
Serving with love and dignity for the past 9 years.
Average annual funded budget of serving over 13,000 clients annually.
Target area of Namuwongo
Implementing 4 projects with 70 AMS family staff.

Focus Areas:
Comprehensive HIV/AIDS Services including;
Maternal and Child Health
Family Planning
Sexual Reproductive Health Services
Nutrition
Safe water for drinking
Youth
Economic growth and empowerment
Capacity Building

Major Partners:
• Ministry of Health Uganda
• Keep a Child Alive (KCA)
• Centers for Disease Control (CDC) through Children’s AIDS Fund Uganda (CAFU) and Medical Access Uganda (MAU)
• Procter and Gamble (P&G)
• Rotary Australia World Community Services (RAWCS)
• Pink Umbrella Foundation (PUF)
• The DAK Foundation
• Woy Woy Rotary Club
• Kampala City Council Authority (KCCA)
• Makerere University College of Health Sciences

Other Partners:
• International Tuberculosis Union through the Ministry of Health
• 100 Good Deeds
• Justice Centres Uganda
• Watoto Childcare Ministries (Living Hope Ministries and Watoto villages)
• Hope for Children UK and Uganda
• School for Life Foundation Limited
• Banunule Primary School for Orphans
• Program for Accessible Communication & Education (PACE)
• Ray of Hope
• Kiwuliriza Child Development Centre
• Uganda Health Marketing Group (UHMG)
• Uganda Protestant Medical Bureau

Individual Partners
• Almudena Ruiz-Gimenez
• Claude Kelly
• Ron Yulster
• Mary Fisher
• Sandy Mac Rodgers

We are grateful to past partners for their support:
• Rotary Club of Kenthurst
• Stephen Lewis Foundation, Canada through KCA
• Letshego Finance House
• Standard Chartered Bank
• Baylor Children’s Hospital, Kampala
• Kristin Jeppesen
• Evelyn Karungi & Family
Vision
A world in which those in need of medical care have access to state-of-the-art medical services provided with love and dignity.

Mission
AMS exists to provide and model comprehensive prevention, care, treatment and support of HIV and other health needs for its clientele using a holistic approach incorporating education, training and research, to empower them to live a quality life.

Core Values
Client Focus
Integrity
Love and Dignity
Innovativeness
Teamwork
Excellence
A live Medical Services is located in Namuwongo, Makindye division, one of the most populated suburbs in Kampala, which is located in a low-lying area along railroad tracks, with temporary housing structures along each side.

The residents in the slum areas of Namuwongo have very limited access to clean water and sanitation and waterborne diseases continue to be a major threat to the wellbeing of children and their families, especially those living with HIV.

AMS stands as a beacon of hope for the local community and far beyond, with some patients traveling far to receive quality, comprehensive care, always delivered with dignity. The clinic is deeply rooted in the community and has gained their trust because of the love and respect the staff shows to each person that comes through the doors.

Since 2007, AMS has quickly grown to be one of Kampala’s highest volume HIV and antiretroviral therapy (ART) clinics, with over 13,000 HIV clients currently enrolled. AMS operates 24 hours a day, 7 days a week, delivering high quality, and comprehensive HIV care, integrated with economic and social empowerment activities. The clinic offers a variety of services to the community that addresses both immediate and long term needs.

Keep a Child Alive brings attention to the already 30 million people that have been killed by AIDS in sub-Saharan Africa and the millions more that are threatened and orphaned by the disease. Currently there are 33.3 million people living with HIV/AIDS, including 2.3 million children under the age of 15. Despite AIDS being a preventable and treatable disease, 2.9 million people died from AIDS related causes last year, including 380,000 children under the age of 15—the equivalent of one child dying per minute.

Keep a Child Alive currently provides funding to 10 clinical and orphan care sites in 5 countries: India, Kenya, Rwanda, Uganda and South Africa with past funding to additional projects in Ethiopia, Mali, India, Kenya, South Africa and Zimbabwe.

With KCA funding, these projects have been successfully scaled to new levels of service and self-sustainability within their communities.
HIV Medical Care and Treatment
Provision of free anti-retroviral (ARV) treatment to 6,655 clients:

In 2015, AMS has provided voluntary HIV counseling and testing for 6,668 of which 6,648 were new clients.

AMS provides health services to 46,000 adults, youth, and children, and comprehensive HIV/AIDS care, treatment, and support to over 13,000 HIV-positive beneficiaries, including provision of antiretroviral (ARV) treatment and treatment of opportunistic infections."

In 2015, all 12,183 HIV positive clients actively receiving care received prompt, appropriate, and unique case management, full clinical tests to provide ongoing monitoring of their clinical condition and to measure patients’ response to first-line treatment, and general care to support well-being, including targeted preventative care and treatment for opportunistic infections such as tuberculosis, malaria, and other bacterial, viral, fungal, and skin diseases.

Voluntary HIV testing and Counseling

6,648
Clients AMS has provided HIV counselling and testing

817
New HIV + clients enrolled into direct treatment & other comprehensive services.

1,009
people received HIV positive results

100%
people that received HIV positive results were counseled and linked to care

In 2015, AMS has provided voluntary HIV counseling and testing for 6,668 of which 6,648 were new clients.

Of those tested, 1009 people received HIV positive results and 100% of these were counseled about treatment options and linked to care. During this period, AMS has enrolled 817 new HIV positive clients into direct treatment and other comprehensive services.
“State-of-the-art Laboratory Services to support proper management of patients”
AMS’s laboratory tests provide evidence-based diagnosis and help monitor and evaluate patients’ reaction to treatment while helping provide top quality medical treatment. In 2015, state-of-the-art laboratory services conducted 55,783 laboratory tests, performing an average of 4,648 per month.

These tests include: HIV, CD4 count, full blood count, viral load, renal, liver, serum, malaria, and STI tests. AMS continues to carry out Gene X-Pert tests as well as sputum induction tests for the diagnosis of tuberculosis. AMS now performs 90% of all laboratory tests needed, and utilize other expert Labs like the Ministry of Health central laboratory for the remaining laboratory needs such as the DNA-PCR.

AMS performs Viral Load tests for all eligible clients (those who have been on ART for six or more months) to assess the effectiveness of treatment. Tests are followed up with the required, intensive adherence counseling for patients that have detectable and high viral loads. Currently AMS has increased the number of Viral Load tests to over 60% of patients per year.

**Equipment donated by**
**Pink umbrella foundation**
- 1 ultrasound scanner, 5 foetal heart dopplers
- 4 Oxygen Concentrators:

**Rotary Australia World Community Services (RAWCS)’s donation**
 Oxygen concentrators allow AMS to save the lives of patients with respiratory diseases. Providing this care at the clinic allows AMS to reduce the hassle and expense of referring patients to other clinics.

4 Handheld Pulse Oximeters and 10 Laboratory Adult Finger Oximeters - Every clinical room has been furnished with pulse and finger oximeters for quickly and accurately monitoring the oxygen saturation and pulse rate of all patients.

7 M3A Vital Signs Monitors and 7 iM8B Patient Monitors- New vital signs monitors improve the clinic’s efficiency and quality of care.
Given the clinic’s large and increasing number of patients, service efficiency is vital in reducing patients’ wait time. A shorter wait time ensures quality of care and increases patient retention.

AMS provides top-quality, confidential counseling services including individual pre- and post-test, adherence, couples’, crisis, EMTCT-specific, and ongoing counseling. AMS’ counseling staff has worked closely with the Monitoring and Evaluation Department to provide follow up on all missed appointments at one week, one month, and three month intervals.

Additional unique psychosocial support services are provided through AMS’ income-generation groups. Hearing Aids and Eye Glasses - AMS provides complimentary hearing aids and eye glasses to patients and community members in need.

Psychosocial support

A full range of psychosocial support services, including encouragement and support to bolster retention in care and adherence to treatment

AMS provides top-quality, confidential counseling services including individual pre- and post-test, adherence, couples’, crisis, EMTCT-specific, and ongoing counseling.

AMS counseling services contribute to increasing patients’ trust and retention in care. In order to intensify retention and adherence, AMS has employed two staff members whose main job is to follow up with clients daily through methods such as phone calls and home visits.

AMS Peer Educators also provide peer support services and home visits to further follow up on missed appointments.
Early Infant Diagnosis (EID) and DNA-PCR:

ALL of the babies born to women enrolled in AMS’ EMTCT program have received a negative DNA-PCR final result, and were confirmed HIV-negative after the cessation of breastfeeding. AMS has successfully eliminated mother-to-child transmission of HIV for all mothers and infants actively enrolled in AMS treatment.

AMS offers DNA-PCR testing for EID to all babies born to women enrolled in AMS’ Elimination of Mother to Child Transmission (EMTCT) program as well as other women from the community.

In the last half of 2015 this included testing 209 babies, with none testing positive.

Prevention of Mother-to-Child Transmission (PMTCT):

A complete PMTCT program, including option B+, is available to all pregnant HIV-positive women enrolled in AMS services.

To date, all babies whose mothers are enrolled in AMS’ care and have accessed PMTCT services have successfully received a negative final HIV Test.

Antenatal Care (ANC):

AMS has provided Antenatal Care (ANC) services to 59 new mothers and 241 total mothers in 2015. In addition to traditional ANC services, AMS provides intermittent preventative therapy for malaria for pregnant women, and all mothers seen in the last four months have received an insecticide treated mosquito net.

AMS has created an active referral system by partnering with nearby hospitals to link all pregnant women with safe delivery sites. AMS also prepares mothers for delivery during their ANC visits at the clinic.

Immunizations and well-baby visits:

AMS has immunized 480 babies over the year against eight diseases: tuberculosis, polio, diphtheria, tetanus, whooping cough, hepatitis B, haemophilus influenzae type B, and measles.

“Know Your Child’s Status” Campaign:

AMS has promoted its “Know Your Child’s Status” campaign at every point of service by asking parents/guardians about their children’s status and discussing the importance of testing, monitoring, and treatment. This campaign has been used to remind parents and guardians to bring their children to the clinic for routine preventative services, testing, and treatment.

AMS clinical staff has worked closely with the M&E department to use patient cards and the electronic data system to actively track the number and status of all children in patients’ families. If a child’s status is not known then staff encourages the guardians/parents to bring their children in for HIV testing.
Family Planning and Reproductive Health Services

Throughout Uganda, access to family planning methods continues to be low, with only 23.7% of women using any method. However, AMS provides all clients with access to a wide range of short-term and long-term family planning information and methods, in an effort to increase uptake.

Only 23.7% of women using any method.

In the past year, AMS has provided family planning methods to 1533 clients, most of whom are HIV-positive. AMS uses these services to further reduce maternal, neonatal, and young child mortality due to HIV/AIDS and other diseases. Additionally, AMS' provision of family planning and reproductive health services has allowed AMS to contribute towards the achievement of Poverty Eradication Action Plan targets and Millennium Development Goals.

During the past six months AMS staff has served:
03 Contraceptive pill users
178 Injectable users
1150 Condom users
170 Implant users
32 IUD users
AMS organizes a comprehensive and integrated program for young people living with HIV. AMS’ youth program is evidence-based and strongly considers the participants’ feedback, focusing on prevention, increasing early diagnosis, youth treatment adherence, and retention.

AMS supports the Victors’ Club, its youth peer-support group. The Victors’ Club provides a sense of community and solidarity to youth living with HIV while providing mentorship and advice on navigating treatment and other difficulties. The Victors’ Club and Youth Programming served 1,154 HIV-positive youth enrolled in care this year, seeing a tremendous growth. In the last half of the year, the Victors’ Club participated in the Microsoft filming and also in the Code for good 2015.

The Victors’ Club members have shared their stories and experiences with a larger audience by making documentaries and engaging in Skype calls and Google Hangouts with youth from Rwanda, South Africa, Kenya, and India.
In 2015 AMS organized ___ quarterly Children/Youth Days, which provide special unique activities and psychosocial services for all of our HIV-infected children and youth. These events have benefitted 442 children and youth as well as _ caretakers (guardians and parents).

Activities include singing, dancing, word games/quizzes, drama and acting, competitions, and sexual education discussions. These activities are differentiated based on age and sometimes gender as well, to offer tailored care.

**AMS’ youth program has given particular focus to the following areas:**

- Increasing youth-specific services by collecting and incorporating youths’ feedback on services, providing training for youth leaders, and providing staff trainings on unique youth considerations
- Engaging and empowering more youth by increasing youth involvement

in AMS’ programs through maintaining strong relationships with youth leaders from the Victors’ Club, recruiting, training, and mentoring youth peer educators, and participating at least on a quarterly basis in the KCA youth Google Hangouts

- Strengthening collaborations by tracking and linking youth to other local youth-focused services and learning best practices from them, participating in collaborative stakeholder meetings to share goals, hosting official visitors from the Ministry of Health and sharing AMS’ best practices, recruiting a Victors’ Club leadership/advisory board, and educating other organizations about the special needs and considerations for youths living with and/or affected by HIV
- Harnessing social media and advocacy by training youth advocates on skills and effective use of social media, especially for advocacy efforts and idea exchanges.
AMS provides weekly community outreaches and home-based care visits, which contribute to increasing AMS’ retention rates. These services that include follow up, health education, sensitization, and mobilization are provided by the AMS core community health workers, medical students, 50 peer educators, who are supervised by AMS clinical staff. In 2015, at least 24 visits were done.

In the last half of 2015, AMS has provided two satellite outreaches at the Kapeeka community and a school. AMS uses a community-based approach in serving the Kapeeka community and this has been growing. AMS was also able to donate re-usable sanitary pads to the Kapeeka school girls, some of whom are our clients.

Additionally, AMS has served four satellite outreaches in disadvantaged communities in 2015.

**Health Talks**

AMS uses routine health talks to educate and inform patients about the advantages associated with care retention, treatment adherence, and other general daily health/well-being tips. These health talks help boost patients’ healthy habits at home while improving patient retention rates. AMS also actively involves the clients in the health talks.

**Peer support groups, pro bono legal services**

AMS continued its partnership with Justice Centre Uganda (JCU) which provides pro-bono legal services to AMS clients. The program is overseen by the AMS Counseling Department which screens cases and then connects qualifying cases on to the appropriate legal support. In addition to case management, JCU has increased patients’ awareness of their legal rights through legal sensitization talks at the clinic. This service has provided support to our vulnerable clients, and has so far provided legal assistance to 18 cases (4 have been completed and 10 are still pending).

AMS has also begun coordinating a new Peer Networking Group that provides HIV-positive adult clients an opportunity to meet in a social setting and network, make connections, and start new relationships. Coordinated by the Counseling Department, this program provides people living with HIV a low-stigma setting in which to socialize and build relationships.
AMS provided Ultrasound Scanner services to a total of 564 clients in 2015, allowing staff to monitor the growth of unborn children, check for abnormalities and other troubles. Using this, AMS diagnosed problems of the liver, gallbladder, pancreas, thyroid gland, lymph nodes, ovaries, testes, kidneys, bladder, and breasts.

Foetal Heart Dopplers:

The foetal heart dopplers help provide care for the increasing number of pregnant, HIV-positive, female clients.

The use of the foetal heart dopplers allows clinicians to monitor the unborn babies’ health and provides expectant mothers the joy and motivation of hearing their baby’s heartbeat.
Over the past year, AMS has provided essential food supplies to 1,400 food insecure clients on a monthly basis on AMS “Food Days.”
Over the past year, AMS has provided essential food supplies to 1,400 food insecure clients on a monthly basis on AMS “Food Days.” Food assistance is crucial in supporting the overall well-being of HIV-positive patients and their families because many patients’ ability to work and support themselves has been compromised by poor health and opportunistic infections. Food supplements support patients’ health by maintaining their strength and assisting the absorption of medicines.

Food Days additionally act as another point of entry into services. AMS staff complements Food Days with health talks about proper nutrition and methods for hygienic food preparation. On Food Days, each recipient receives a parcel including:
- Beans - 7 kg
- Rice - 7 kg
- Sugar - 2 kg

In addition to food provision, AMS through KCA with the support of Development in Gardening helped AMS clients to form gardening groups. These groups identify available land and receive agricultural instruction and start-up assistance from trained professionals. By the end of 2015, the AMS gardening program has enrolled and benefitted 128 clients in 10 different gardening groups. With these gardens, beneficiaries produce nutritious fruits and vegetables for themselves and sell excess produce to generate income.

Safe drinking water

AMS has continued to partner with the P&G Safe Drinking Water Program and over the past year has provided 6,512 patients and their families with water purification supplies. With the Safe Drinking Water Program, patients’ general well-being is supported and the risk of opportunistic waterborne infections like chronic diarrhea, is reduced. This program is particularly important for AMS’ patients because access to clean water is very limited in Namuwongo, where most of AMS’ patients reside.

Each patient that received water purification supplies also received detailed instructions on how to properly use the product. AMS staff also provides water purification demonstrations during nutrition distribution days and AMS peer educators provide additional support during home visits.
Over the past year, AMS has continued providing support for income-generating activities, supporting 30 groups made of 374 participants. AMS directly and indirectly provides skills, training, and start-up capital for these groups. AMS’ income-generating projects include those in animal husbandry, African jewelry making, handmade craft production, market vending and produce sales, savings and credit, gardening, drama performances, and motorcycle transportation (Boda boda) services.

**Kapeeka Gardening Group:**
AMS has continued supporting HIV-positive clients in learning and developing gardening skills, which allow HIV positive clients to grow fresh, nutritious produce for themselves and to sell excess produce for a profit. For some clients the produce sales have already begun to add substantial profits to their income. For example, the Kapeeka group registered sales of fresh produce of about USD 310.

**Kwagalana Group:**
AMS has continued to partner with the 100 Good Deeds Project to support the Kwagalana group, a collection of women that make 100 Good Deeds bracelets for profit. The group has developed fine bracelet making skills and has successfully fulfilled 20 orders and made a total of about USD 24,000. The Kwagalana group is one of the best performing groups in the 100 Good Deeds program and the women are expected to save at least 10% of every sale made. The ladies in the group have increased their financial support for one another by creating a revolving fund, allowing them to mobilize more capital amongst themselves and consequently make larger investments.

**Kisakye Group:**
In February 2015, AMS began supporting Kisakye, a women’s income generating group that sews reusable sanitary pad kits, called Super Kits, which are sold in the local community or donated to clients and school girls in need. In the last six months of the program the Rotary Club of WoyWoy, Australia made a donation that enable the group to successfully completed a production of 270 kits. These kits fulfill a dual purpose by economically empowering the tailors and also helping impoverished Ugandan women and school girls to continue attending work and school during their menstruation cycle. About half of them have already been donated to girls in rural schools.
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