



## 2017 ANNUAL REPORT

**10 Years of HIV Providing Free Comprehensive Care**

# 2017 ANNUAL REPORT AT A GLANCE

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In the past 10 years, AMS has reached over 566,820 beneficiaries from areas of Kampala, Nakaseke, Luwero, Mpigi, Mukono, Masaka, Lira, and Mityana districts, while providing tailored services a total of 24,100 most at risk populations that include orphans and vulnerable children, women and girls, fisher folk and key populations.

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This report details our work throughout 2017. It includes:

Message from the Chairman Board of Directors

Letter from the Executive Director

About AMS

AMS' Impact in 2017

Financial Report

Our Team highlights

Our Partners highlights

Contacts highlights

## OUR VISION

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A world in which those in need of medical care have access to state-of-the-art medical services provided with love and dignity

## OUR MISSION

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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, and incorporating education, training, and research to empower them to live a quality life.

## OUR VALUES

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Client Focus  
Integrity  
Love and dignity  
Innovativeness  
Teamwork  
Excellence



## A MESSAGE FROM THE CHAIRMAN BOARD OF DIRECTORS

The year 2017 was a period of reflection, adaptation, and progression for Alive Medical Services (AMS). We continued to streamline our role as the Board of Directors by actively supporting the resource mobilization function to raise funds locally alongside providing strategy and oversight.

After ten years, AMS continues to perform a commendable job of providing free comprehensive HIV care and services to people living with HIV. In the past decade, AMS has reached 566,820 beneficiaries from areas of Kampala, Nakaseke, Luwero, Mpigi, Mukono, Masaka, Lira, and Mityana districts while working in partnership with the Ministry of Health in Uganda among other organisations.

As we continue serving our clients, we recognize that the global challenge of economic uncertainty has directly affected our funding. Therefore, we have innovatively used our ten-year mark to diversify our funding locally and internationally as well. In the past, AMS has largely depended on international funding for its programmatic areas and we think it is time to get the country men more involved in creating an HIV-free generation through Ugandans supporting fellow Ugandans.

Nevertheless, in our tenth year of providing free comprehensive HIV care and services, we have a lot to celebrate and share with you. In collaboration with our partners and donors like Keep a Child Alive (KCA), Pink Umbrella Foundation (PUF), the President's Emergency Plan for AIDS Relief (PEPFAR) through the Centers for Disease Control and Prevention (CDC), among other organisations, I am happy to report that in 2017 alone, we have reached 13,514 clients.

On behalf of the Board of Directors, I want to express my gratitude to AMS' donors, partners and friends for your unwavering support. I would also like to congratulate AMS' management and staff for the innovative and relentless drive towards creating a world of love and dignity through provision of state-of-the-art medical services.

Yours faithfully,

Francis Gimara  
Chairman Board of Directors  
Alive Medical Services



## A LETTER FROM THE EXECUTIVE DIRECTOR

Dear Friends and Family,

I am glad to present the third issue of the Alive Medical Services annual report. This past year, we celebrated 10 years of serving people living with and affected by HIV in Uganda. In 2007, we embarked on a journey of fighting HIV/AIDS to impact the lives of people living with HIV and eventually end AIDS. Back then, we began with only 6 patients who have grown into more than 13,000 clients currently enrolled in care. We are very excited to share with you some of our milestones in this issue and share with you the vision and next steps as we continue providing free comprehensive HIV/AIDS prevention, care, treatment, and support to our clients with love and dignity.

The 10-year milestone is not something we take for granted. So, we celebrated in the best way possible with a fundraising gala on the 7th of July 2017 at the Kampala Serena Hotel. I am grateful to the over four hundred guests who came to celebrate with AMS on that wonderful event.

In addition to turning 10, the past year has presented AMS with various opportunities of growth like representation at the fourth National Health Care Quality Improvement Conference where four members of our staff represented us, a courtesy visit from the Centers of Disease Control in Uganda, representation and participation in the Paediatric Adolescent Treatment Africa (PATA) 13th Summit in Johannesburg, South Africa by two staff members; and taking part in Procter and Gamble's twelve years of providing 12 billion litres of safe and clean water for drinking event, among many others that have been highlighted in this publication.

In the past 10 years, we have achieved a lot of success backed by a very competitive model of providing free holistic HIV care, and we envision scaling it up as we work with our partners towards achieving the UNAIDS 90-90-90 goal and eliminating HIV for good. AMS is excited to share highlights of the past year and very grateful to our partners, sponsors, friends, and mentors for all the support that makes this and more possible.

With Love and gratitude,

Dr Pasquine Ogunsanya  
Executive Director  
Alive Medical Services

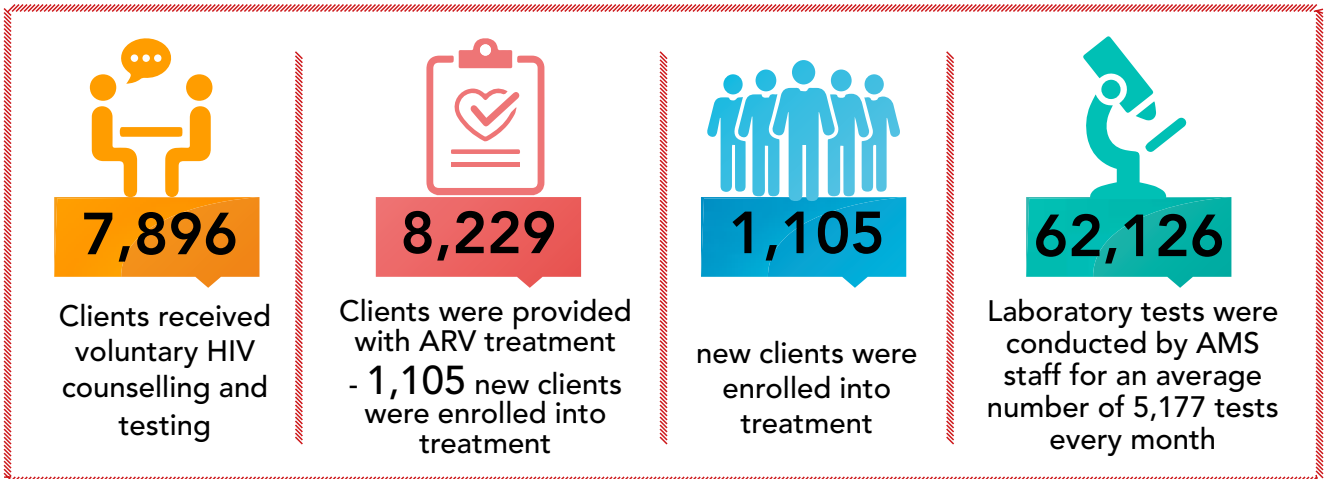


"I used to think: how am I going to do this? I used to be scared. But I thank God for Alive. Now I know exactly how to care for my child."

• Irene, an HIV-negative client who adopted an HIV-positive child

# When Alive Medical Services **Began,**

We started with just six clients. Today, we have become one of the highest-volume HIV clinics in Uganda. Twenty-four hours a day, seven days a week, AMS staff serve clients with love and dignity, operating under the belief that every person deserves to live a quality life. This year was no different: AMS served a total of 13,514 clients. Of those patients, we provided free antiretroviral treatment to 3,283 males, 4,946 females, 796 youths aged 10-24 years old, and 681 children aged 0-14 years old.



Throughout the year, we also worked to support clients' retention in care and adherence to treatment. In 2017, two new volunteers joined our follow-up team, strengthening our services for patients who missed their appointments. Once clients are registered in our system, our follow-up team, peer educators, and community health workers work together to ensure they continue their treatment and receive the support they require.

“Because of AMS, I have high hopes for the future. HIV and my other challenges – cannot bring me down.” –

- *Esther, a client at AMS*



# MATERNAL AND CHILD HEALTH

Since 2013, we have successfully eliminated mother-to-child transmission of HIV, helping HIV-positive mothers give birth to 580 HIV-negative babies. This past year, we did the same – by providing comprehensive antenatal and postnatal care services, AMS discharged 138 babies from our prevention of mother-to-child transmission of HIV program, all of whom are HIV negative.

We continued to streamline the appointments of mothers and their babies, and actively implemented the “Know Your Child’s Status” campaign throughout the year. Through this campaign, we promoted discussions around children’s health at every point of service, asking parents and guardians about their children’s status and discussing the importance of testing and treatment.

**INFOGRAPHIC:** AMS held two children’s days and three youth days, and at these events, we engaged 7,585 caregivers, providing them with critical information for supporting their HIV-positive children. 491 mothers received antenatal care services. DNA-PCR was provided to 485 babies

In addition, AMS provided nearly 360 pregnant women with lab tests; we also prepared 330 women for their births, and referred them to quality, affordable health care centres or hospitals for their deliveries. After each of these women gave birth, we followed up with them and continued providing woman and baby care

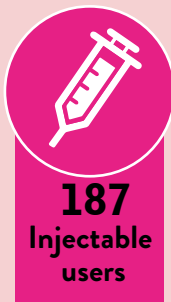




## FAMILY PLANNING AND REPRODUCTIVE HEALTH

On average, Ugandan women give birth to nearly two more children than they had originally planned for. This difference is one of the highest cases of excess fertility in Sub-Saharan Africa, and is often a result of a lack of access to family planning services, a gap in information and knowledge around such services, and misperceptions surrounding family planning use and health issues.

To tackle such barriers, AMS provides family planning services entirely free of charge. This past year, we served over 2,553 clients with different family planning methods, including:





# MARY'S STORY



In 2013, Mary came to Alive Medical Services for a check-up. She had a fever and was hoping to see a doctor, receive some medicine, and head back home. Mary thought she only had a passing illness, but just to be safe, she decided to be tested for a number of viruses anyway.

When the doctor returned with Mary's results, he told her something she would never have imagined: Mary, though married for years to the same person, was HIV positive.

"I was in such a bad state," Mary said. "I just came into the clinic to get checked for a fever, and then I found out I had HIV."

Terrified her husband would blame her for the illness, she didn't say a thing until he developed a rash on his arms. Mary insisted he get tested for HIV, and when her husband came home with a positive diagnosis, he told her the truth. He had cheated on Mary with an HIV positive woman.

At that point, Mary found out she was pregnant with their third child, the first to be conceived after Mary realized her positive diagnosis. She hurried to AMS as soon as she found out she was expecting.

"The doctors helped me maintain good adherence throughout the pregnancy, following up with me as the months went by," Mary said.

Within months, Mary's husband left her for someone else. Regardless of his repeated deceit, Mary stayed strong. She kept up with her medication, came to the clinic for frequent check-ups, and focused on delivering a healthy, HIV negative baby.

After nine months of pre-natal care at AMS, and a year-and-a-half of check-ups post-birth, AMS doctors confirmed Mary's daughter - Lillian - was HIV negative.

Today, Lillian is nearly 2 years old. Mary is in good health, and continues to come to AMS for her antiretroviral medication and regular check-ins. In addition, her family receives treatment of other infections - opportunistic or otherwise - free of charge.

"At first, I was so worried about having HIV," Mary said. "But today, I'm okay. I've accepted it. And I'm well aware that if I take my medication well, I'll continue to live."



## NUTRITION AND SAFE WATER

Recognizing the critical role nutrition plays for HIV-positive individuals, AMS has integrated nutritional services into our treatment plan since the clinic's launch. We assess our clients at every appointment, using the mid-upper arm circumference and body mass index measurements, along with z-scores for paediatric patients.

AMS has maintained 18 gardening clubs throughout Uganda, all of which are made up of HIV-positive patients. We empower the members of these clubs with gardening and skills, growing nutritious food, and marketing their produce to the local communities. This past year, 497 clients engaged in these gardening groups, bringing in additional income for themselves and their families and increasing their intake of fresh produce. The members of these gardening groups made a cumulative \$1,550 USD from the sale of their produce.

AMS also provided water packets to the 10,346 clients who have been enrolled into our safe drinking water program. With an average of six family members benefitting from each "safe water kit," AMS' water program has touched over 62,000 people since its beginnings, illustrating its vital importance for families and communities as a whole.







## COMMUNITY OUTREACH

In line with our target goals for 2017, our community health workers and peer educators continued to carry out home visits weekly. These visits include both routine health education sessions and check-ups on clients who have missed their appointments. In addition, we held satellite outreaches in six communities throughout the country, and served over 780 people.

We carried out four outreaches for children, including:



An outreach conducted in partnership with Action for Africa, which reached approximately **350** girls and boys in **Nakuwadde**, an area in the Wakiso District of Central Uganda.



An outreach in the Kampala slum of Kisenyi, which tested over **300** children through the Christmas in July Project. An outreach for approximately **60** children from the Kiwuliriza School in Kampala.



An outreach conducted in partnership with Children of Uganda for approximately **60** orphans and vulnerable children.

In total, our follow-up team checked up on over 7,360 clients who missed their appointments. This past year, our peer educators held routine education and adherence outreaches in our clients' communities, tracking clients whose health status is decreasing and following up on those who have missed appointments; they also conducted 513 home visits. Our follow-up team also sends appointment reminders via text, so patients are alerted of their scheduled clinic dates the day before they are due for a visit.

Strengthening differentiated service delivery models by implementing new Ministry of Health guidelines to stable and unstable clients, conducting 513 home visits through Community Health Workers, Training 50 new peer educators, increasing the total number of peer educators to 185



## PSYCHOSOCIAL SUPPORT

This past year, our counsellors continued providing psychosocial support to clients before testing, after diagnosis, and throughout patients' course of treatment.

We offered pre- and post-test counselling, intensive adherence counseling, couples' counseling, crisis counseling, ongoing general counseling, and counseling related to elimination of mother-to-child transmission of HIV to 11,370 individuals, many of whom relied on our counselors when they had no one left to turn to.

Our counselors not only provided psychosocial support, but helped clients access legal support – by linking clients in need to Justice Centres Uganda, a local legal aid organization that provides lawyers to vulnerable individuals free of charge – we have helped 23 clients access legal support to improve their lives.



# ROBERT'S STORY



When Robert's company started withholding salaries from their employees, he tried his best to keep faith.

"We're going through a difficult time, his boss said, "We'll get you your money soon."

Robert waited. Month after month, his boss paid him the bare minimum – 30,000 shillings here (\$8 USD), 20,000 shillings there (\$6 USD), always promising Robert's full salary was on the way. Robert continued to work, hoping he could believe his employer's repeated promises.

Ten months later, nothing – and everything – had changed. Unable to secure his agreed-upon salary, Robert could no longer afford to pay rent. Robert's landlord threw his family out on the street, and their only option was to move in with a friend. For months, Robert, his wife and their three children crowded into the corner of a shared one bedroom flat. His wife, an HIV-positive client at AMS, began drinking excessively as the stress mounted. And though Robert contacted a lawyer to help him secure his salary, the corruption continued – his lawyer dodged his calls and refused to help. Robert's company had bribed him, too.

"I didn't take one day of leave for four years," Robert said. "We had nothing to eat. Nothing to survive. My employer refused to pay, and I looked for any job I could find."

With his wife's health declining, Robert began taking full control of her and their daughter's HIV treatment. He picked up their medication at AMS whenever they needed it, and on one of those trips, Robert reached out to Alice, a staff member in AMS' counselling department.

"She told me: don't surrender," Robert said. "Have hope. It's your money and you deserve to get it in full. We will fight for it."

Alice connected Robert to Justice Centres Uganda, a legal aid centre that helps Uganda's most vulnerable citizens access legal services. For years, AMS has sustained a partnership with Justice Centres Uganda, which allows our counsellors to link clients to a lawyer free of charge.

Robert needed to get what was rightfully his to save both himself and his family, and Justice Centres Uganda did just that. After Robert's new lawyer got involved, his employer finally surrendered a significant amount of the money owed to him. With that money, Robert bought a half acre of land, upon which he plans to build a house and start a pig farm.

"We are doing better now than ever before," Robert said. "Alice encouraged me to keep fighting for my rights. I'm so grateful that I did."



## YOUTH PROGRAM

This year, AMS trained thirty Youth Peer Educators, including several Peer Educators from Key Populations and AMS increased their engagement in our programming. The president of Victor's Club is part of AMS staff, and three other Youth Peer Educators work as volunteers in the Children and Youth Department. In addition, our Youth Peer Educators:

- offer peer support to children and youth
- have reduced the waiting time for children and youth by assisting with triage in the Children and Youth department
- act as role models for the other members of Victor's Club
- assist with the planning and facilitation of Youth and Children's Days



We involved **1,300** youth in our programming throughout the year.



This past year, we enrolled **163** more youth into our care.



Youth days were attended by **950** young clients.

Our staff continue to synchronize the youth appointment days according to age, having set aside Friday as our 'youth and children' appointment day. We ensure that all services they may require are available at that time, including family planning. In 2017, AMS also built an additional separate counselling room to ensure greater privacy and deeper sharing during sessions.



# COMMUNITY MUSIC

This past year, Alive Medical Services partnered with Musicians Without Borders to implement a 10-month long youth music program, Community Music Community Health. Through this project, trained music therapists and local musicians used music to address the psychosocial support needs of young people and children living with HIV.

Importantly, the program also taught 29 young people to become music trainers themselves. Youth were equipped with knowledge of community music approaches, including facilitation through vocal, percussion, and song-writing techniques, allowing participants to deliver their own community music events at the clinic and in their communities. Over the course of the project, the trained participants conducted 30 music therapy sessions for other clients.

The program included:

**29** Community Music Leaders Trained

- 16 Saturday morning Training Sessions
- 16 Saturday afternoon Therapy Sessions

**30** Weekday Music Therapy Sessions

- For all child and youth clients at the clinic on Food Days and Children and Youth Days

**4** Week-long Music Leaders Trainings

- Intensive training for the 29 Community Music Leaders

**3** Music and Health Trainings

- 36 AMS staff members trained in Music and Health





# INCOME-GENERATING GROUPS

## **Bulamu Kwefaako**

support group exists to bring the services of AMS closer to their own community. Members conduct home visits, counsel HIV-positive individuals, and raise awareness on HIV and opportunistic infections.

## **Kwagalana**

is an income-generating group where women gather to make beaded bracelets. By selling bracelets to the local community, women are boosting their income and providing each other with support while they work.

In 2017, AMS formed a new partnership with Finca Bank. On our September Youth Day, Finca representatives held financial literacy training to 120 AMS clients aged 15-24

## **Tweyambe**

is a client-led support and finance group made of 150 men, women, and children. Members combine their funds into a rotating savings scheme, which provides loans to members in need of additional income.

## **Kisakye group**

recruited an additional member in 2017 and created 200 reusable sanitary pad "super kits." Each super kit contains four cotton pads, two "shields," two zip lock bags and a cloth draw string bag, helping women use their sanitary pads discretely and with dignity.

Though the super kits are donated, AMS pays members of the group for each super kit produced, allowing them to build their incomes.





# CAROL'S STORY



Across the world, young girls struggle to balance their menstruation cycles and their daily lives. Without the proper resources, a week-long period can mean a week out of school – and because in rural areas, sanitary pads can be expensive and nearly impossible to find, 30 percent of Ugandan girls miss class during their periods.

“I was an orphan, and when I was young, it was so hard for me to get sanitary pads,” said Carol,\* a client at Alive Medical Services (AMS). “I had to rip my regular clothes and use those as pads.”

Remembering such experiences, Carol joined AMS' Kisakye Group as soon as it was launched in February of 2015. AMS established the Kisakye Group for two reasons: the first, to help HIV-positive individuals earn a sustainable income; the second, to support girls and women with menstruation management. AMS trained six clients to cut, sew and create reusable sanitary pads – or “super kits” – for donation.

Each super kit contains four cotton pads, two “shields,” two Ziploc bags and a cloth drawstring bag. These super kits help women use their sanitary pads discretely and with dignity.

Since then, the women have continued coming to the clinic nearly every day to sew. The Kisakye Group

produces approximately 200 super kits per quarter, each of which can last up to three years. AMS pays women for each super kit they produce, all of which are donated to vulnerable populations and other AMS clients.

“These pads are so important,” Carol said. “You can wash them easily, which prevents disease and infection.”

The sale of these pads has helped women like Carol change their lives: because of her income from the Kisakye Group – and because of her treatment at AMS for the last nine years – Carol's health has remained under control. Her two children are HIV-negative, happy and healthy. And, Carol reports that her financial stability has helped her look past the stigma and misconceptions regarding HIV. In addition, Carol's husband left her last year. Instead of falling apart, the small family picked themselves up, built a new home, and started their lives on a healthier foot, all because of Carol's savings from the Kisakye Group.

“I love being here,” Carol said. “Kisakye helped me build a one-bedroom house. It helps me budget for my children. Because I know how to make these pads, my daughter won't have to deal with her period in the same ways I did.”



# 2017 INNOVATIONS



Implementation of (DSDM) for all clients, establishing a DSDM core team to lead efforts; scaled up our services for first-track clients to decrease wait times and improve retention



Continued to grow the Communications and Resource Mobilization Department



Diversified AMS' donor base by launching the Friends of AMS (FAMS) mailing list



Trained another cohort of youth peer educators



Worked to rebrand AMS, alter our logo and strengthen our brand identity



Scaled up our focus on continuous quality improvement; right now, each department has at least one ongoing CQI project



Worked to strengthen our services for children; our research team is in the process planning a new play therapy program to improve disclosure methods



Increased the number of community client-led antiretroviral treatment delivery groups (CCLADs)



Trained more peer educators, bringing the total number of peer educators at AMS to over 180



Established new partners and set up donation boxes in 21 stores around Kampala and Jinja to raise money for our End of Year Fundraising Campaign



Continued to utilize our electronic medical records system for client management, which uses a flagging method to alert clinicians of critical issues (i.e. "due for viral load testing")



Continued to grow our reach to key populations through outreaches and partnerships with community-based organizations



# CHALLENGES

The main challenge facing AMS during this reporting period was a lack of funding. Each year, our client base has continued to grow, and though we are thrilled to continuously enrol more clients into our care, a lack of funding limits what we as a clinic can provide. One of the real impacts of this limitation can be seen in our inability to provide resistance profile tests for clients undergoing a switch regimen; without this test, their reactions to second-line drugs can be volatile.

AMS has been working to address this challenge through a variety of different methods, including the utilization of three Global Health Corps fellows in the Communications and Partnerships department (Please see question six for more information on our mission to diversify and increase funding).

Other challenges include:

Inability to afford a complete set of services for malnourished clients, such as the provision of food supplements, as well as ready-to-use therapeutic foods (RUTFs). In August 2017, we sent a proposal to UNICEF asking for their support on this issue; however, we have not yet heard back from them. We have also engaged people around the world in fundraising for our nutrition programs through GlobalGiving, and have reached out to a number of major gift donors and other local partners through concept notes and site visits.

Serving our expanding client base with a limited number of peer educators. We have made advances toward remedying this situation by training more adult youth educators, and our first cohort of youth peer educators. In total, we now have over 180 peer educators.

As AMS' client load increases, we have faced a consistent need for more storage space. This is especially important because of the number of clients on test-and-treat; we need to ensure we always have enough medicine on hand for everyone to begin treatment immediately after their diagnosis. We are also facing a need for more record-keeping space to store client information and files.



## LOOKING AHEAD TO 2018

In 2018, we look forward to the following aims.

- Prioritize reaching men with education, testing, and care through initiatives such as establishing a Men's Only Clinic in January of 2018, and launching HIV testing outreaches at local bars before and during the World Cup
- Increasing the number of community client-led antiretroviral treatment delivery (CCLADs) as part of our expanded DSDM approach; this also includes adolescent and youth health clubs that are specifically created for ART pickup
- Strengthen our services to Key Populations (in particular, lesbians, gay men, bisexual, transgender and intersex persons, and sex workers) through partnerships with local community-based organizations and targeted outreaches
- Spearheading AMS' second participatory storytelling project, Positive. Powerful. Alive., to help clients empower each other and others through film, photography, and storytelling

- Increasing and diversifying AMS' funding portfolio, and increasing our reach to individual donors/bringing in major gifts
- Improve AMS' visual identity by rolling out a new brand. With support from the rest of the staff, AMS' communications team will be rolling out our rebrand in January 2018, complete with a new logo, editorial guidelines, and new templates for all internal and external communications materials. We are also looping in staff members by appointing "brand ambassadors" from each

department, all of whom will help ensure we adhere to the new brand moving forward.

- Continuing to implement differentiated service delivery, in line with the Ministry of Health's recommendations and guidelines
- Strengthening AMS' research capacity by applying for more research grants and presentation opportunities, and partnering with professionals from Uganda, the U.S., and beyond for support and mentorship during the proposal process



# THANK YOU

Since AMS began, we've served more than 16,500 HIV-positive clients, over 13,000 of whom are active in care today.

*"I would spend entire days walking, traveling from clinic to clinic to find medication," a client named Henry said. "Without Alive, I wouldn't have made it."*

We speak for countless mothers, fathers, children, and families when we say: thank you. We are so grateful for your continued support, and we are so happy you have remained an integral part of the AMS family. Thank you for making all the work that we do possible, and for continuing to keep AMS, our clients, and Uganda in your hearts.









