

**Title: Strengthening community structures for sustained ART provision in resource limited settings.**

**Presenters at the conference**

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**Background:**

In Uganda there is a nationwide program to provide free antiretroviral treatment (ART). Despite this, the uptake of HIV care is still low in many of the rural areas. To address this, Rural Action Community Based Organisation (RACOB AO) in partnership with Pharmacists without Borders Sweden, funded by Forum Syd, implemented a project with the purpose of increasing uptake, retention and adherence to ART services.

**Description:**

The project targeted people living with HIV (PLHIV), from remote rural communities of Kinuuka, Mpumudde, and Kasagama in Lyantonde district in south western Uganda from January 2012 to December 2013. The main duty bearer was the district health office. Health workers at lower level units were trained as a prerequisite for accreditation of those units as static ART sites. PLHIVs identified and seconded volunteers that were trained as treatment helpers providing individual support to clients, including adherence counselling. They also formed a linkage between clients and health workers through quarterly interface meetings. In addition, PLHIV were mobilized into support groups for peer counselling and advocacy for ART services.

**Lessons Learned:**

The training of health workers led to the accreditation of three health centers as static ART sites. Since then, this innovative approach that begun in Lyantonde became a national policy and was rolled out nationally 2015. Uptake to care tripled from 1,350 in 2012 to 5,467 in 2014 and to 6,495 by December 2015. Retention to care among the targeted PLHIV increased to 92% by December 2015 way above the 80% national average. Treatment helpers bridged the gap for monitoring of PLHIV in their homes, a mandate of the government health workers. The advocacy platforms for PLHIV improved their visibility and their capacity to present their needs to duty bearers. These approaches spearheaded by RACOB AO formed a model that was successfully replicated in neighboring Sembabule district during 2014-2015.

**Conclusions/next step:**

Imbalances in the access and adherence to ART services are a function of structural and policy issues and this model aims at addressing both. It has successfully been implemented and evaluated in two rural districts in Uganda and can be replicated nationally to increase uptake, retention and adherence to ART services.