

# PRESENTATION TOPIC

**Effectiveness of Community Based Learning Networks (CBLNs) in Provision Of Intergraded HIV/AIDS And Reproductive Health Services To Cross Border Mobile Population Case Study Of Busia Hot spot.**

**Presented in the 2<sup>nd</sup> International conference on HIV/AIDS and STds in Las Vegas from 26<sup>th</sup>-29<sup>th</sup> October 2014**

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# Introduction

**FOC-REV uses Community Based Learning Networks (CBLNs) in Provision Of Intergraded HIV/AIDS And Reproductive Health Services To Cross Border Mobile Population.**

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# Introduction

**CBLN mobilizes cross boarder mobile population and the host communities for the access of;**

- **Comprehensive HIV/AIDS prevention, care, treatment**
- **Social support services including HIV Counseling and Testing**
- **Health education**
- **TB screening and referrals for treatment**
- **Safe Male Circumcision(SMC)**
- **STI/STD Case management and treatment at the wellness centre**
- **Family Planning**

# Description of intervention

- **CBLNs works with Union of truck drivers, association of Commercial sex workers (CSWs) and health units existing within the Hot spot.**
- **CBLN works with church leaders, Opinion leaders, peer educators and clubs in the community to disseminate messages for prevention of HIV/AIDS, testing and treatment.**

# *Goal, Objectives of CBLN*

## *Goal:*

**To foster collaboration, dialogue and learning among HIV/AIDS And Reproductive Health Services CSOs for improved delivery of services for mobile population and the host communities.**



# Objectives;

- **To improve information sharing among HIV/AIDS And Reproductive Health Services CSOs;**
- **To strengthen the collective voice of HIV/AIDS,STIs And Reproductive Health Services CSOs in the hot spot**
- **To strengthen referral mechanisms for HIV/AIDS,STIs And Reproductive Health Services in the hot spot**

## ***Objectives cont.***

- **To improve coordination among CSOs and other service providers for enhanced service delivery for mobile population and the host communities**
- **To create an avenue for resource mobilization strategies and sharing both human and logistical resources.**

# Description of intervention

**As** a result,

- 130 Home based care givers
- 255 peer educators
- 106 condom distributors were trained in peer education, HIV/AIDS prevention strategies and Moon light HIV Counseling and testing.

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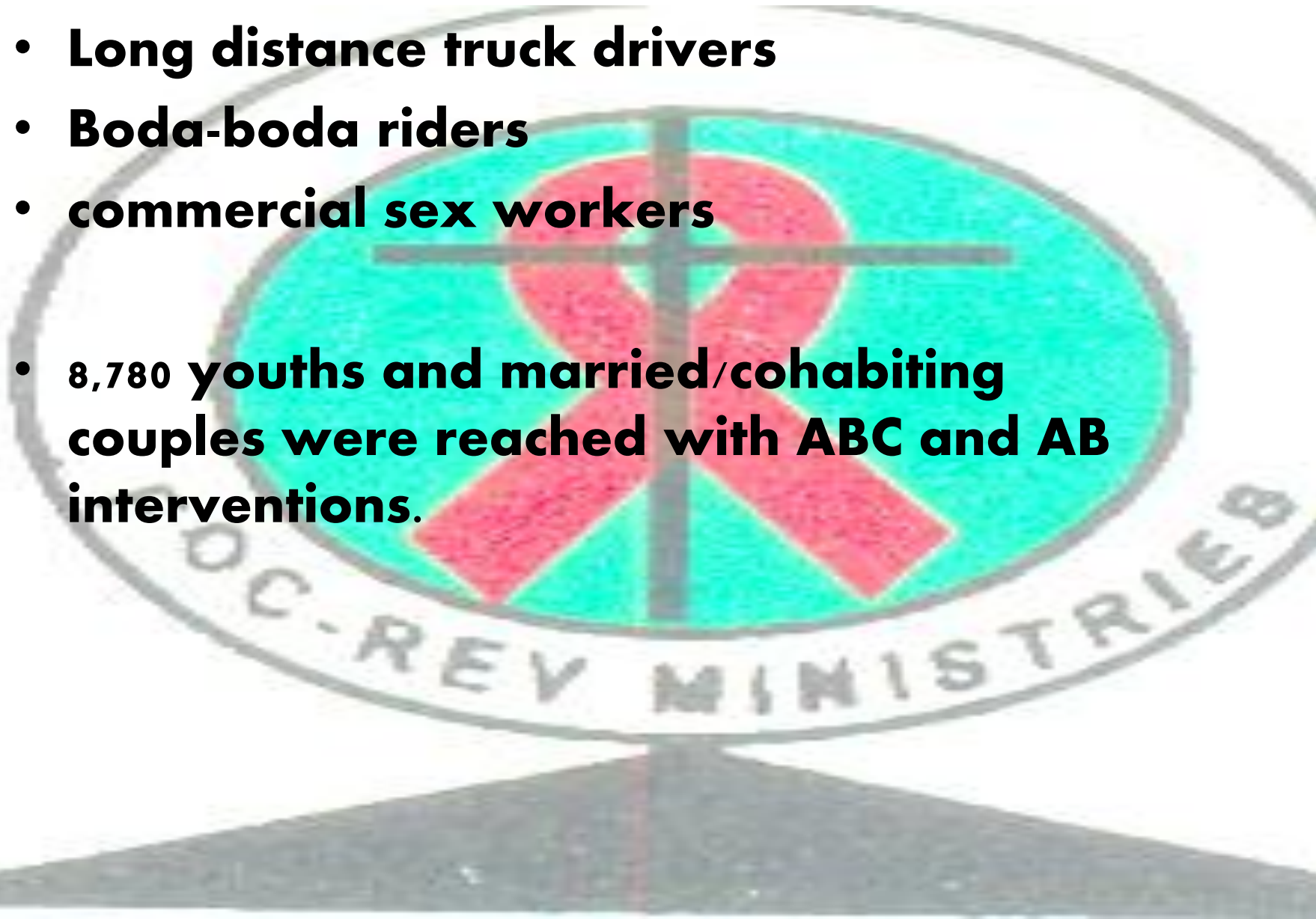
# Cont'd Description of intervention

**Between July 2013 and June 2014**

- **total 4,006 individuals were reached with HCT**
- **425 referred for different services including SMC, TB treatment, cotrimoxazole prophylaxis, STI treatment and other HIV related services among others in different health units including Busia Health Centre IV**
- **2,732 Cross boarder mobile population (CBMPs)**

# Cont'd Description of intervention

- **Long distance truck drivers**
- **Boda-boda riders**
- **commercial sex workers**
- **8,780 youths and married/cohabiting couples were reached with ABC and AB interventions.**



# Cont'd Description of intervention

- **CBLN focuses on the direct and indirect consequences of HIV/AIDS and STIs on the host communities**

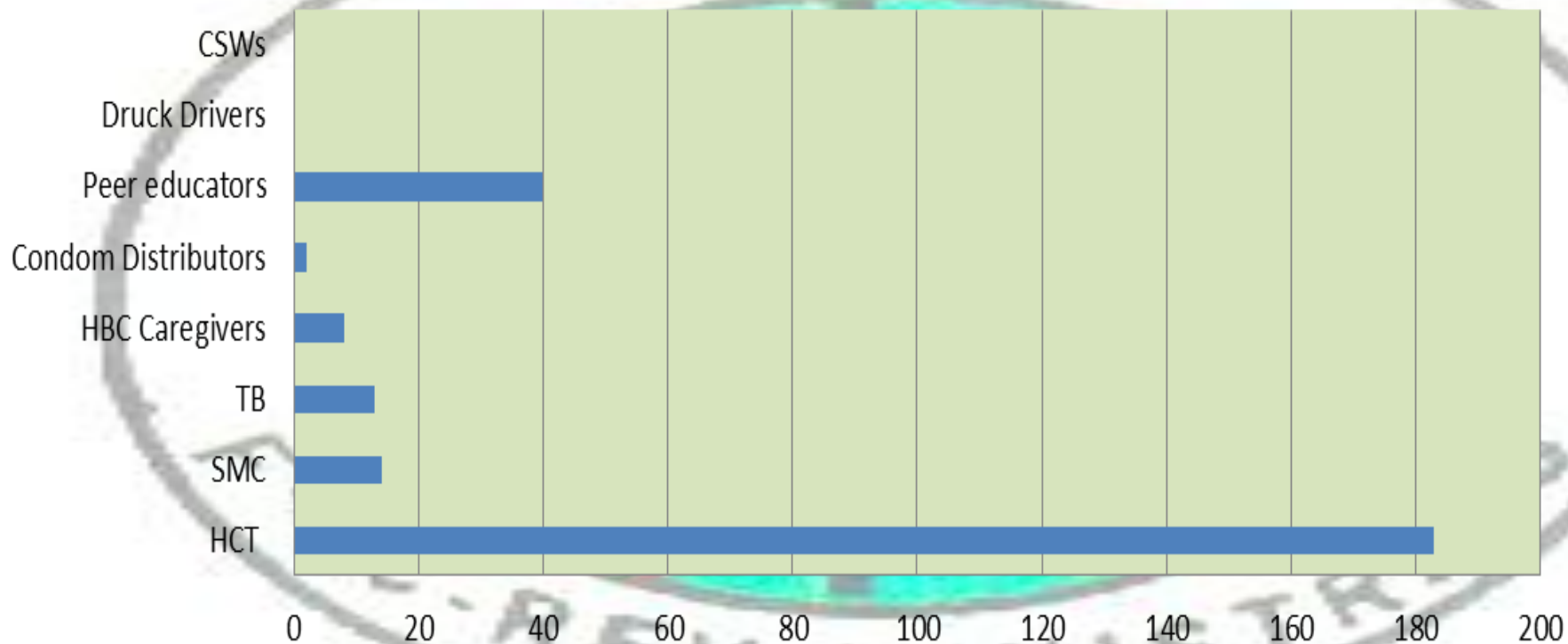
**As a result ;-**

- **3,200 People living with HIV/AIDS have been identified and provided with Home based care services.**



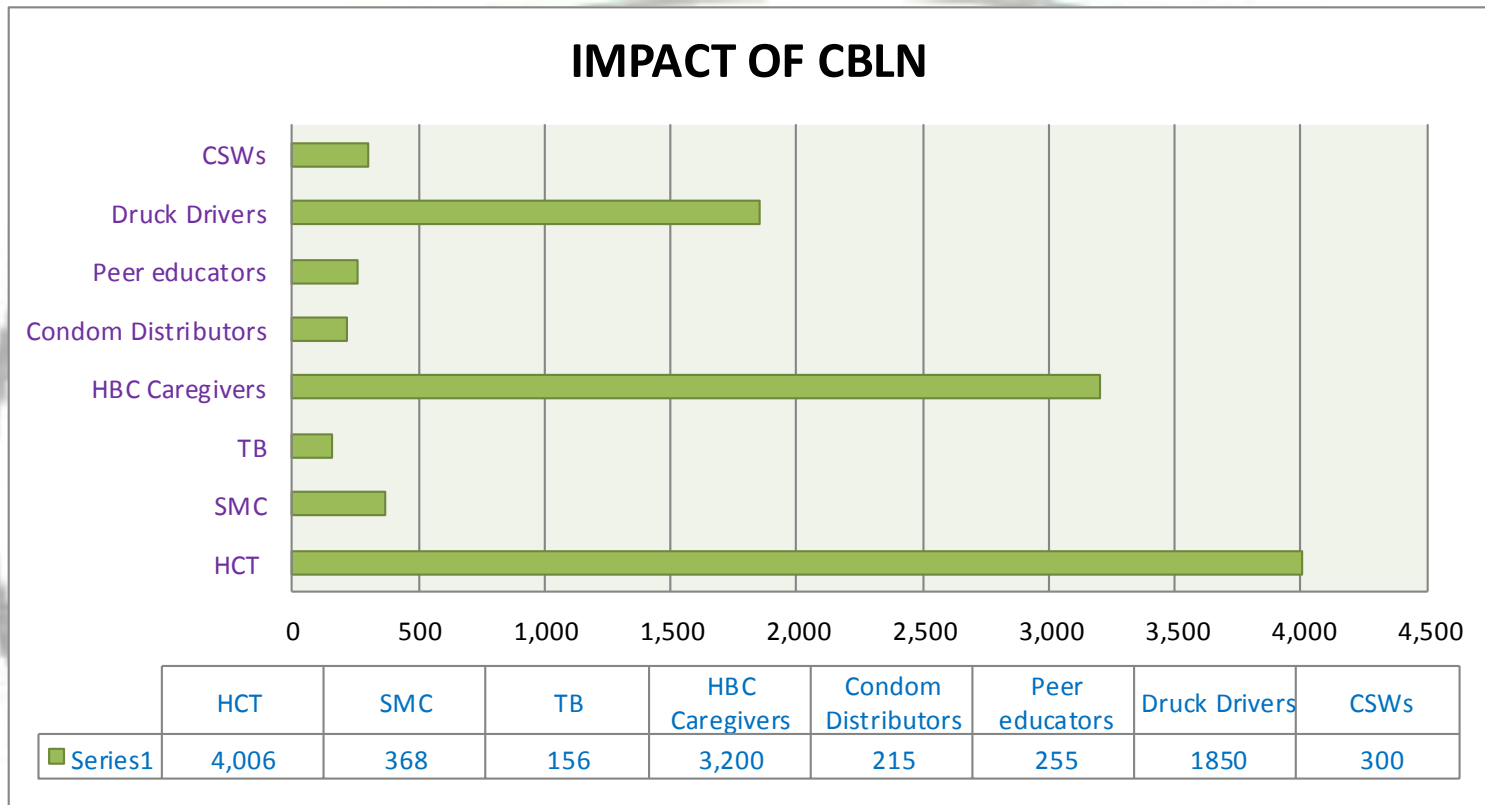
# IMPACT OF CBLN

## TREND OF HIV SERVICES BEFORE CBLN



	HCT	SMC	TB	HBC Caregivers	Condom Distributors	Peer educators	Druck Drivers	CSWs
■ Series1	183	14	13	8	2	40	0	0

# IMPACT OF CBLN



# Reproductive Health/Family Planning Method

- CBLN has engaged in Mobilization of Busia community for Health Education talk and Family Planning Methods.
- CBLN teams has continuously engaged with community Opinion leaders, Church leaders, VHTs, Expert clients
- Dialogue meetings are conducted to share experiences among church leaders, Opinion leaders and community Volunteers

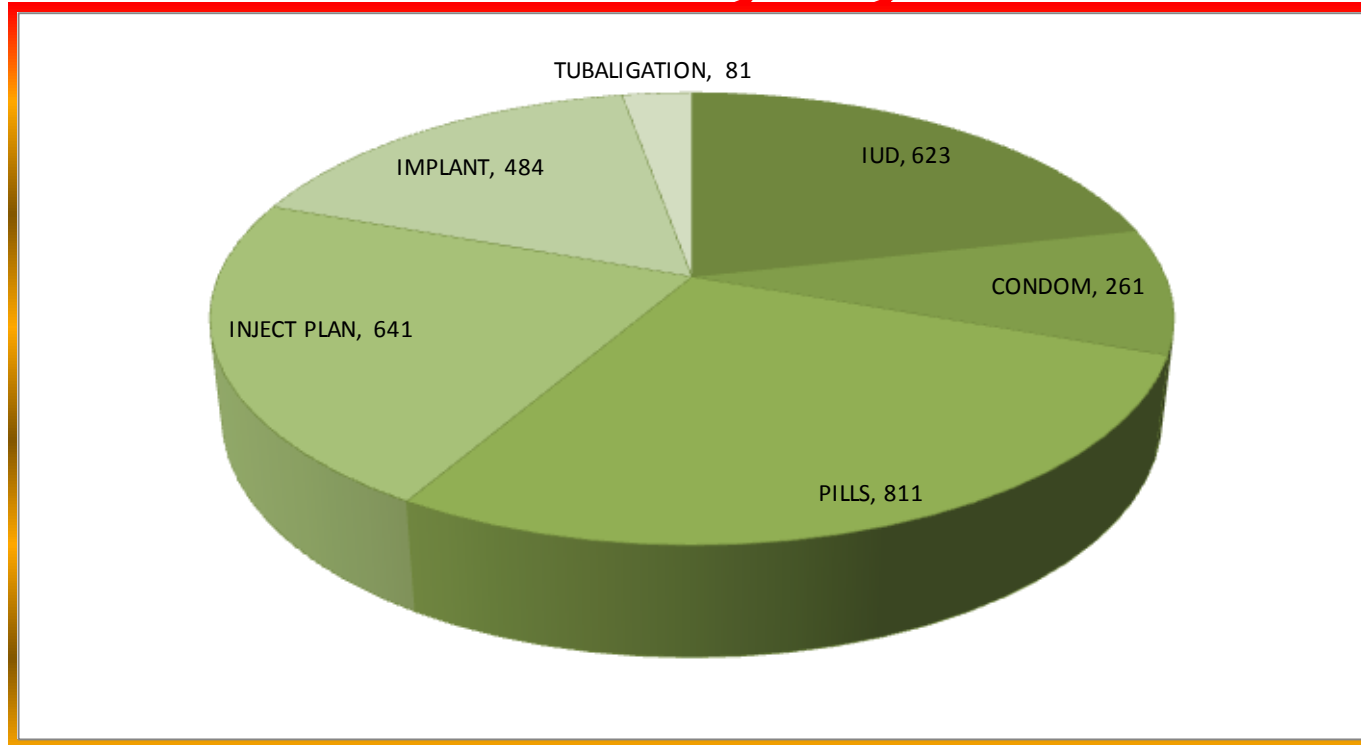


# Reproductive Health/Family Planning Method

- **Male involvement in Reproductive health has Increased**
- **CBLN has seen Men take lead in mobilization and sensitization of communities for Family Planning methods.**
- **CBLN has advocated for improved access, affordable FP services and a wide range of contraceptive methods.**



# Mothers Under a reproductive age (15-49) served with Family Planning





**Trained CBLN Providing FP services to Mobile Population in the Hot spot of Busia.**



# Lessons Learnt

- Moon light VCT offered from 6.0-10pm at the wellness Centre at the border point is accessible to truckers, CSWs and other cross border mobile population.
- Use of peer educators in information disseminations, referral's and mobilization is an effective way of reaching out to cross border mobile populations.
- Stake holder's dialogue meetings have helped in advocacy and community mobilization.

# Challenges faced

- **Poor coordination mechanism among CBLN team and Other CSO (HIV/AIDS and SRH Service Providers)**
- **Social and Cultural Stereotypes**
- **Poor Male Involvement**
- **Inadequate Financial support**
- **Political interference (local authorities)**

# Recommendations

- Community HCT outreaches should be complemented by moon light VCT.
- Harmonization of protocols in testing, treatment and referral for cross border mobile populations is required
- Involvement of community structures and local leadership promotes sustainability
- Male Involvement in HCT,FP and SRH should be emphasized during dialogue meetings

