



THE REPUBLIC OF UGANDA
MINISTRY OF HEALTH



HIV CARE AND TREATMENT LITERACY FLIP CHART

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ABOUT THE TOOL AND OBJECTIVES

HIV CARE AND TREATMENT LITERACY FLIP CHART

This flipchart is to be used by health workers and other lay providers to improve the quality of counseling around HIV literacy for PLHIVs. The flipchart has 8 communication objectives including:

For the provider

- Improve provider client care skills.
- Remind providers on key content to discuss with clients regarding HIV literacy.
- Remind providers on the need to enroll clients who test HIV positive into care immediately.
- Help clients to disclose their HIV positive status

For the client

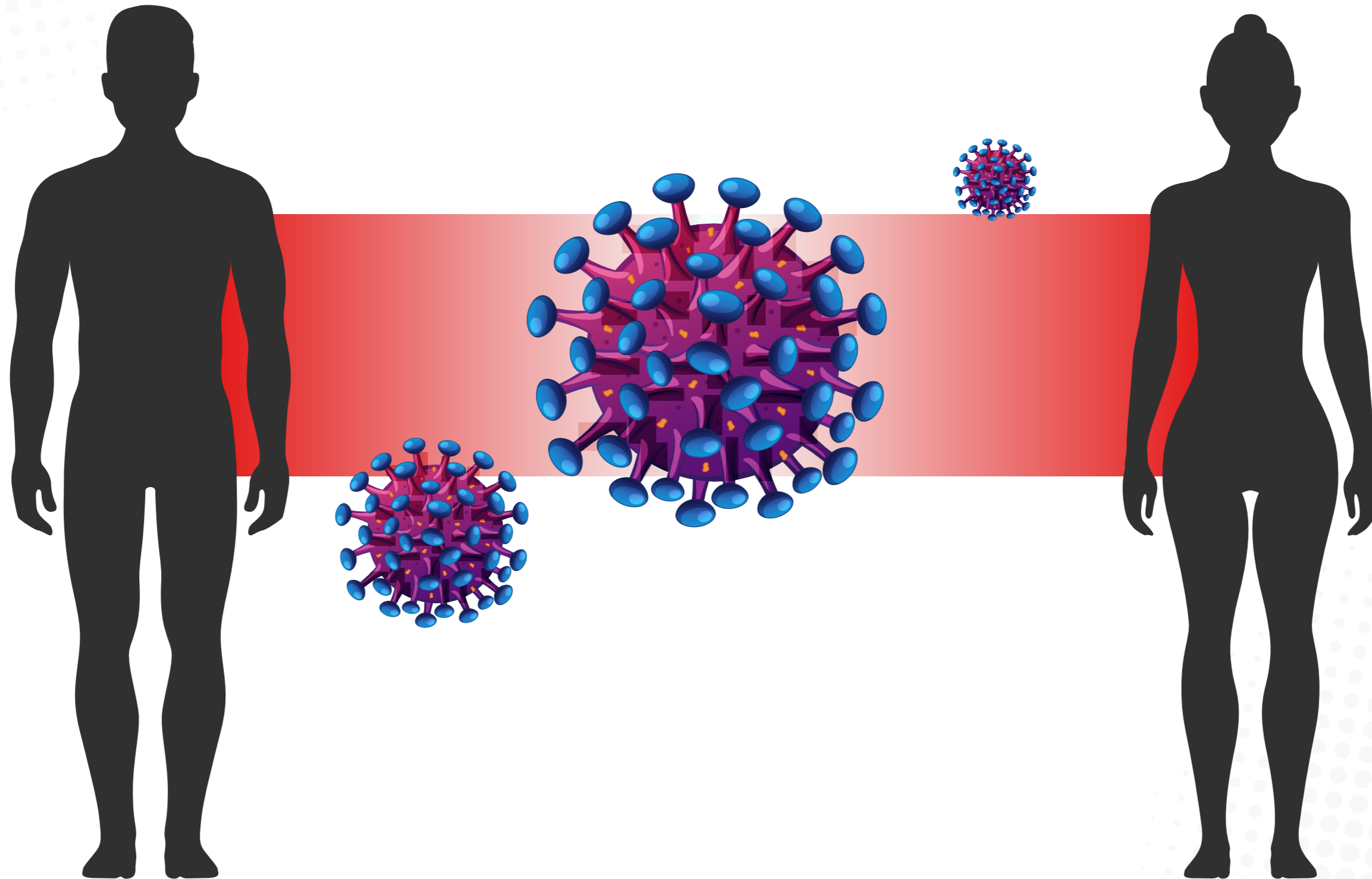
- Increase clients' knowledge of HIV care and treatment.
- Increase clients' appreciation of their test results.
- Motivate clients that have tested HIV positive to accept early enrollment into care.
- Reduce stigma and discrimination related to HIV positive status.

How to use the flipchart

- Prepare in advance by reminding yourself of the key content in the flip chart
- Welcome the client and sit facing him/her.
- Identify the need of the client in relation to the client literacy components / sub themes.
- While you are using the side with text, make sure the client has a good view of the pictures
- Point to the picture while you speak.
- Speak loudly and clearly.
- Use the language that the client understands.
- Encourage dialogue by asking questions.

WHAT IS HIV/AIDS?

HIV CARE AND TREATMENT LITERACY FLIP CHART



WHAT IS HIV/AIDS?

What is HIV?

HIV stands for Human Immunodeficiency Virus. HIV is a sexually transmitted infection (STI). STIs are infections that are spread from person to person through sexual activity, including anal, vaginal or oral sex. Multiple STIs increase the risk of HIV transmission.

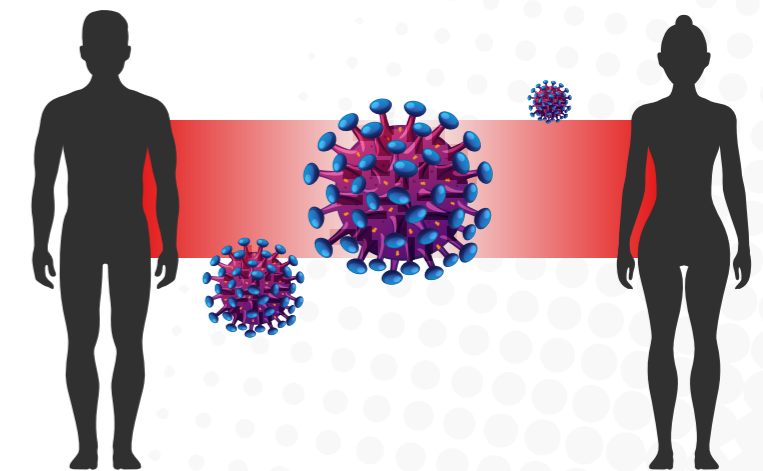
HIV attacks the immune system by entering white blood cells (called CD4 cells) and uses them to copy itself and multiply. A healthy body has billions of CD4 cells, so when HIV enters the body, it can multiply rapidly, allowing the infection to spread quickly throughout the body.

When untreated, HIV slowly weakens the body's immune system by taking over CD4 cells until the body can no longer defend itself from infection.

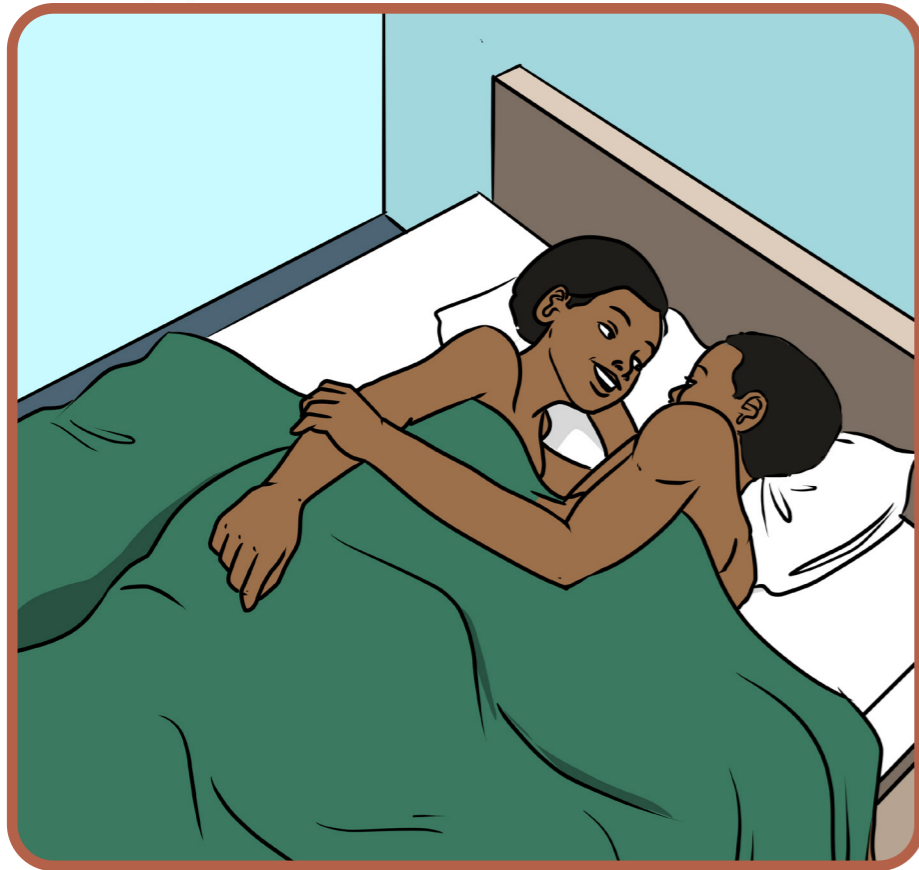
What is AIDS?

If HIV is not treated, it can lead to AIDS (Acquired Immunodeficiency Syndrome). A person develops AIDS when HIV has damaged their immune system so severely that they are no longer protected from infection and illnesses.

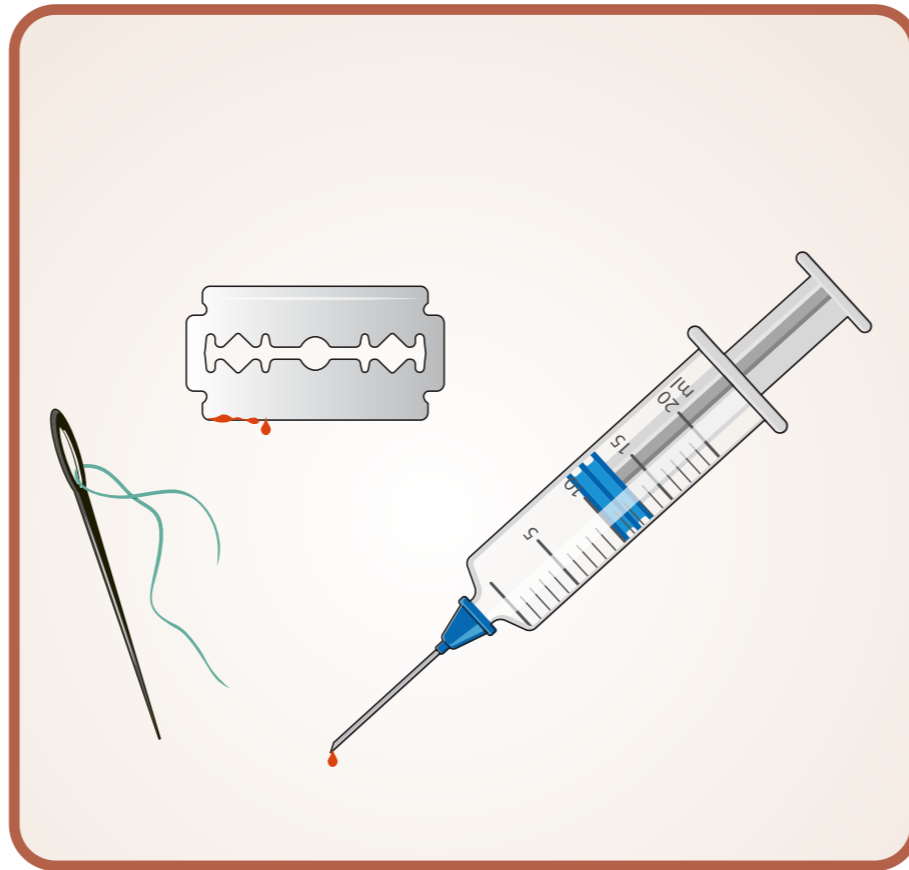
A person is considered to have AIDS when they frequently become sick with infections, such as tuberculosis (TB), pneumonia, and a range of skin, eye and nervous systems. While healthy people can develop these illnesses as well, people with AIDS are at a very high risk of getting them and are more likely to get very sick when they do.



HOW IS HIV TRANSMITTED?



Semen, pre-seminal fluid, Rectal fluid, Vaginal fluids



Blood



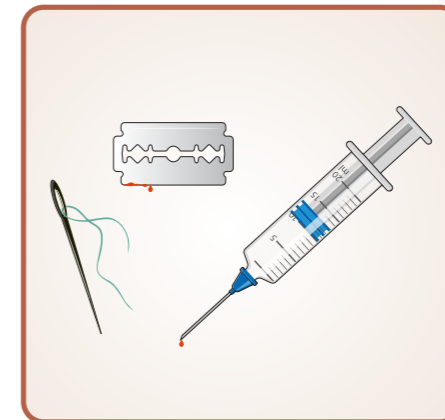
Breast milk

HOW IS HIV TRANSMITTED?

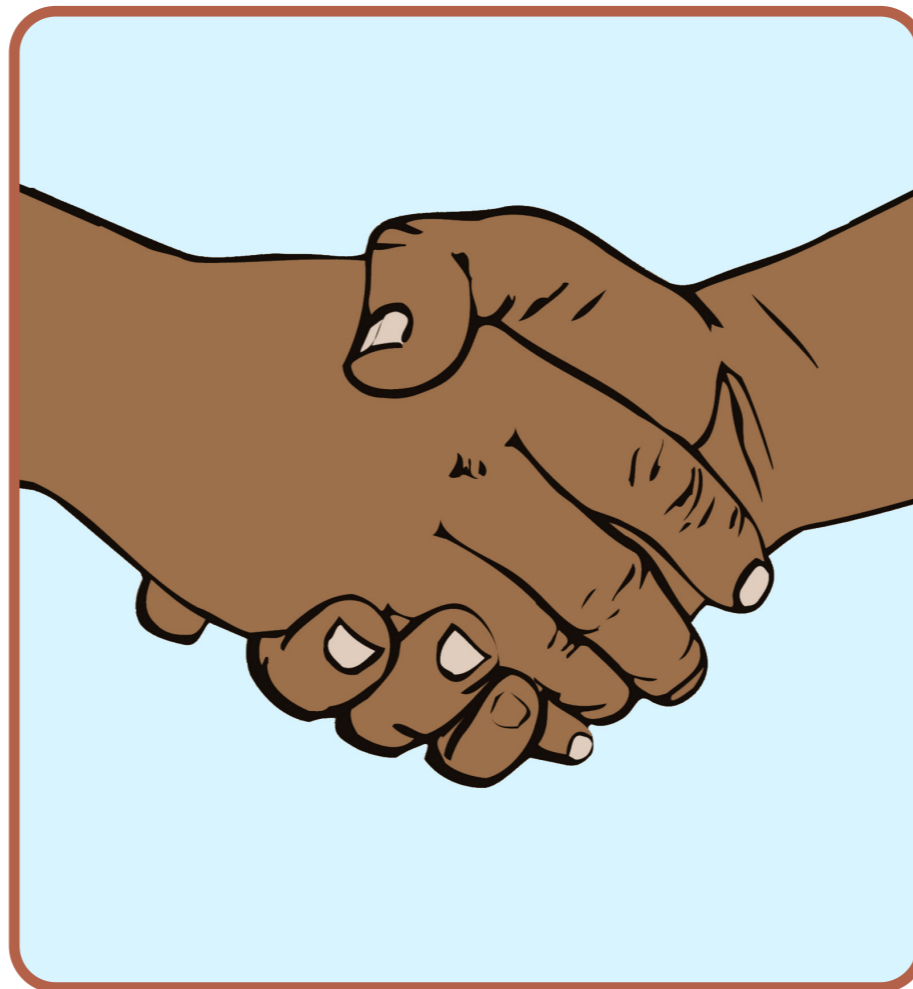
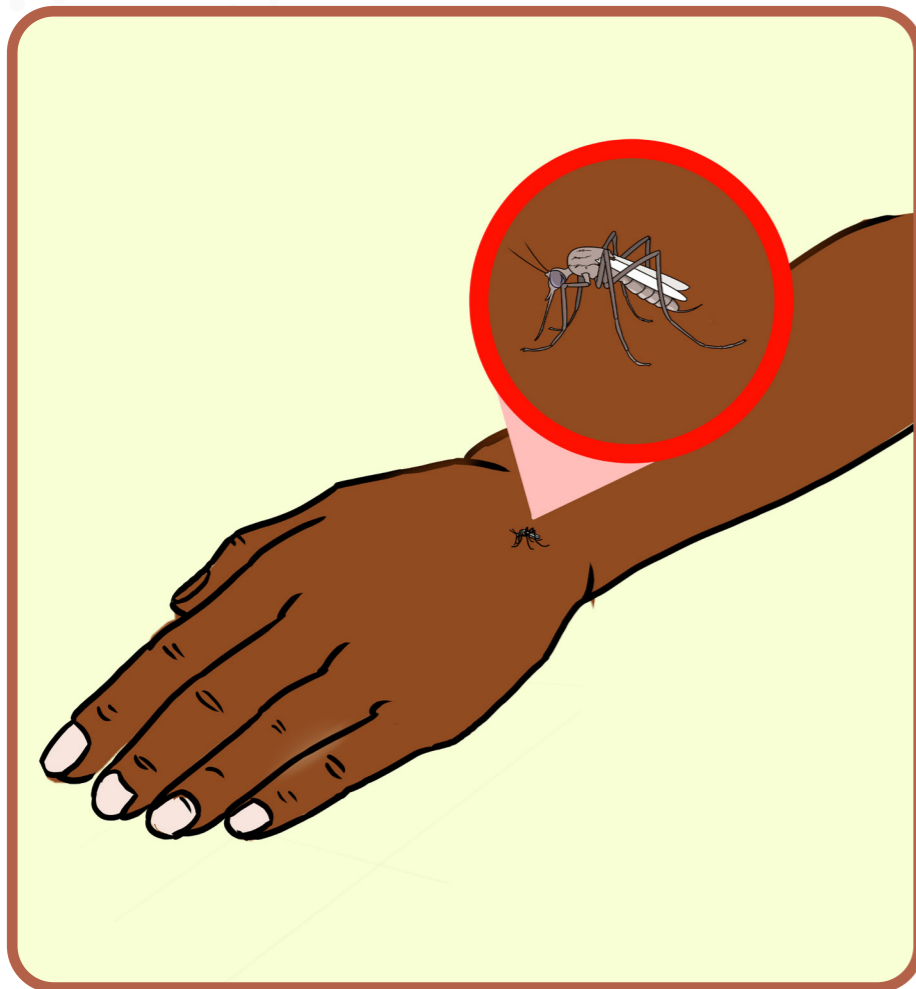
How is HIV Transmitted?

The spread of HIV from person to person is called HIV transmission. You can only get HIV by coming into direct contact with certain body fluids from a person with HIV who has a detectable viral load (that is, who has enough of the virus in their system to be detectable with an HIV test). These fluids are:

- Blood
- Semen and pre-seminal fluid
- Rectal fluid
- Vaginal fluids
- Breast milk



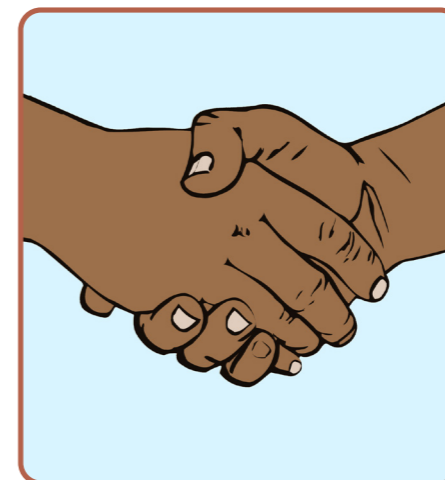
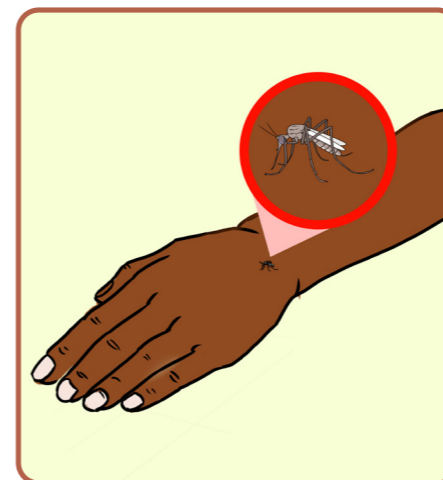
HOW HIV IS NOT TRANSMITTED



HOW HIV IS NOT TRANSMITTED

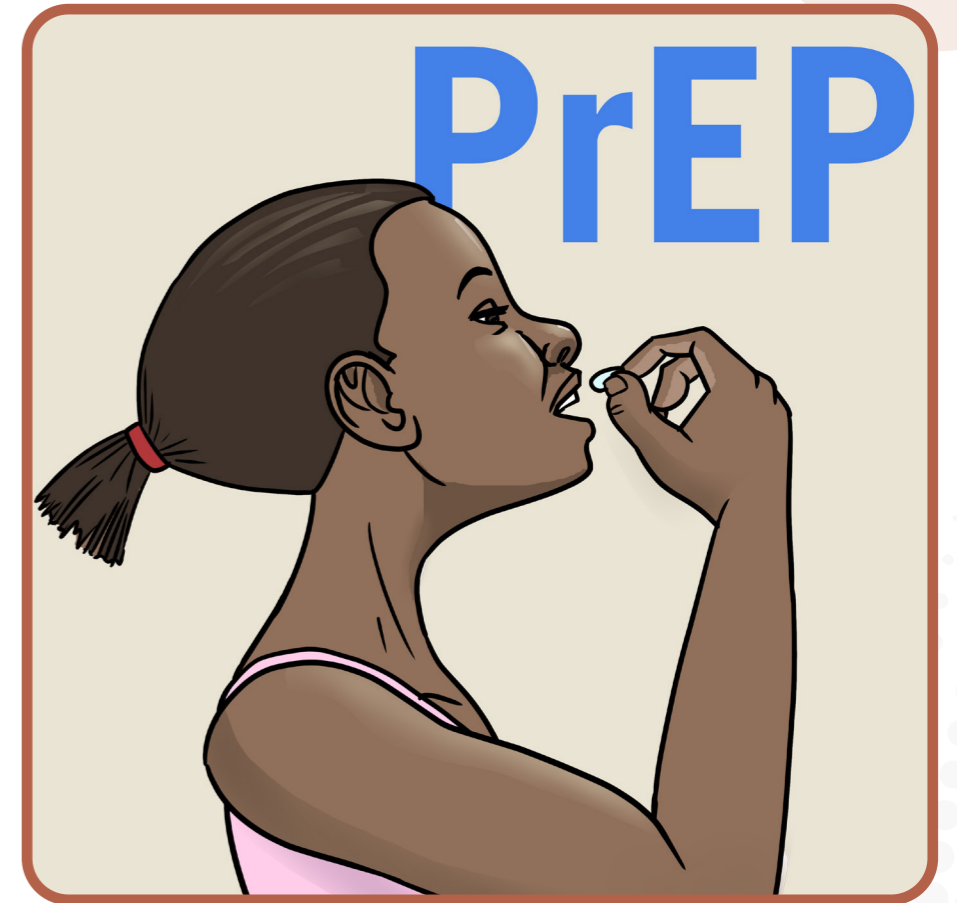
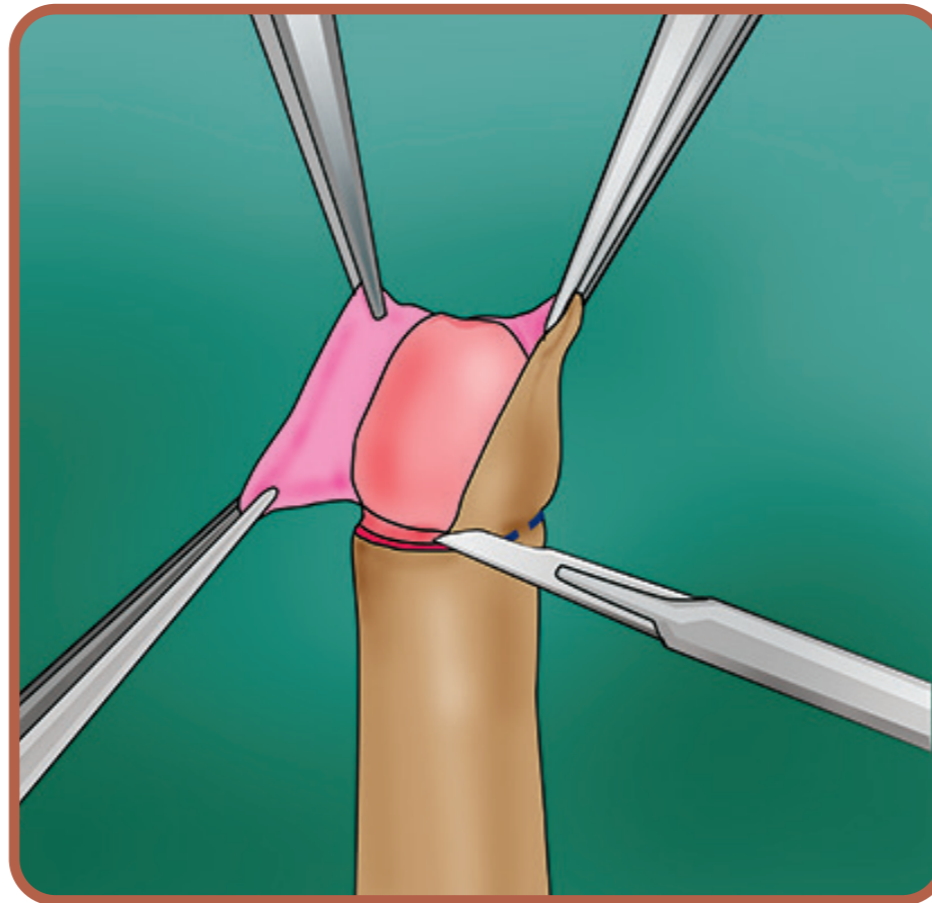
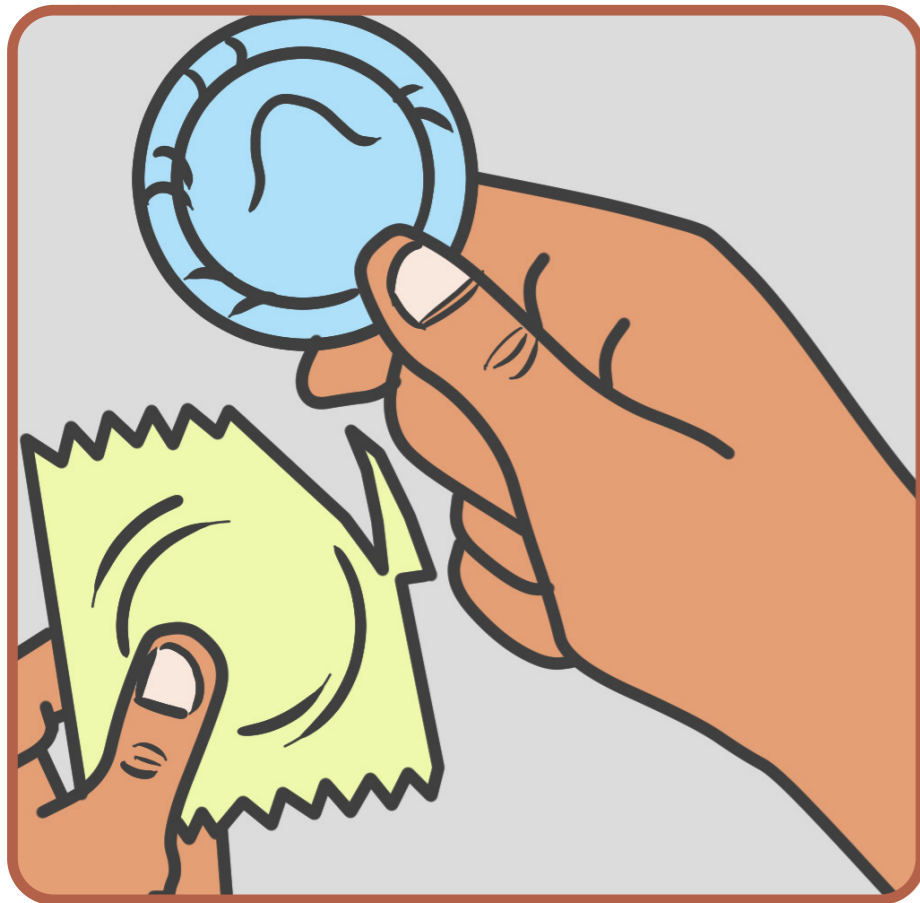
HIV is NOT transmitted by:

- Mosquitoes, tick or other insects
- Saliva, tears, or sweat that is not mixed with the blood of a person with HIV.
- Shaking hands; hugging; sharing toilets; sharing dishes, silverware, or drinking glasses; or engaging in closed-mouth or “social” kissing with a person with HIV.
- Drinking fountains
- Other sexual activities that do not involve the exchange of body fluids (for example, touching).



HIV PREVENTION

HIV CARE AND TREATMENT LITERACY FLIP CHART

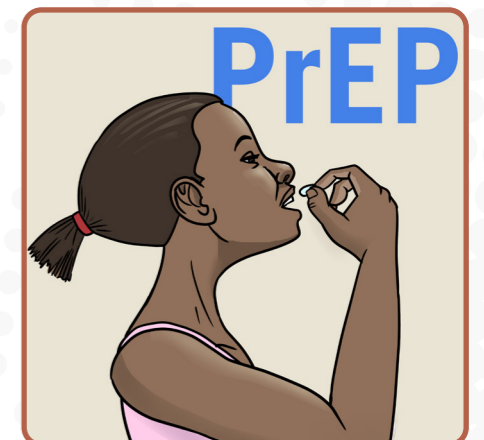
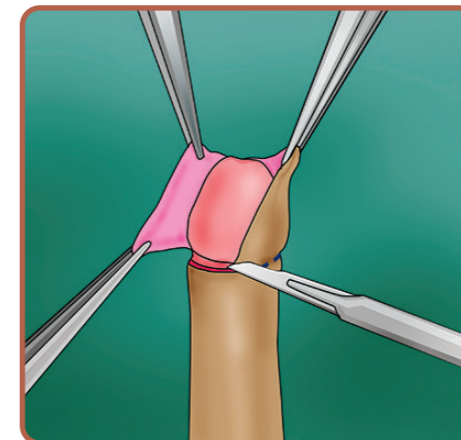


HIV PREVENTION

There is no single HIV prevention intervention that is sufficient to prevent all HIV transmissions in all people.

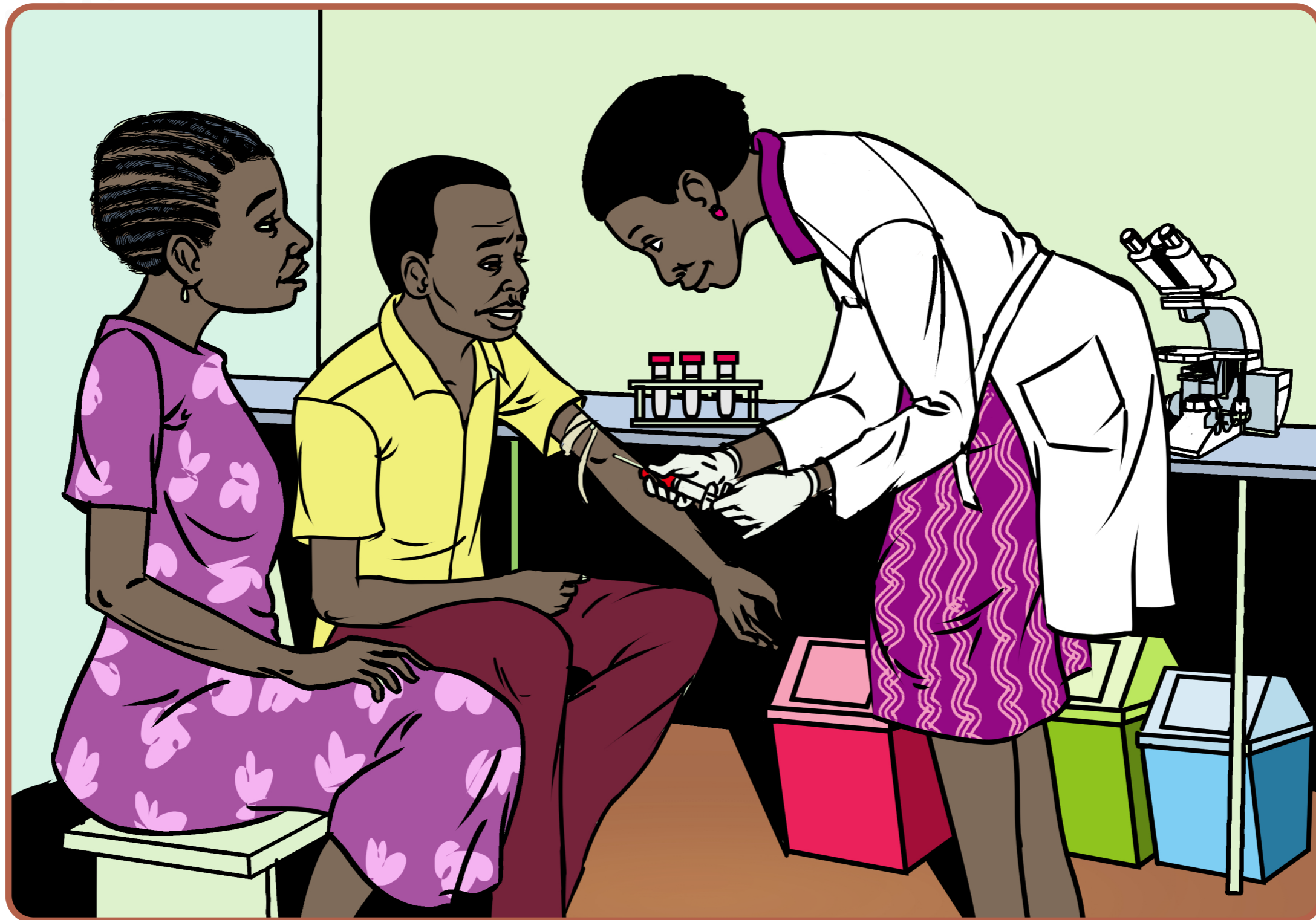
How can the risk of acquiring HIV be reduced?

- Correct and consistent use of condoms among sexually active
- Safe Male Circumcision (VMMC)
- Pre-exposure prophylaxis (PrEP) – HIV drugs given to someone who has increased risk of acquiring HIV to reduce their risk of acquiring HIV i.e. Sex workers, couples in a discordant relationship.
- Post Exposure Prophylaxis – HIV drugs are given to someone who has been exposed to a risk of HIV infection.
- Prevention of Mother To Child Transmission (PMTCT) also known as EMTCT helps HIV+ mothers not to transmit HIV to their unborn or breastfeeding babies.



KNOWING YOUR HIV STATUS

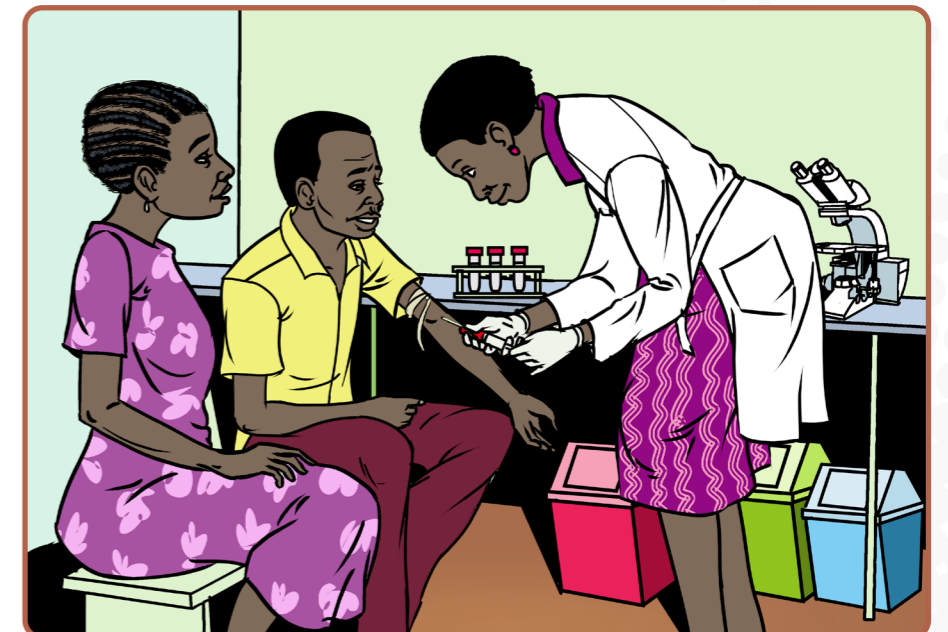
HIV CARE AND TREATMENT LITERACY FLIP CHART



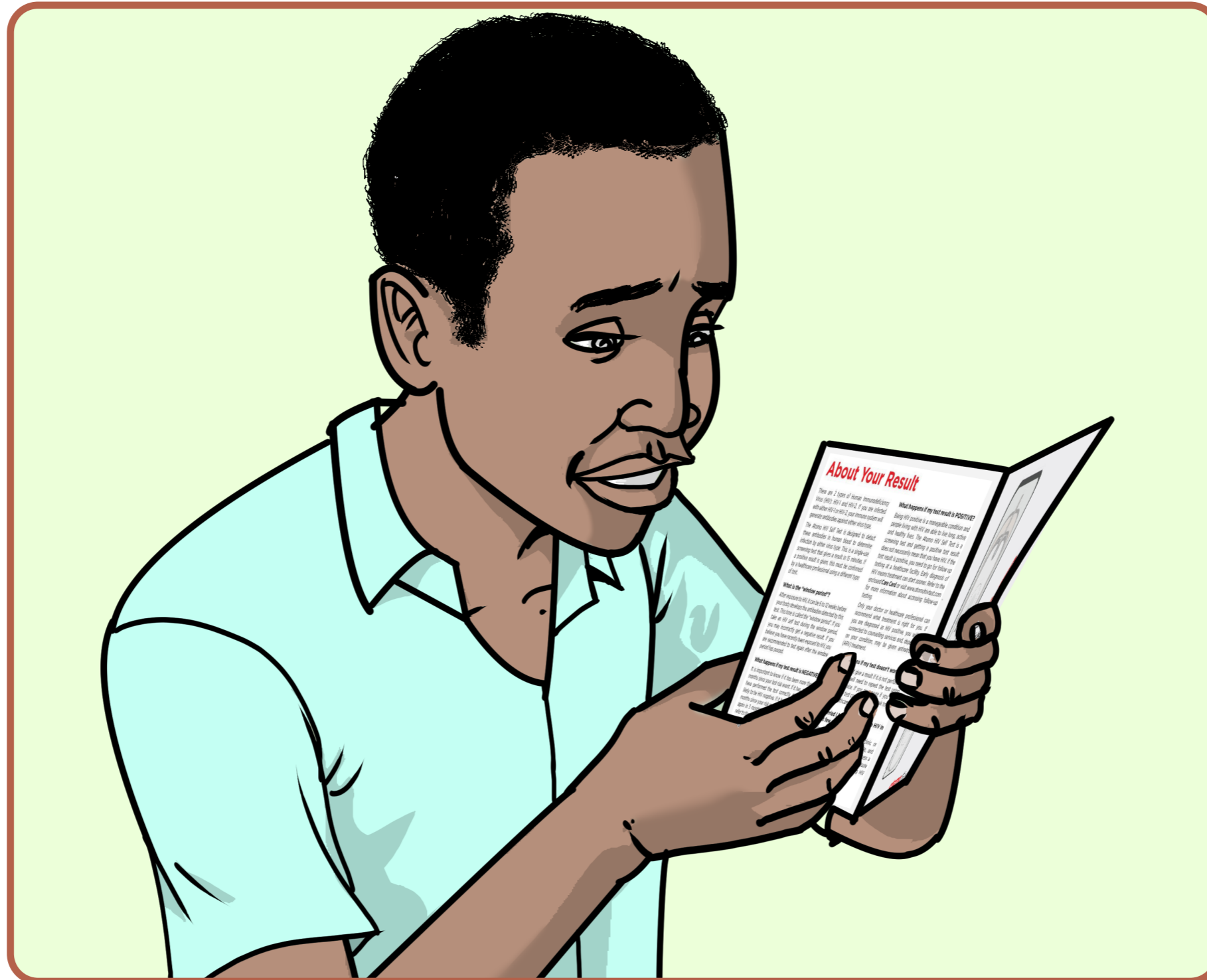
KNOWING YOUR HIV STATUS

HIV Testing

- Knowing your HIV status is a critical step towards attaining a healthy life.
- Testing for HIV will help you know your HIV status and obtain the support and care you need to live a healthy life



WHAT THE TEST RESULTS MEAN



WHAT THE TEST RESULTS MEAN

If you test HIV positive

- It means that your blood has HIV.
- The health worker will enroll you into care on the same day you test positive and explain to you how you can stay healthy.
- It is your responsibility to take your medicine as advised by the health worker; this can reduce the viral load in your body and in doing so;
- Live a long healthy productive life.
- Reduce the chances of you transmitting the virus to your sexual partner(s).
- You need to regularly visit your health provider for review and monitoring as advised and demand for a viral load test at least once a year.
- A viral load test helps you and the doctor to know how much HIV is in your blood.
- A low viral load means your ARVs are working well and you should keep taking your ARVs.
- A high viral load means your ARVs may not be working well and your doctor needs to support you to reduce it.
- You should disclose your HIV status to your partner(s) and family. They can support you

emotionally and help you adhere to your treatment.

- Encourage your partner(s) both current and past to go for an HIV test.
- Always correctly use a condom to prevent transmission to your sexual partners and to prevent you from acquiring a different type of HIV.
- Stay faithful to one sexual partner or reduce the number of sexual partners.

If you test HIV negative;

- It means that your blood is free from HIV.
- Stop the excuses and take a stand and do everything in your means to remain HIV negative including;
- Disclose your status to your sexual partners and encourage them to go for testing.
- Abstain from sex if you can.
- Use a condom every time, you have sex with someone whose HIV status you do not know.
- Stay faithful to one sexual partner or reduce number of sexual partners.

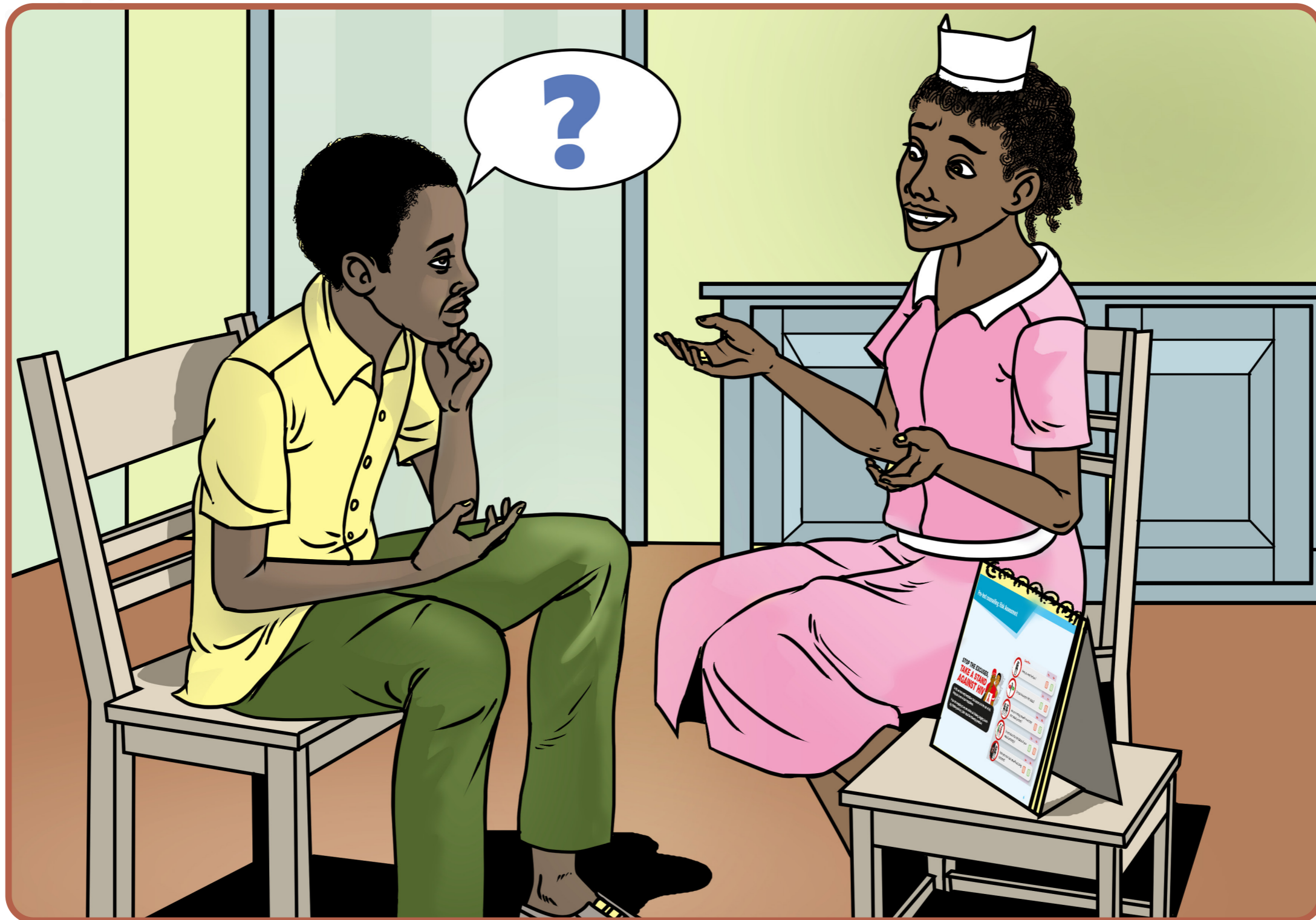
- Go for Safe Male Circumcision if you're not circumcised.

Remember: Your HIV status expires every time you have risky sex. Any sex related act without an HIV prevention method could result into HIV infection.



COPING WITH HIV POSITIVE STATUS

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COPING WITH HIV POSITIVE STATUS

If you test HIV positive, the following may come to your mind:

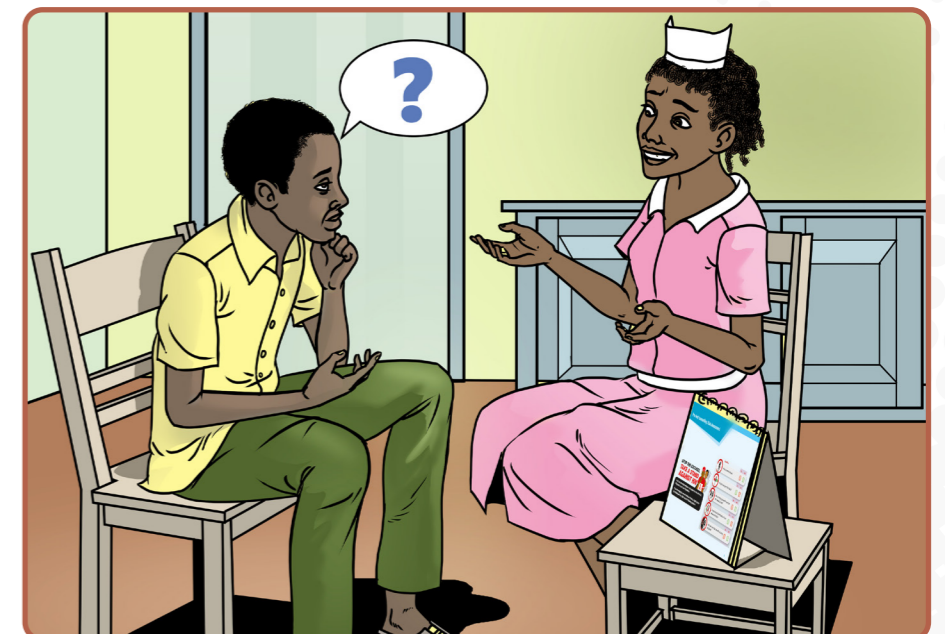
- What am I going to do now?
- How will my partner, family feel or think when they get to know my HIV status?
- Will I continue working?
- Am I going to die now?

It is normal to have fears about your HIV status. However, you can seek support on how to deal with the challenges. Common challenges or fears that you might face once you are tested positive include:

- Stigma (fear of being known to have HIV)
- Fear of disclosure
- Fear of losing your job
- Fear of violence
- Fear of death
- How you continue providing for my family
- How to talk to my family about my status (disclosure)

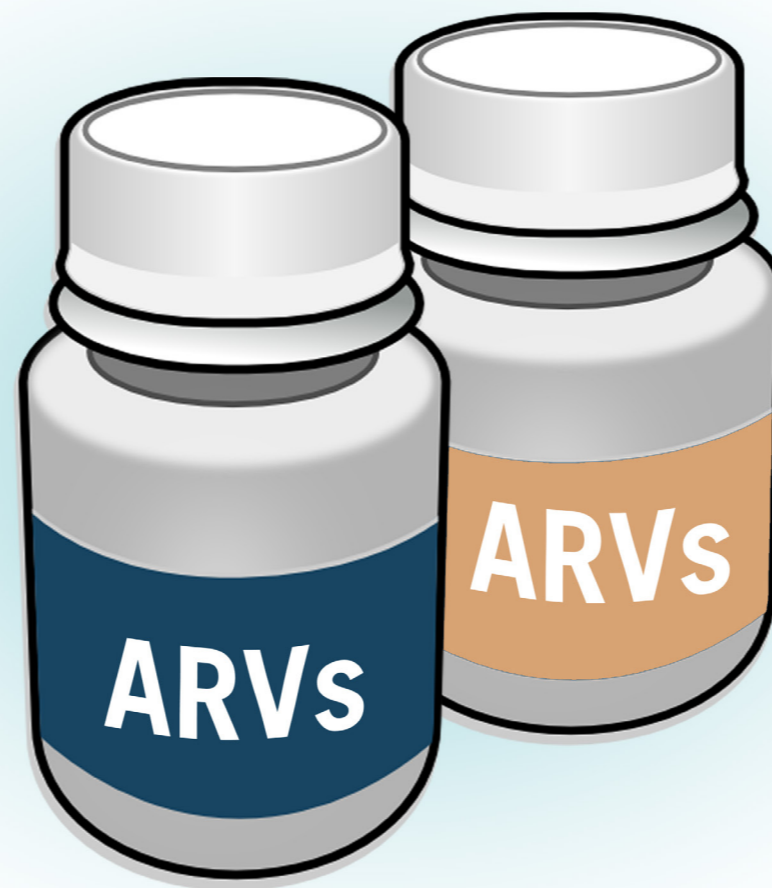
Some of the immediate actions you can take include;

- Talk to a friend or health worker about your fears and seek counsel.
- Ask to be initiated into care and treatment.
- Talk to the health worker about testing for TB.
- Seeking counsel will help you to appreciate your situation and prepare you for positive living.



ANTIRETROVIRAL TREATMENT (ART)

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ANTIRETROVIRAL TREATMENT (ART)

What is Antiretroviral Treatment (ART)?

ART are HIV drugs given to people living with HIV for life to reduce the amount of the virus in their body.

What is the goal of ART?

To reduce the number of the virus in the blood and increase the number of CD4 cells

Aims of taking ARVs

- To suppress viral load levels to undetectable levels
- To reduce the risk of falling from HIV related diseases/ opportunistic infection
- To reduce the risk of dying from HIV related diseases
- To reduce transmission of HIV.
- Optimize quality of life

Key facts about ARVs

- ARVs are drugs that are taken by people living with HIV throughout their lives to reduce the number of HIV viruses in the body.
- ARVs are taken for life and are only prescribed by a health worker.

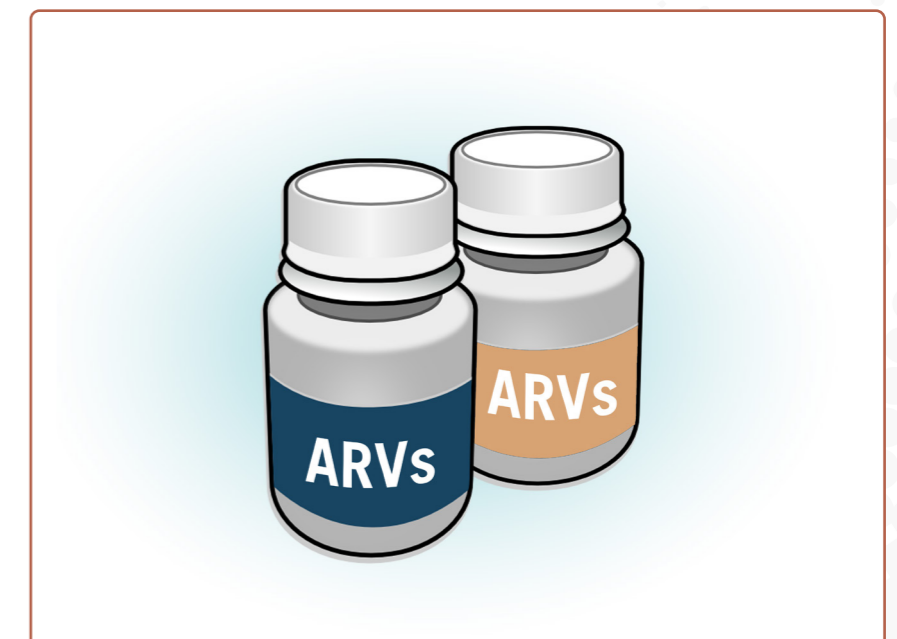
- ARVs are classified into different classes and they are always administered in combinations for maximum benefit.
- Once you stop taking ARVs, the HIV will multiply again and the drugs may be inefficient when they are resumed.
- ARVs for children and adults differ in terms of strength and at times in formulation.
- ARVs for children are available in smaller doses and forms that make their swallowing easy.
- ARVs for children keep on changing as they grow into adulthood
- When ARVs are swallowed poorly, they may become less effective at suppressing HIV.
- Some ARVs are taken once a day whereas others are taken twice a day.
- Mixing ARVs with other drugs not prescribed by the health worker is very dangerous as this could affect their effectiveness or cause unwanted side effects.

When to initiate ARVs

- ARVs are only prescribed and initiated by the health worker.
- ARVs are initiated as soon someone is confirmed

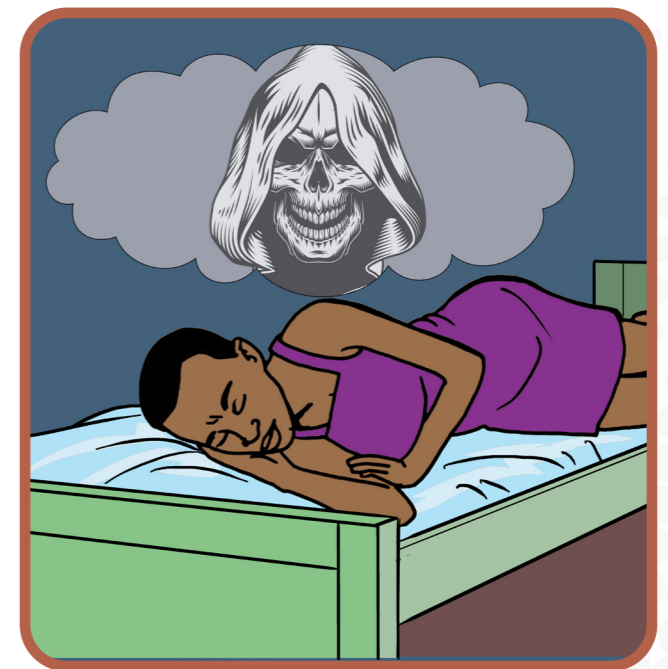
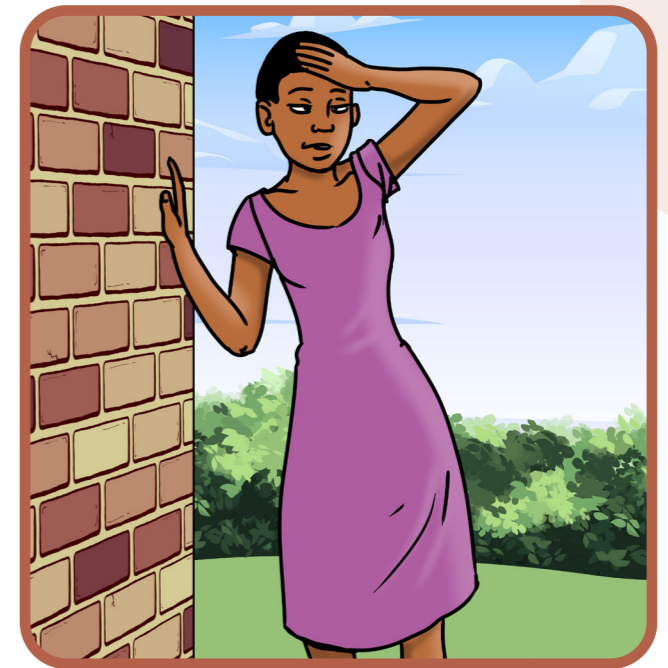
to have HIV disease.

- There are different antiretroviral drug combinations in Uganda and the healthcare worker will always guide on the best drug combination
- It is preferred to start ARVs on the same day. However, sometimes the health worker may delay starting ARVs due to some underlying conditions.
- Health workers may change the drugs the patients are taking to other drugs that are better at killing the virus. Patients are not allowed to change drugs on their own.



ART ADHERENCE

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ART ADHERENCE

Starting your treatment as soon as you test HIV positive will help you to stop the HIV from weakening your body.

ARVs may come with some side effects such as

- Nausea
- Bad Dreams
- Rashes
- Dizziness

These usually appear when you start treatment but disappear with time.

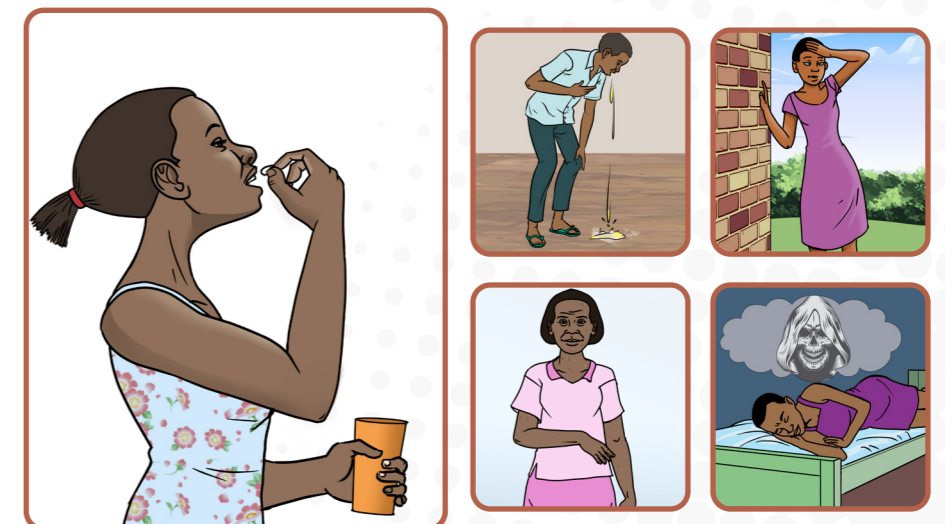
Types of ARVs

- Tenofovir Dissoproxil fumarate (TDF)
- Lamivudine (3TC)
- Dolutegravir (DTG)
- Efavirenz (EFV)
- Nevirapin (NVP)
- Abacavir (ABC)
- Atazanavir (ATV)
- Lopinavir (LPV)

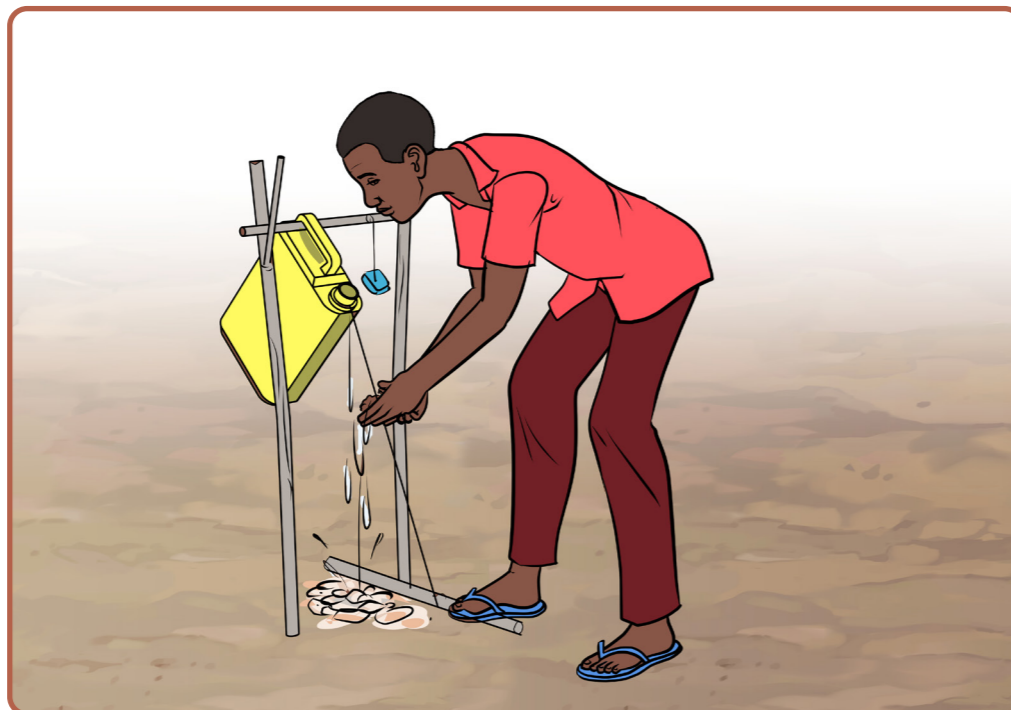
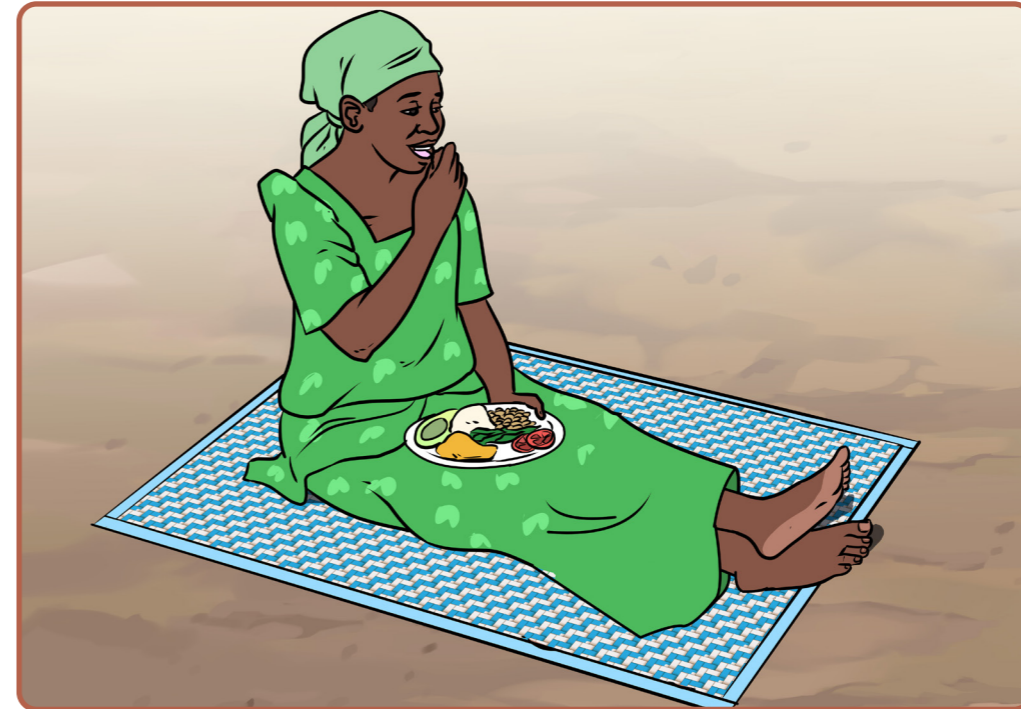
- Ritonavir (r)
- Combinations include
- TDF/3TC/DTG
- TDF/3TC/EFV400
- ABC/3TC/DTG
- TDF/3TC/ATV/r
- TDF/3TC/LPV/r

Note:

With non-Adherence to treatment, there are many chances of failing first line and then put on second line. Therefore, treatment because complicated since you can no longer take one tablet a day and more expensive once one is changed to another line.



HOW TO COPE WHILE ON ART



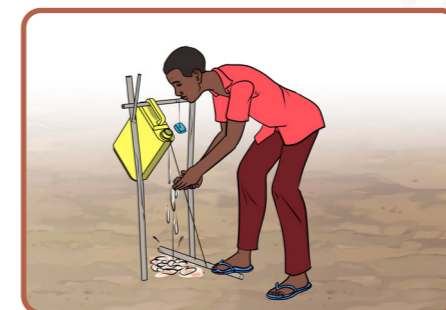
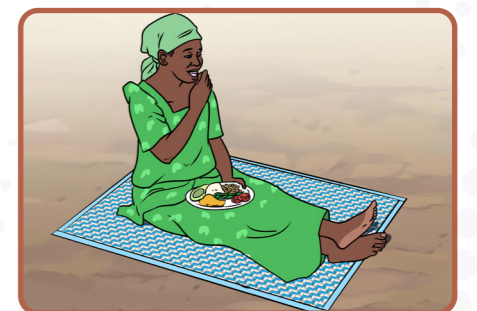
HOW TO COPE WHILE ON ART

Some of the actions you can take include:

- Ensure you take your drugs at the right time as advised by the health worker.
- Always remember to keep the appointment dates.
- Avoid alcohol and drug abuse.
- Avoid multiple sexual partners.
- Ensure to have a balanced diet.
- Keep good hygiene.
- Support your partner to go for an HIV test.
- Always plan and save some money for the next appointment.
- Talk to the health worker about the possibilities of joining groups or where you can get additional support.
- Get contacts of a health worker you trust to enable you seek support from time to time.

Benefits of adhering to ART

- ARVs stop HIV from making more virus. This allows the HIV infected person you to become healthier.
- No opportunistic infections such as TB, Cough, skin rash among others.



DRUG RESISTANCE

HIV CARE AND TREATMENT LITERACY FLIP CHART



DRUG RESISTANCE

Definition of drug resistance

HIV drug resistance is the ability of the virus to withstand a drug that once stopped their multiplication thus rendering it ineffective.

Factors responsible for drug resistance

- Unmanageable side effects from HIV medications, which cause treatment interference
- Skipping medication.
- Poor adherence.
- Drug interactions.
- Being given the wrong dose of medicine.
- Denial.
- Reinfection with a resistant HIV.

Effects of drug resistance to PLHIV

- Weakening of the immune system and increased occurrence of opportunistic infections
- Loss of weight and appetite and general body weakness
- Increased viral load
- Damage of body organs

Addressing drug resistance

- **Take your medication as prescribed every day.** This helps to block HIV replication. Use an alarm on your phone, watch, or another device to make sure you follow your prescribed dosing schedule. Fill prescriptions early, so you don't risk running out of medication.
- **Take your medication as directed.** Some HIV medications must be taken with or without food to ensure that the drug is properly absorbed into the body. Be sure you know how your medication should be taken.
- **Let your doctor know about side effects or other treatment challenges.** It is essential that you tell your doctor if any side effects such as nausea, diarrhea, depressed mood, or poor appetite are making it difficult for you to stick to your HIV treatment regimen. These side effects can usually be managed, and if not, your doctor may prescribe different combinations of medicines for you.
- **Let your doctor know about other medicines and treatments you are taking.** Other medicines can reduce the amount of HIV medicine in the body rendering them less effective. In some cases even over the counter and herbal medicines can reduce the effectiveness of HIV medicines.

- **Ask your doctor about testing for HIV drug resistance.** This type of testing looks for drug resistant mutations in your specific strain of HIV. This helps determine the medication that will be most effective for you.



TUBERCULOSIS PREVENTION, CARE AND TREATMENT

HIV CARE AND TREATMENT LITERACY FLIP CHART



TUBERCULOSIS PREVENTION, CARE AND TREATMENT

HIV CARE AND TREATMENT LITERACY FLIP CHART

What is TB?

- TB is a disease caused by a germ that attacks the lungs.
- It can also attack other parts of your body such as your bones, joints and intestines.
- TB is spread from one person to another through the air.
- You can have TB and have no symptoms for some time. This is “silent” TB. When TB becomes “active”, you will have a cough 2 or more weeks or symptoms in other parts of your body. TB can be cured if it is treated properly.
- If TB is not treated properly, it can lead to drug resistance and eventually death.

What are the symptoms of TB?

People with TB have certain warning signs. They include:

- A cough for 2 or more weeks
- Fever
- Night sweats
- Lack of appetite
- Loss of weight
- Chest pain
- Difficulty In breathing
- General weakness
- Coughing up sputum that is stained with blood.

TB and HIV

TB and HIV are not the same, but it is common for people who have one to also have the other.

- You can have TB only.
- You can have HIV only.
- You can have both TB and HIV

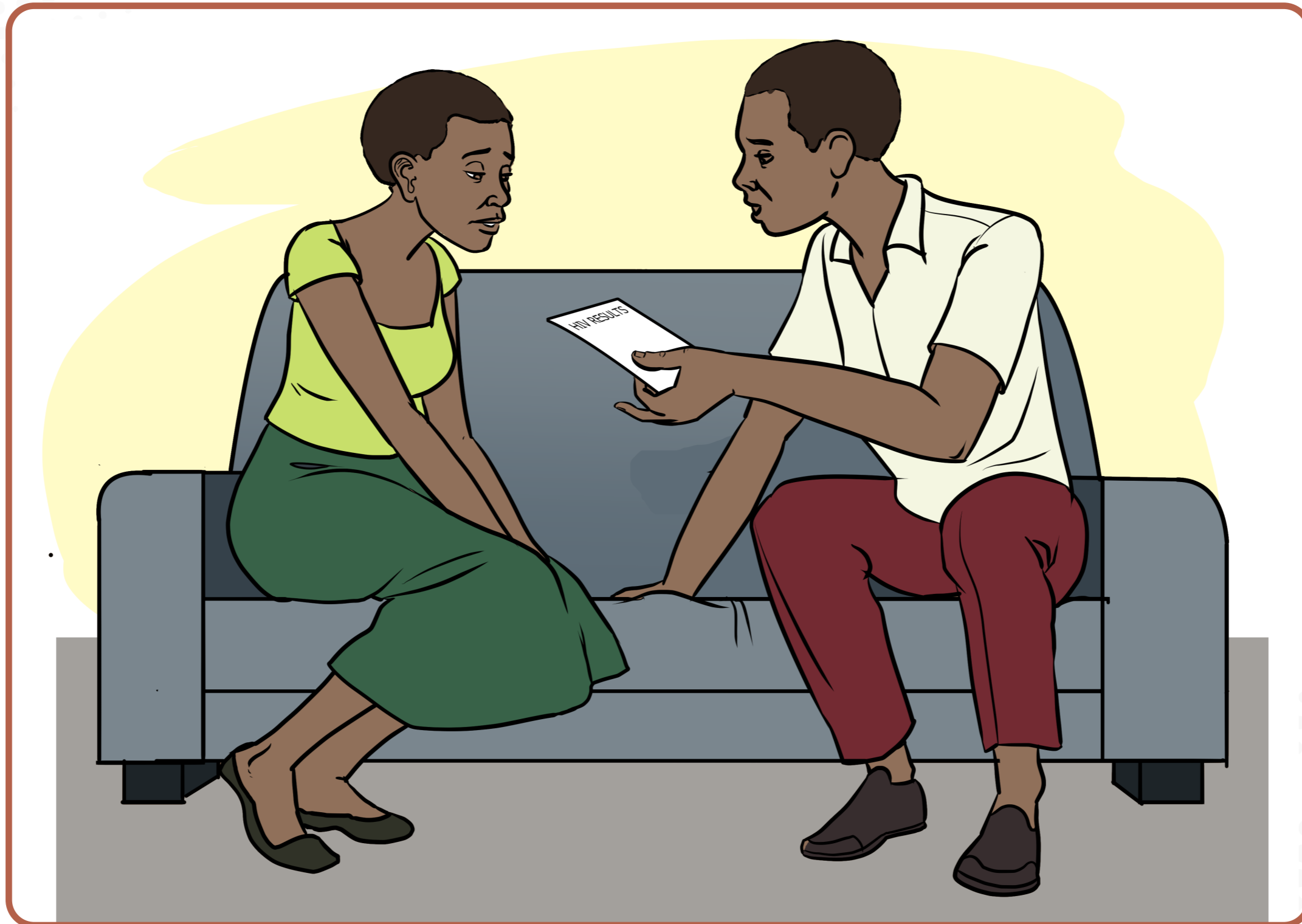
Half of the TB patients in Uganda also have HIV. This is because TB can easily attack people whose bodies cannot fight disease. HIV weakens the body's ability to fight disease. People with TB should test for HIV so they can get treatment early.

It's also important that people with HIV check for TB. If they have TB, they should take treatment to cure it. TB is the most common cause of death for people with HIV.



HIV POSITIVE STATUS DISCLOSURE

HIV CARE AND TREATMENT LITERACY FLIP CHART



HIV POSITIVE STATUS DISCLOSURE

What is HIV positive status disclosure?

- HIV positive disclosure is the process of revealing, when ready, one's HIV-positive status to others.
- For people living with HIV (PLHIV), the decision to disclose their HIV status to others is mostly a personal decision (except when there is a legal requirement to disclose to sexual partners).
- They might disclose to everyone (full disclosure), disclose to some people (partial disclosure) or disclose to no one (non-disclosure).

Who are People Living with HIV most likely to disclose to?

- People living with HIV are most likely to disclose their status to family, friends, sexual partners, colleagues, healthcare providers and others gradually and selectively over time.

Steps towards disclosure

Disclosure is a process and not a one-off event. It is important that people do not rush into disclosure but think through carefully and plan ahead. The ideas and advice below should be shared with clients;

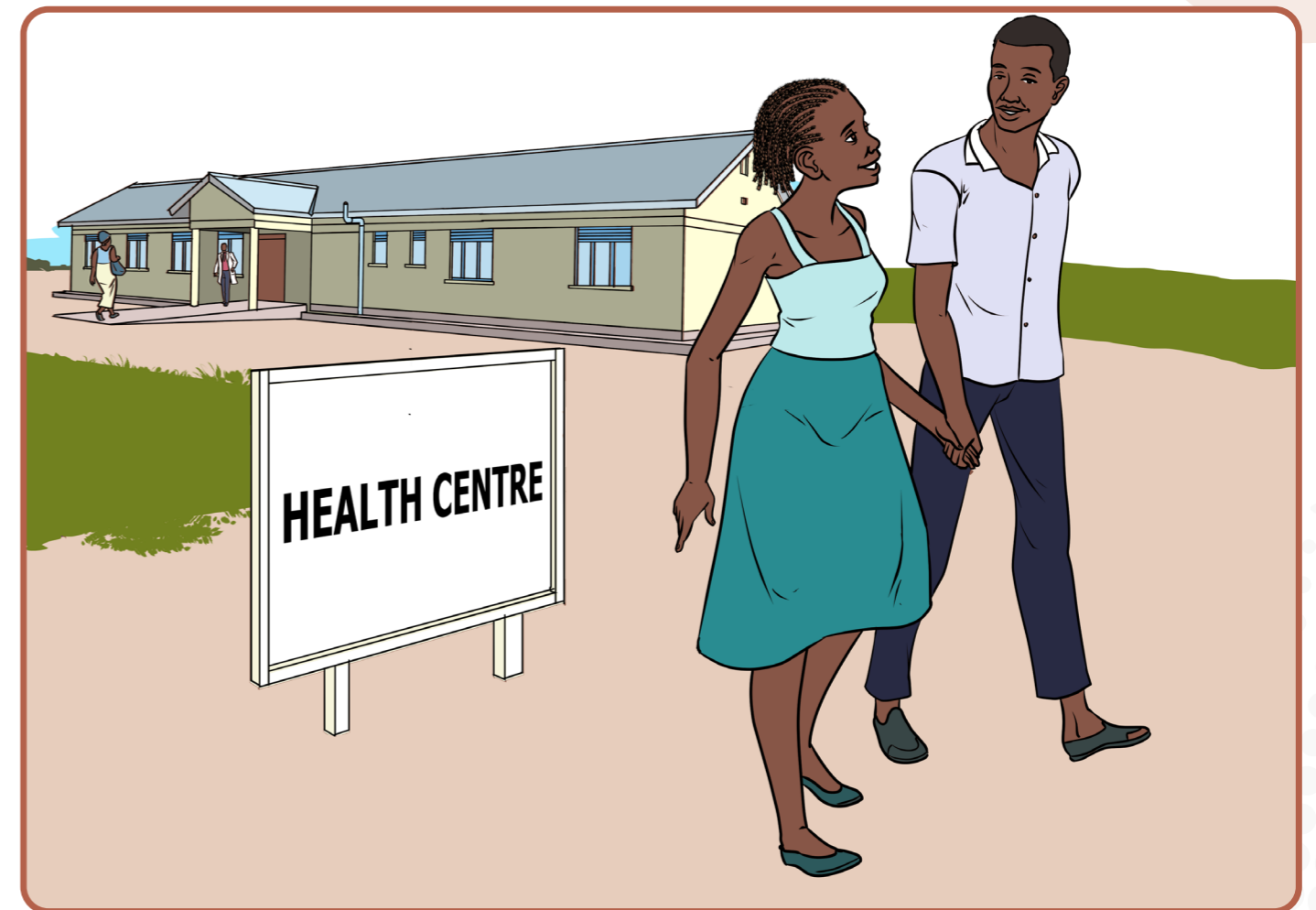
- Help the client think through the decision to disclose and ensure that's what they want to do and help them plan how they are going to go about it.

- Identify sources of support, such as support groups for PLHIV, church members, and counselling organizations.
- Use role plays and "empty chair" techniques to coach and help the client prepare for disclosure.
- Always provide support and reassurance to the client and help them accept themselves positively.
- Discuss about sexual partners who need protection from infection.
- Prepare the client for a shocked or even hostile reaction.
 - Reassure the client that with time people close to them should learn to accept their HIV status.
 - Assist the client think about likely responses from people they disclose to; they will need to assess how much the person they plan to disclose to knows and understands about HIV/ AIDS. This will help the client package the disclosure in a less traumatic manner for both.
 - The client should be strong enough to allow others to express their feelings and concerns after disclosure.
- Help the client realize that once the decision to disclose is made, it may be easier to start with those they are close to and trust; relatives, family, friends.
- Answer the clients questions and fill information gaps.

Counselling process of disclosure

1. Allow the client to develop trust in you and feel at ease.
2. Get to know the client especially what HIV and AIDS means to them.
 - 3. Assess the client's ability to cope and establish their sources of support.
 - 4. Discuss implications of disclosure fully, to help the client consider and prepare for the reactions of the people they might disclose to.
 - 5. Help the person develop a plan on disclosure. The plan should include;
 - a. All necessary preparations they need to make before disclosure.
 - b. Level of disclosure; full or partial.
 - c. Who they will inform first.
 - d. How and where they will disclose.
 - e. This way, the client remains in control of what to say and how to say it.
6. Discuss the implications of disclosing to inappropriate persons or groups.
7. Arrange follow on appointments/meetings to review this process.
 - 8. You must protect the clients against undue pressure to disclose.

WHAT ARE THE BENEFITS OF DISCLOSURE?



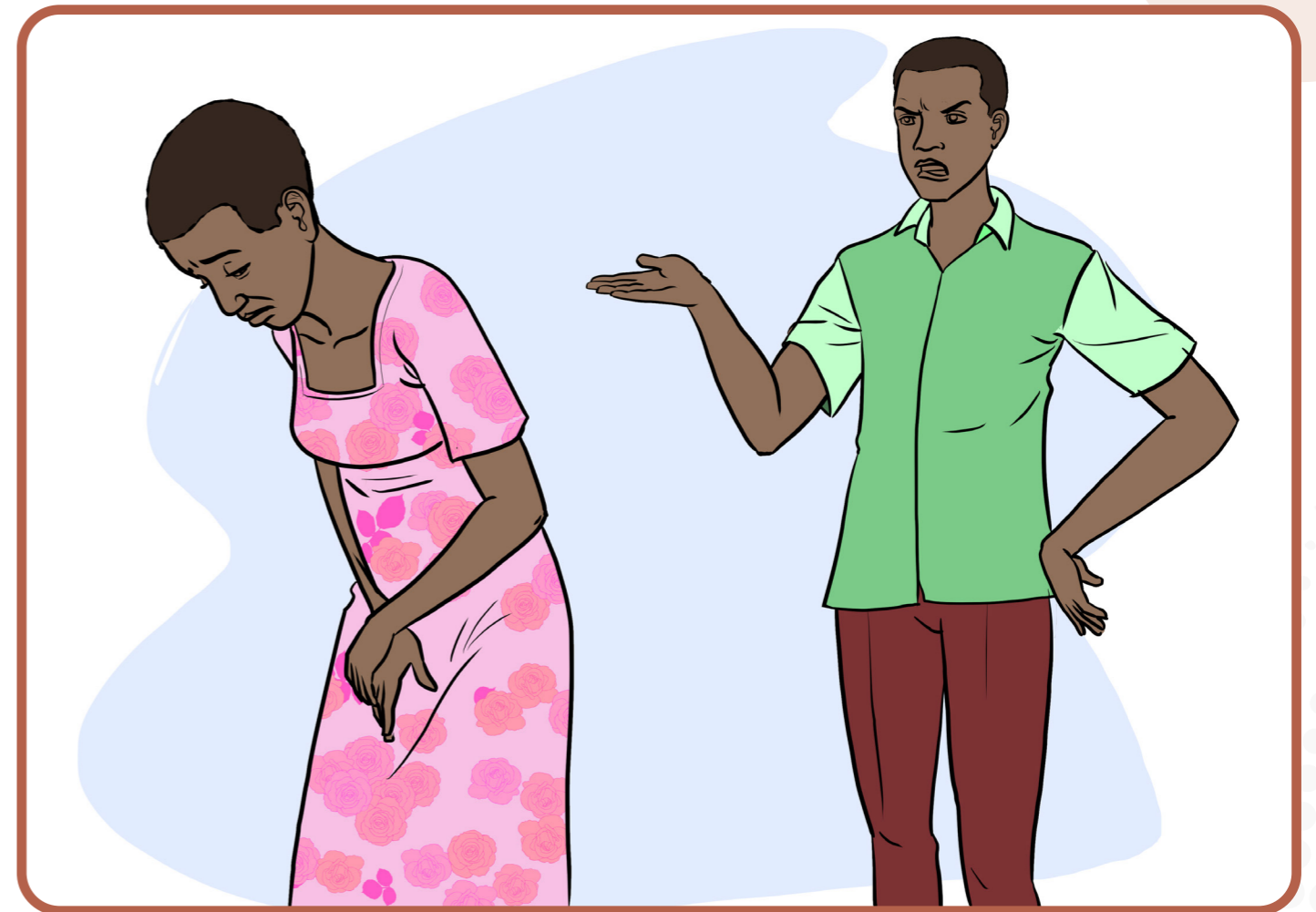
WHAT ARE THE BENEFITS OF DISCLOSURE?

- Disclosure can help a person accept their status and reduce the stress of coping on their own. "A problem shared is a problem halved."
- Disclosure can help a person access the medical services care and support they need.
- Disclosure can help people protect themselves and others/loved ones. Openness about HIV status may help one negotiate for protected sex.
- One who discloses might be better equipped to influence others to avoid infection.
- As more people disclose, stigma, discrimination and denial that still surrounds HIV/AIDS reduces.
- Disclosure can stop rumors and suspicion especially if someone has signs and symptoms of AIDS.
- It reduces the stress of keeping a secret.
- It promotes responsibility; it can help you and your loved one's plan for the future.
- People living with HIV who disclose their status to others report experiencing increased social support, better self-esteem, lower feelings of depression and increased intimacy with sex partners.
- Disclosure is also associated with better health and healthcare outcomes including retention in HIV care, treatment, and adherence.



NEGATIVE CONSEQUENCES OF DISCLOSURE

HIV CARE AND TREATMENT LITERACY FLIP CHART



NEGATIVE CONSEQUENCES OF DISCLOSURE

What are some of the possible negative consequences of disclosure?

The stigma attached to HIV/AIDS means that disclosure can sometimes lead to negative consequences, especially in the short term and PLHIV need to be prepared for them. These include:

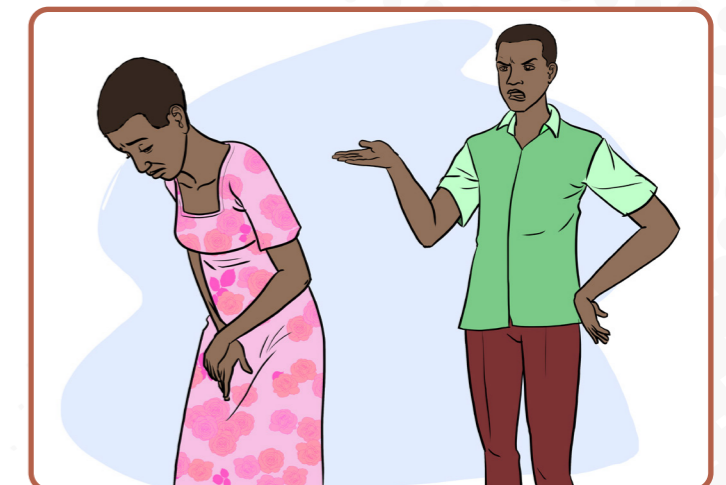
- Problems in relationships, whether with sexual partners, family, friends, community members, work colleagues.
- The experience or feelings of abandonment, rejection, and constant judgment.
- Loss of family and friends
- Stigma and discrimination.
- Threat or experience of violence and abuse.
- It might result into pressure to assist in AIDS work or become role models.

What are the possible consequences of non-disclosure?

Sometimes it seems there is too much to lose if you disclose but non-disclosure can have major consequences. Some of the possible consequences of non-disclosure include;

- Lack of support. Family and friends may not give the support the client needs. Client might have to deal with everything on their own.
- Placing others at risk of infection, particularly sexual partners, and unborn children and a risk of reinfection for you as well.

- Inability to access appropriate medical care, counseling or support from groups.
- People might become suspicious of your actions if they don't understand your HIV status.



COPING WITH STRESS RELATED TO DISCLOSURE

HIV CARE AND TREATMENT LITERACY FLIP CHART



COPING WITH STRESS RELATED TO DISCLOSURE

HIV CARE AND TREATMENT LITERACY FLIP CHART

How does one cope with stress related to disclosure?

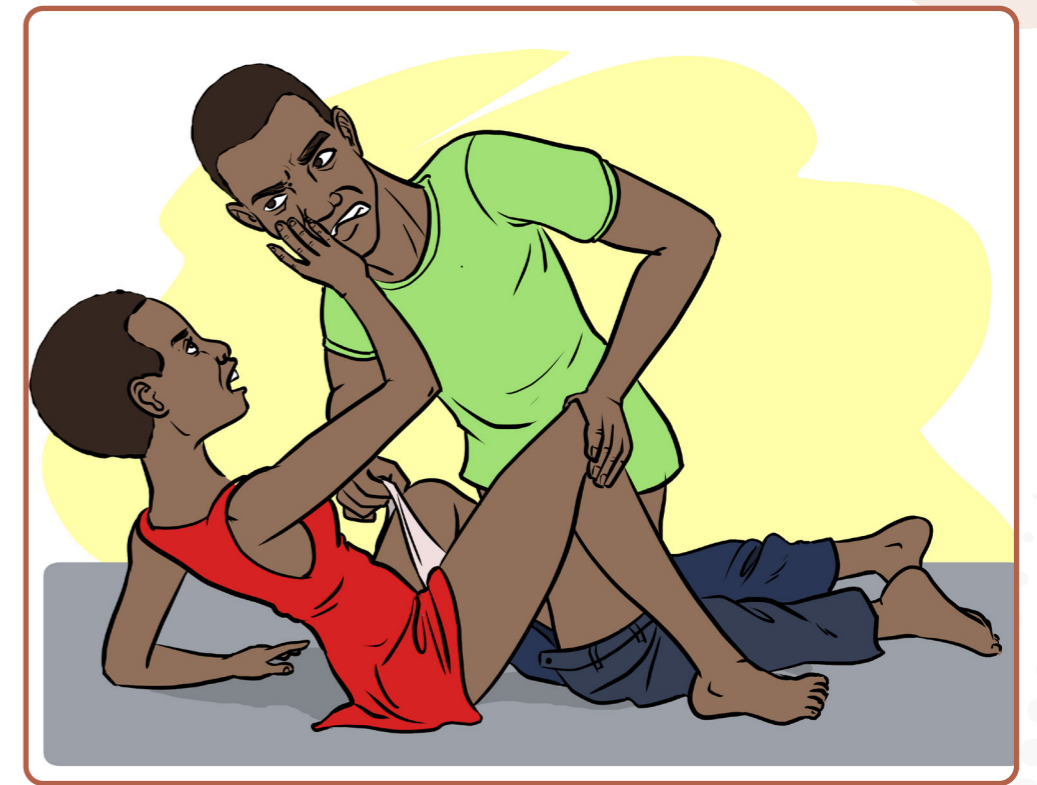
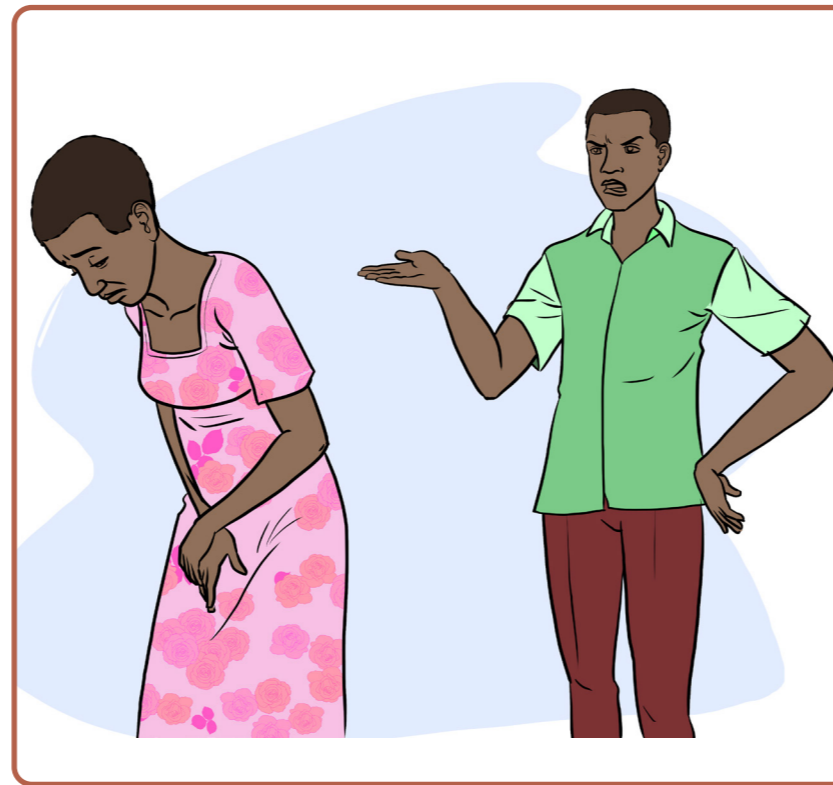
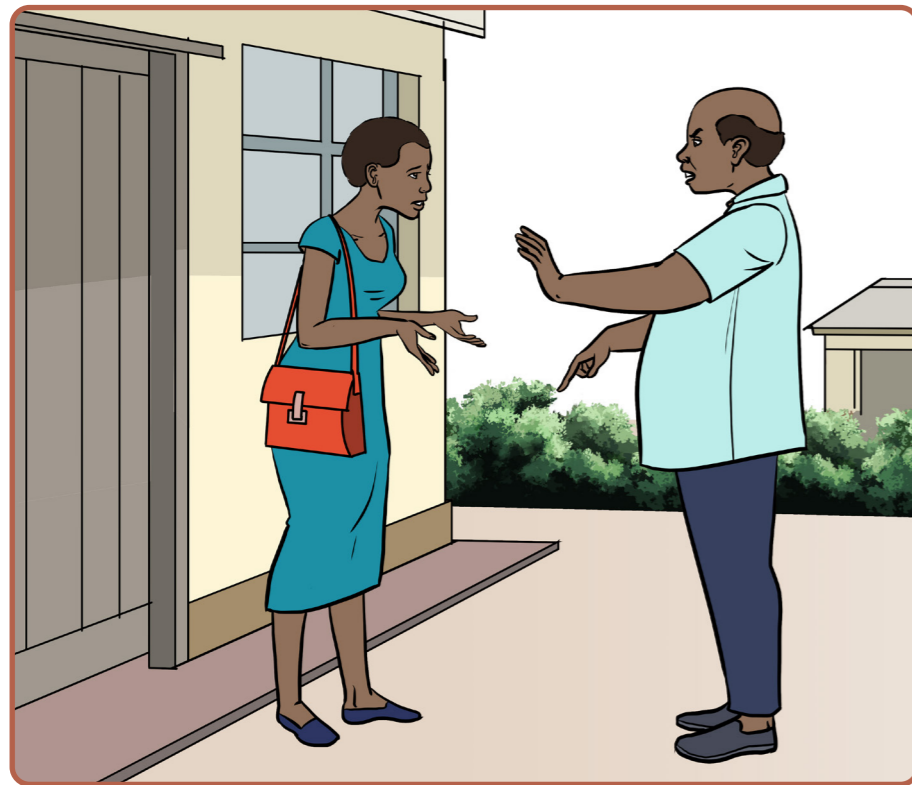
Whether you opt for disclosure or non-disclosure or experience involuntary disclosure, it is important to try and adopt positive ways of coping with stress and anger. Some of the options include;

- Singing
- Prayer
- Long walks
- Spending time with family and friends
- Joining a support group
- Talking to a counsellor



PREVENTION OF GENDER-BASED VIOLENCE

HIV CARE AND TREATMENT LITERACY FLIP CHART



PREVENTION OF GENDER-BASED VIOLENCE

Gender-Based Violence

It is the physical, sexual, economic and psychological abuse which an individual or group of persons suffer based on what society thinks about what men/boys and women/girls are, how they should or should not behave, what they should or should not do, what their status and entitlements are, among others.

GBV takes five forms, namely;

Physical Violence includes battering and beating

Sexual Violence includes rape, child sexual abuse, defilement and incest, sexual assault, sexual harassment, forced prostitution and trafficking in persons.

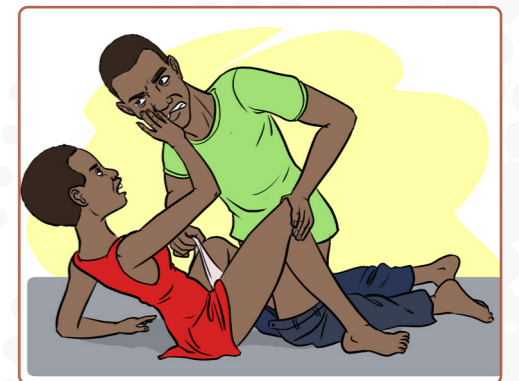
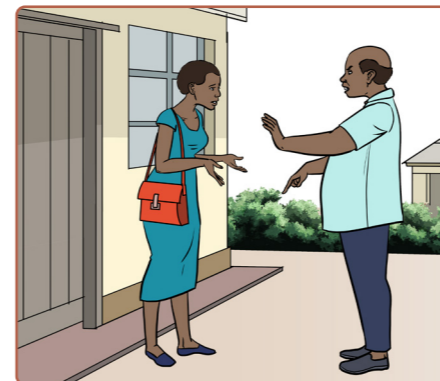
Harmful Traditional practices such as Female Genital Mutilation, early and forced marriage, widow inheritance and bride price-related violence,

Economic Violence such as denial of assets and economic livelihoods.

Emotional and Psychological Violence such as verbal abuse, humiliation, confinement.

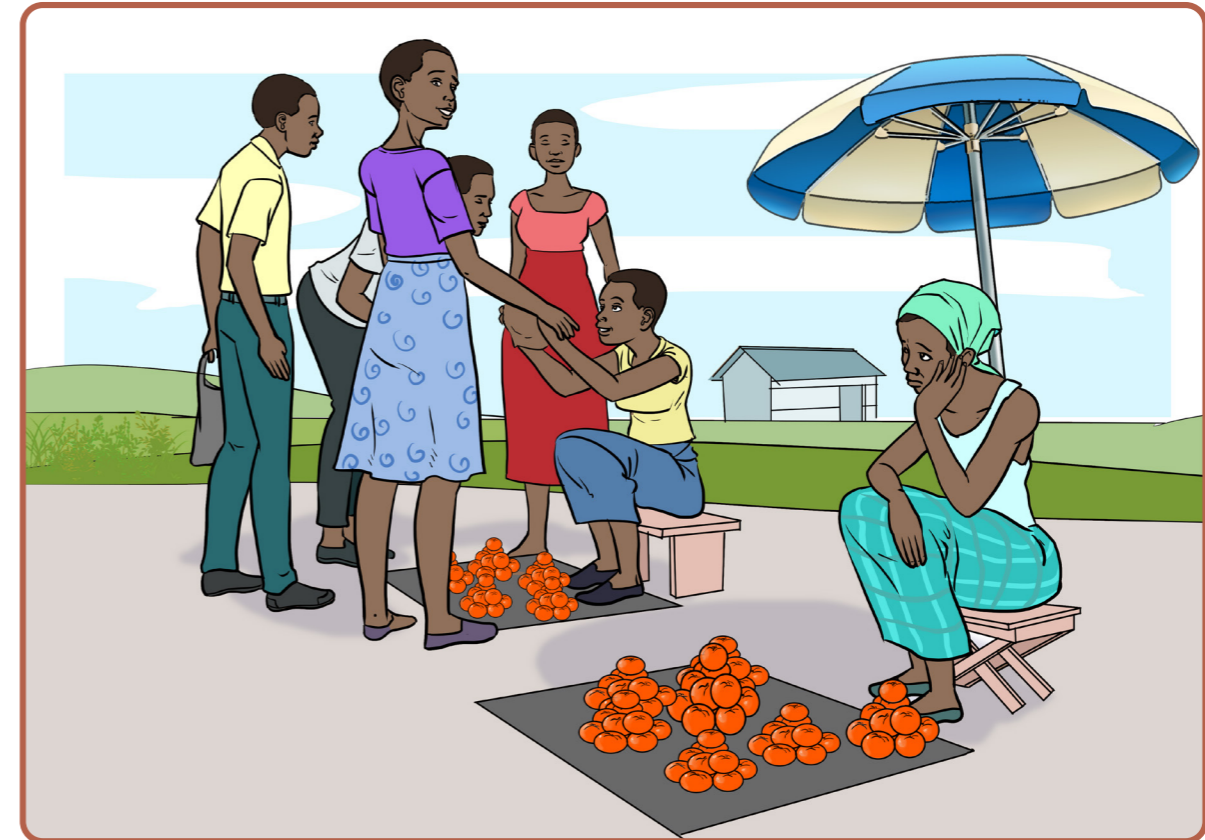
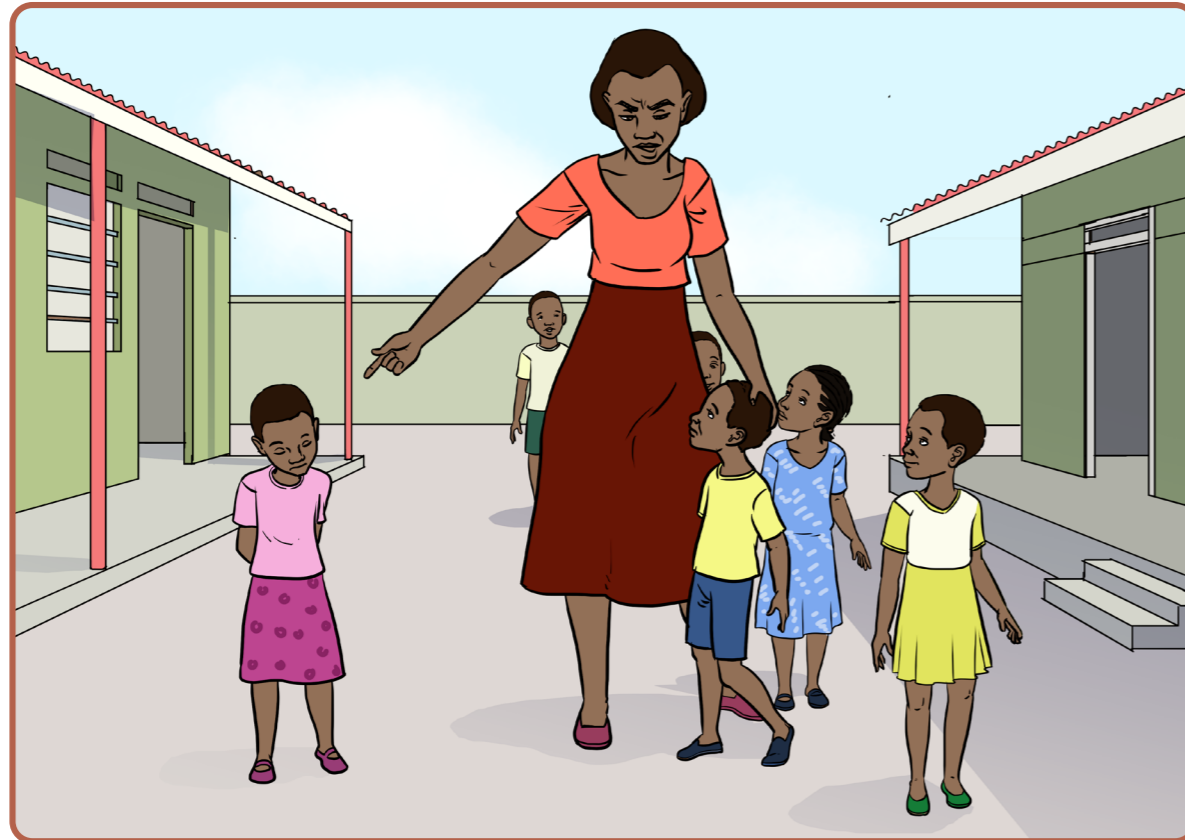
GBV survivor will need:

- Referral for medical examination
- Psychosocial support
- Legal support and counseling
- Child protection services (e.g. emergency-out-of family care, reintegration into family care when possible, permanent options when reintegration into family impossible)
- Economic empowerment
- Emergency shelters



DEALING WITH STIGMA AND DISCRIMINATION RELATED TO HIV

HIV CARE AND TREATMENT LITERACY FLIP CHART



DEALING WITH STIGMA AND DISCRIMINATION RELATED TO HIV

HIV CARE AND TREATMENT LITERACY FLIP CHART

What is stigma and discrimination?

- Stigma is the shame or disgrace attached to something regarded as socially unacceptable. People who are stigmatized are marked out as being different and are blamed for that difference.
- Discrimination means treating one person differently from another in a way that is unfair – for example, treating one person less favorably simply because he or she has HIV.

What are the major drivers of stigma against PLHIVs?

The three key drivers of stigma against PLHIVs include:

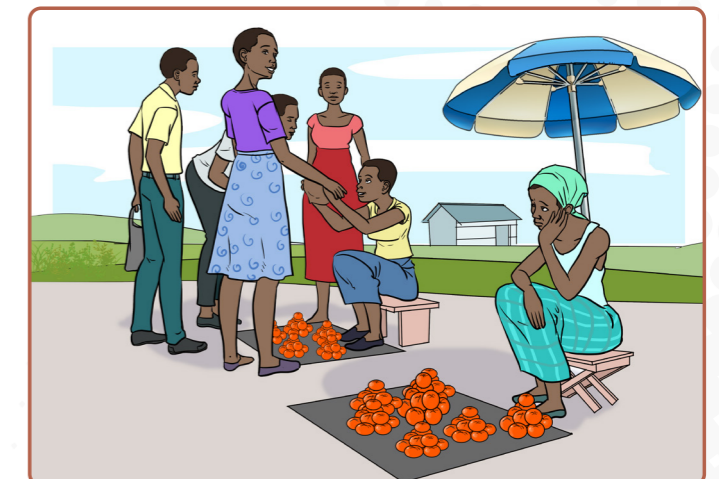
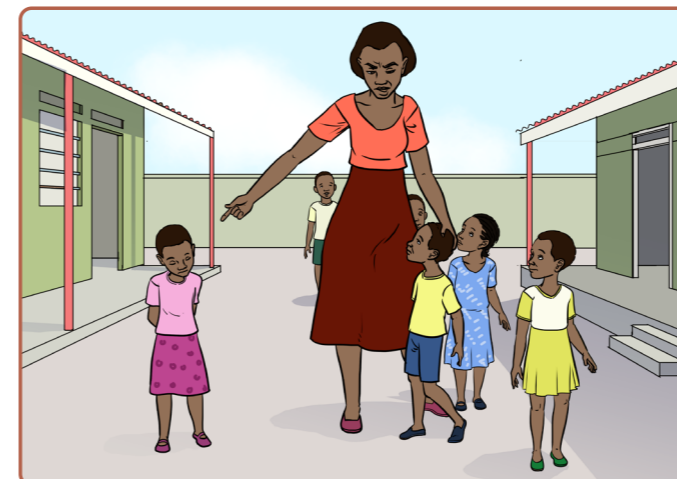
- Lack of awareness and knowledge of stigma and discrimination
- Fear of acquiring HIV through everyday contact with infected people
- Values that link PLHIV with behavior considered 'improper and immoral', thus justifying discrimination.

What are the common examples of stigma?

Common examples of HIV stigmatization in our communities include;

- An individual who spends more money, energy and time traveling to a faraway clinic to get his/her monthly supply of antiretrovirals, fearing that her colleagues will find out that she is HIV positive if she went to a nearby clinic
- A doctor who self-tests and self-medicates, and never discusses his HIV status to anyone for fear of losing professional credibility

- A woman who is threatened with violence and disinherited by her family when she discloses her HIV status
- A school that asks orphans to line up separately from other children, not thinking of the impact in the playground
- A tomato seller whose stall is boycotted by a fearful community when rumors are spread about her HIV status
- A religious leader who uses his weekly sermon to teach that HIV is God's punishment to people who sin/mis behave



EFFECT OF STIGMA



EFFECT OF STIGMA

What is the effect of stigma?

- Stigma has various negative effects at the individual, family, community, and national levels that shouldn't be underestimated.
- For an individual, stigma can mean the loss of family and support, being shamed and blamed, and losing self-esteem. It can even result in the loss of someone's livelihood when their job is affected.
- Families too are affected by stigma.
 - Children living with HIV and orphans may be segregated, neglected, or punished more harshly than others in the family, or they may miss out on education and other opportunities.
 - HIV is passed from husband to wife (or vice versa) because of the fear of what disclosure could bring.
 - Even suggesting condom use in a relationship can bring judgments and assumptions.
- The impact of stigma can be felt from the community all the way up to the national level;
 - Clinics and schools become understaffed because health workers and teachers are sick;

- Stigma or fear of stigma prevents people from going for HIV testing and treatment; and education standards fall, healthcare is less available, and productivity levels drop because of sickness or discrimination.
- Stigma has had a huge impact on many countries' development.
- Stigma acts as a major barrier to HIV testing and prevents people living with HIV from accessing antiretroviral treatment programs.
 - Stigma effectively reduces survival rates as delayed testing leads to delayed diagnosis and delayed access to treatment.
 - Stigma also impedes adherence to medication. Antiretroviral treatment needs strict adherence to be effective, and adherence is the strongest determinant of patient survival.
 - If people are afraid to disclose their HIV status to their family and friends because of stigma, they may resort to hiding their treatment and be more likely to miss doses.

How can we fight stigma in our communities?

- PLHIVs are encouraged to disclose their status to their loved ones, partners and families and friends. They can support you emotionally and help you adhere to your treatment.
- PLHIVs are encouraged to join support groups.
- Family members, friends, schools, employers, health workers and communities at large are encouraged to stop stigmatizing people living with HIV and instead support them emotionally and to adhere to their treatment.



PSYCHOSOCIAL SUPPORT

HIV CARE AND TREATMENT LITERACY FLIP CHART



PSYCHOSOCIAL SUPPORT

What is Psychosocial support?

The term “Psychosocial” is made up of two words “Psycho” and “social”.

“Psycho” refers to psychological factors such as thoughts, feelings, understanding, values & beliefs.

“Social” refers to social aspects/factors such as relations culture, family, community, roles, and tasks.

- Psychosocial support (PSS) is a way of helping a person to cope with emotional, social, mental, economic, legal and spiritual needs. It addresses the ongoing psychological and social problems of HIV infected individuals, their partners, families, and caregivers, therefore assisting them in making informed decisions, coping better with illness, and dealing more effectively with discrimination.
- It, therefore, improves the quality of their lives and eliminates/ reduces the risk of HIV transmission.

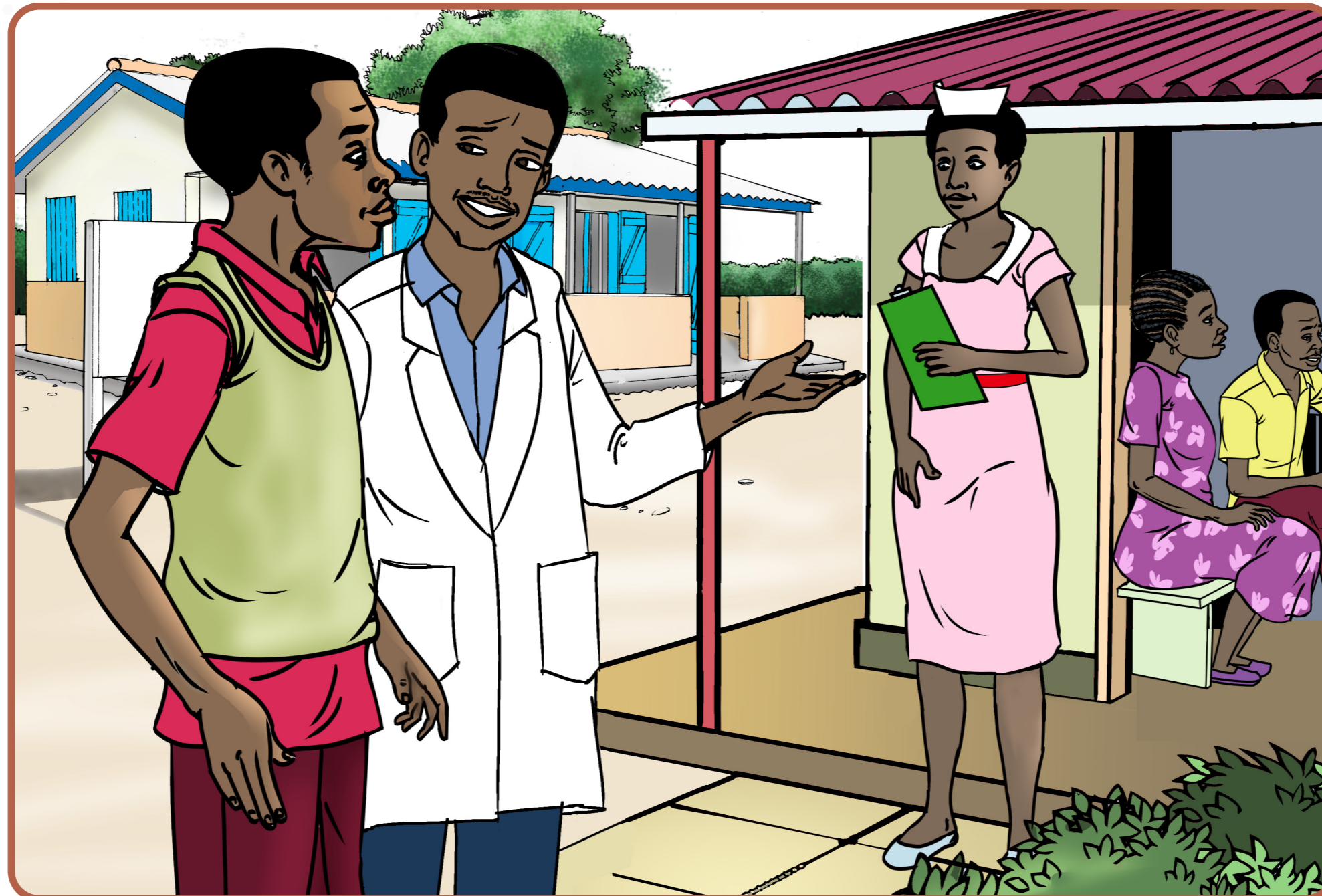
Why psychosocial support is important to PLHIV and caregivers

- Helps someone accept their situation and puts them on course to deal with it.
- Providing psychosocial support to PLHIV and their caregivers is important because it can help clients and caretakers gain confidence in themselves and their coping skills.
- Adequate psychosocial support can increase clients’ understanding and acceptance of all comprehensive HIV care and support services.
- Psychosocial well-being is associated with better adherence to HIV care and treatment.
- HIV can be a chronic stressor that places PLHIV and their families at risk for mental health problems. Mental health and physical health are closely related
- Ongoing psychosocial support may help prevent PLHIV from entering the “most-at-risk” category or from developing more severe mental health problems.



DIFFERENTIATED HIV CARE SERVICE DELIVERY

HIV CARE AND TREATMENT LITERACY FLIP CHART



DIFFERENTIATED HIV CARE SERVICE DELIVERY

What is Differentiated HIV Care Service Delivery

- Differentiated Service Delivery refers to various ways of providing HIV prevention, care and treatment services that are tailored to the needs and preferences of PLHIV with the aim of maintaining good clinical outcomes and improving efficiency in service delivery

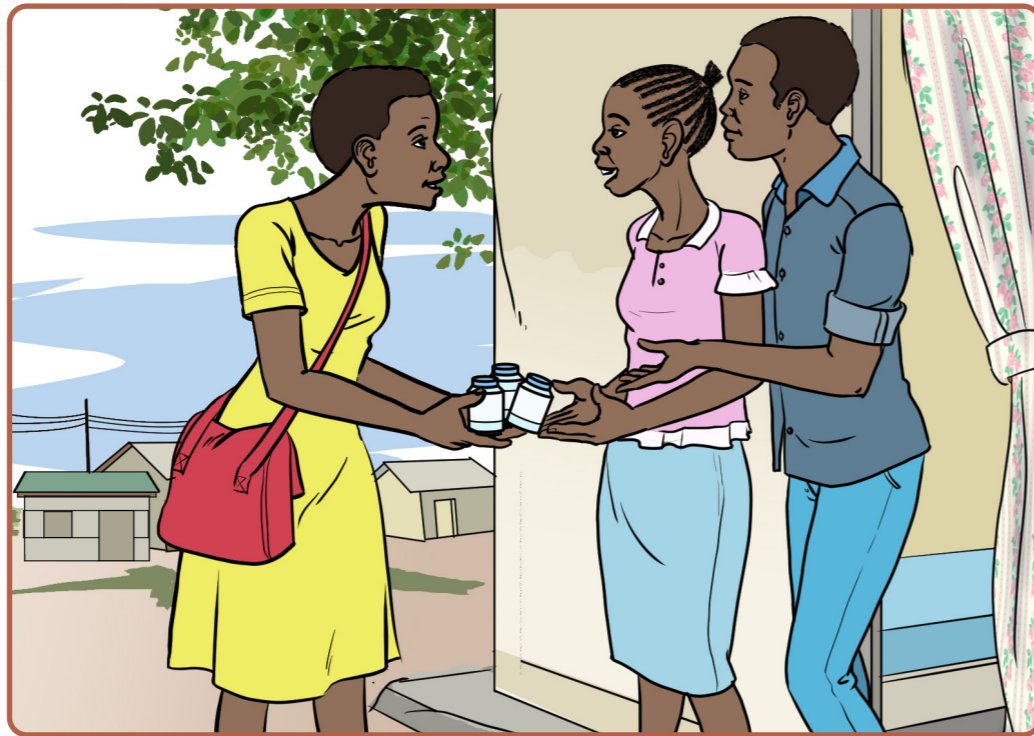
What is a community in the HIV Care service delivery models?

- A community refers to a point other than the health facility where a client accesses the HIV services e.g., home, places of worship, pharmacy etc.



COMMUNITY HIV CARE SERVICE DELIVERY MODELS

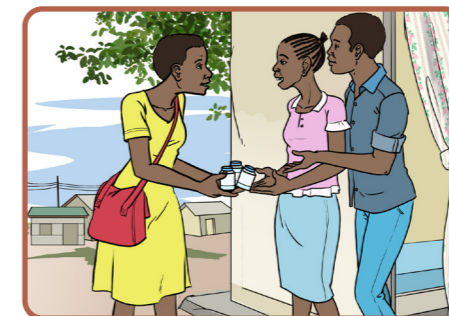
HIV CARE AND TREATMENT LITERACY FLIP CHART



COMMUNITY HIV CARE SERVICE DELIVERY MODELS

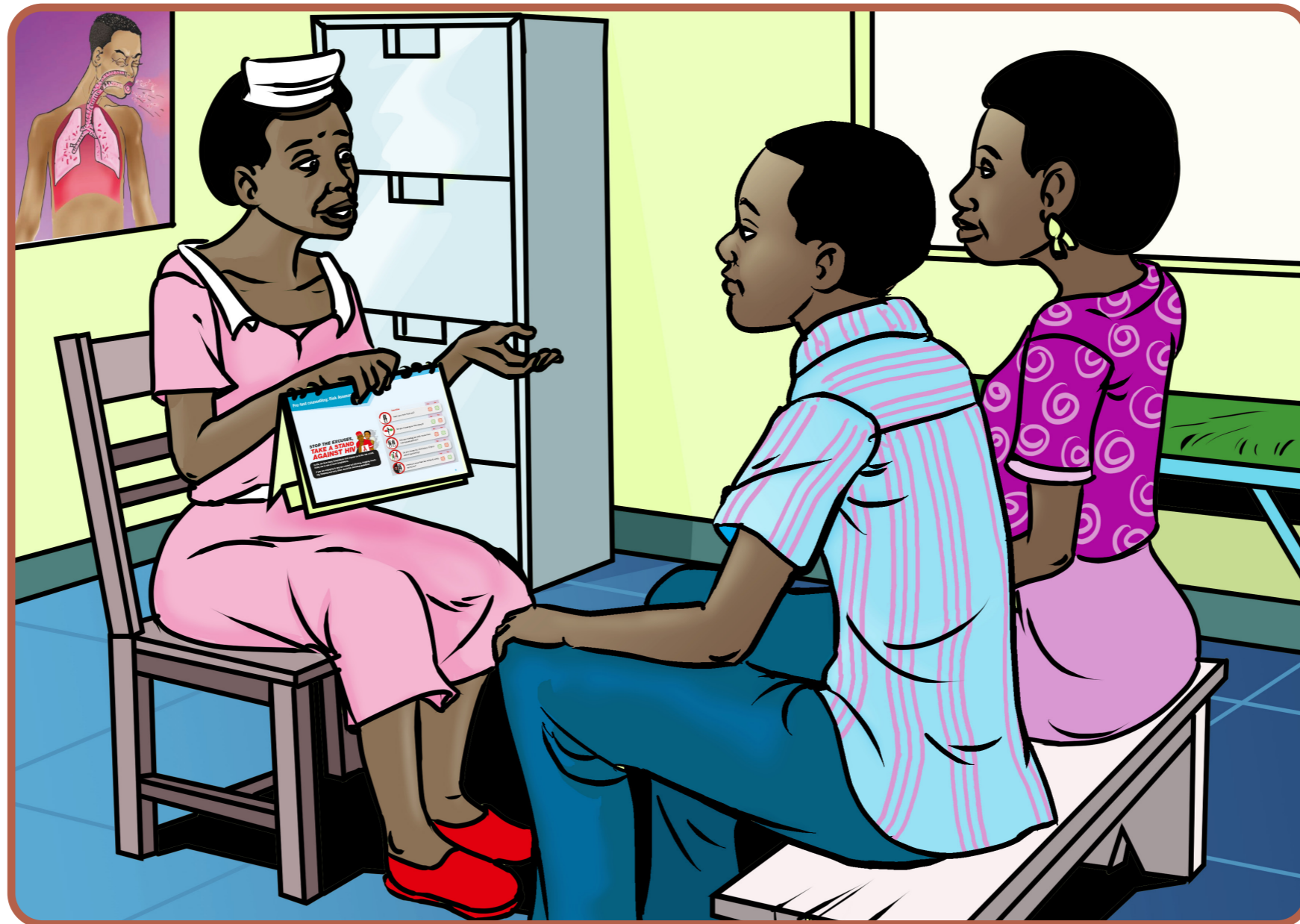
What are the community HIV Care service delivery models?

- Community Client Led ART Delivery (CCLAD): The CCLAD model comprises of client groups (3-6 members) living in the same community living near each other.
- Members take turns to pick up ARVs at the health facility and distribute them among the other group members in the community.
- Community Drug Distribution Points (CDDPs): In this approach, health workers pre-pack medicines and deliver them to a group of clients (10-50 living in the same locality and appointed at a particular community venue.
- During this visit, the health worker is also able to provide viral load tests, counseling, and others.



FACILITY-BASED HIV CARE DELIVERY MODELS?

HIV CARE AND TREATMENT LITERACY FLIP CHART



FACILITY-BASED HIV CARE DELIVERY MODELS?

What are the facility-based HIV Care Delivery models?

- Facility Based Individual Management (FBIM): It is an approach for all unstable/complex clients where an individual client is given a scheduled appointment for a thorough clinical assessment, review of blood tests and other services e.g., counselling.
- Facility Based Groups (FBG): This approach is applicable for both stable and unstable clients desiring peer support. This includes family support groups for pregnant and lactating mothers, children, adolescent groups etc., regardless of the age and duration on ART (but most likely clients will have at least made a month on ART).
- Fast Track Drug Refills (FTDR): It ensures that stable clients who choose to remain at the facility are able to get their medicine refills without having unnecessary clinical evaluations and hence spending minimal time at the facility. 20 years plus.

How the client and the provider agree on a suitable model

- Health worker will assess the suitability, discuss with the client, and agree on the best model.

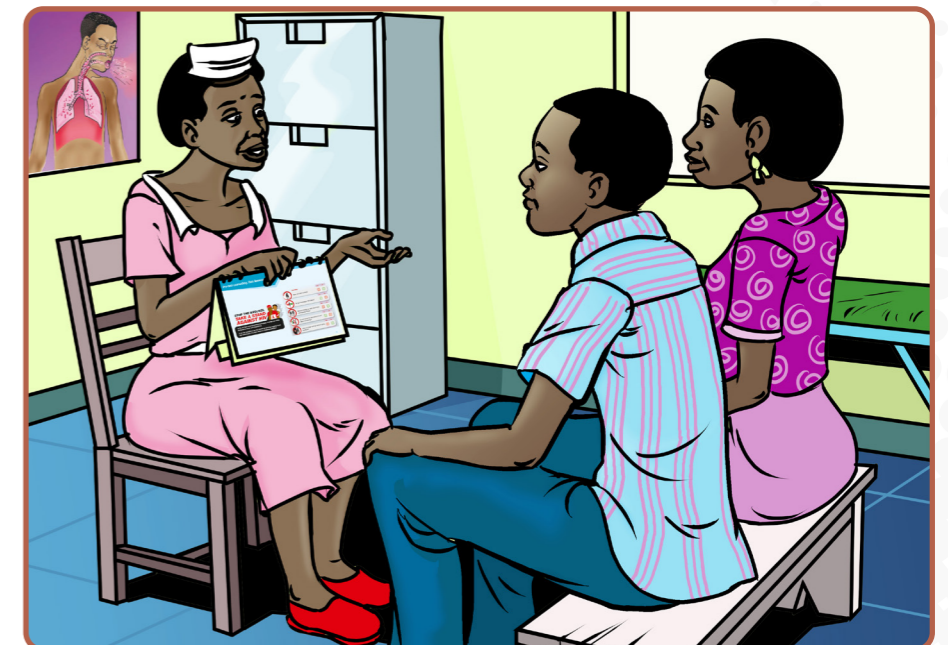
What are the client benefits of Community Care HIV Service delivery?

- Reduced number of facility visits for clients leading to reduced costs.
- Clients are empowered to manage their own health.
- Reduced waiting time and improved client satisfaction.

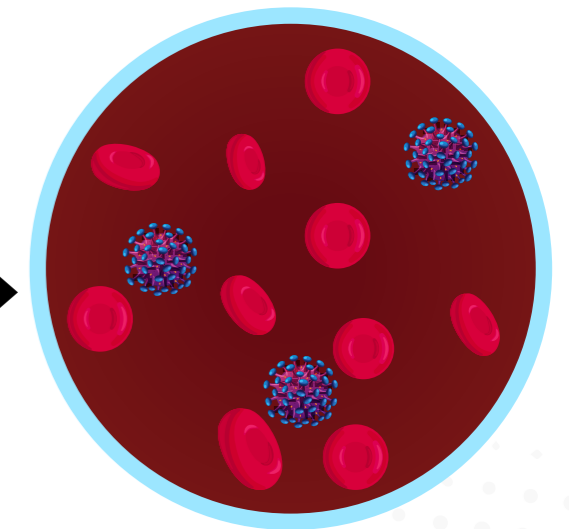
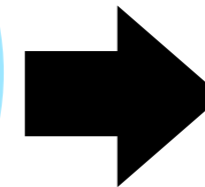
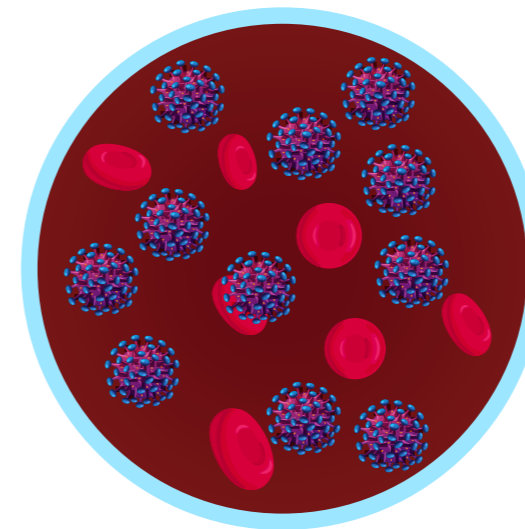
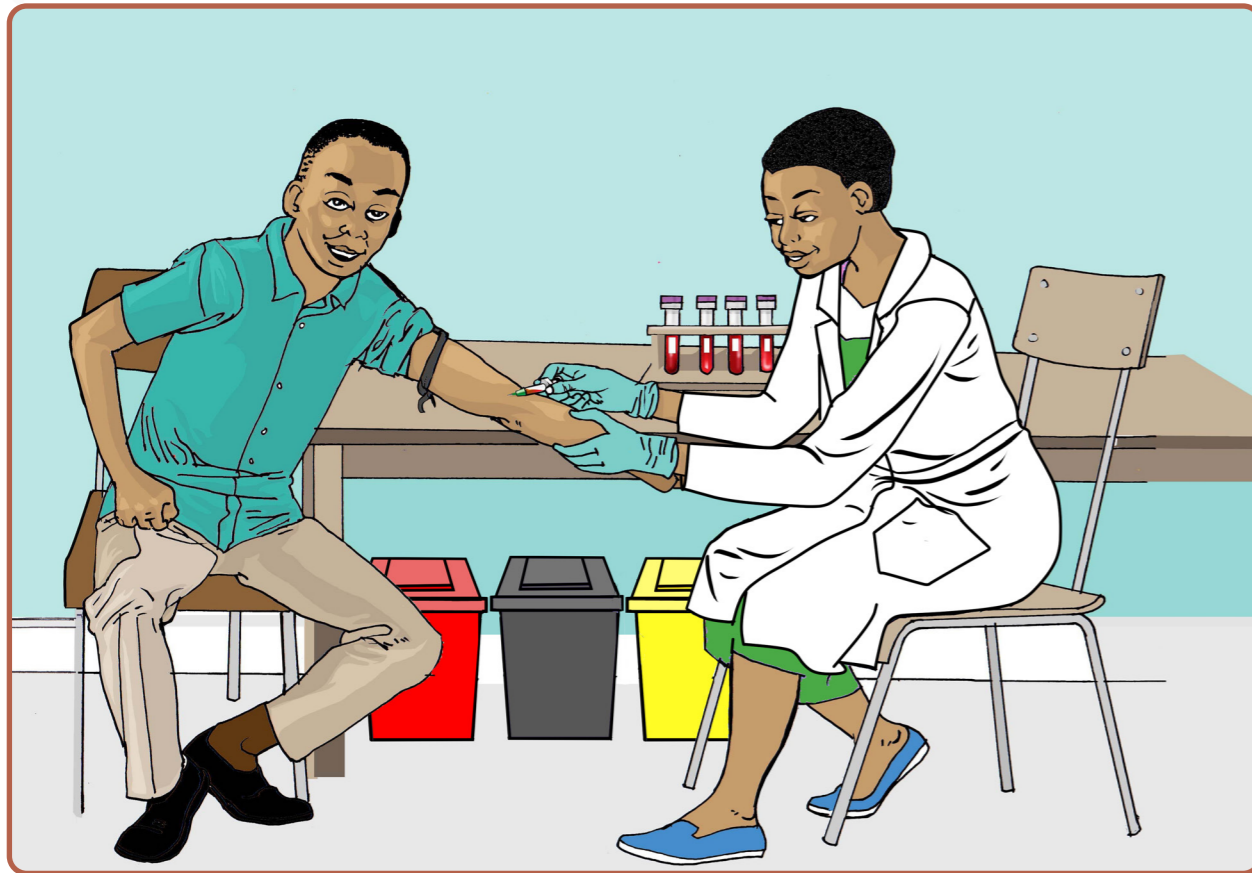
- Increased access leading to improved adherence.
- Through the groups, clients get peer support.

Who qualifies for the community HIV Care Service Delivery models?

- Stable clients who have been virally suppressed within the last 12 months.
- Clients with no opportunistic infections (WHO stages 1,2).



VIRAL LOAD TESTING



LOW VIRAL LOAD

VIRAL LOAD TESTING

Viral load testing

- ARVs stops HIV from making more viruses. This keeps the viruses from harming you and allow you to be healthier.
- Viral load test is used to measure how much HIV (viruses) is in your blood and to tell if ARVS are working well.

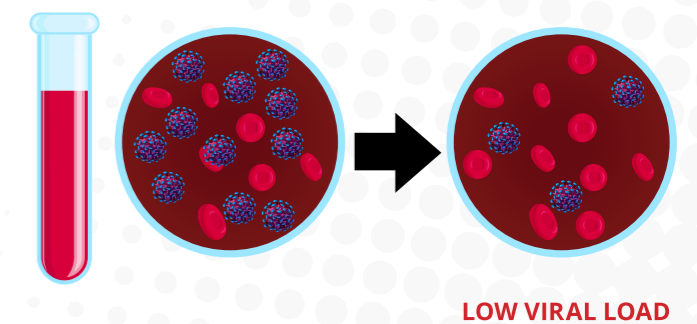
High viral load count mean:

- HIV is not controlled, and it is harming the body
- You could be missing doses on your treatment.

The virus may be resistant meaning it has changed and ARVs are no longer working.

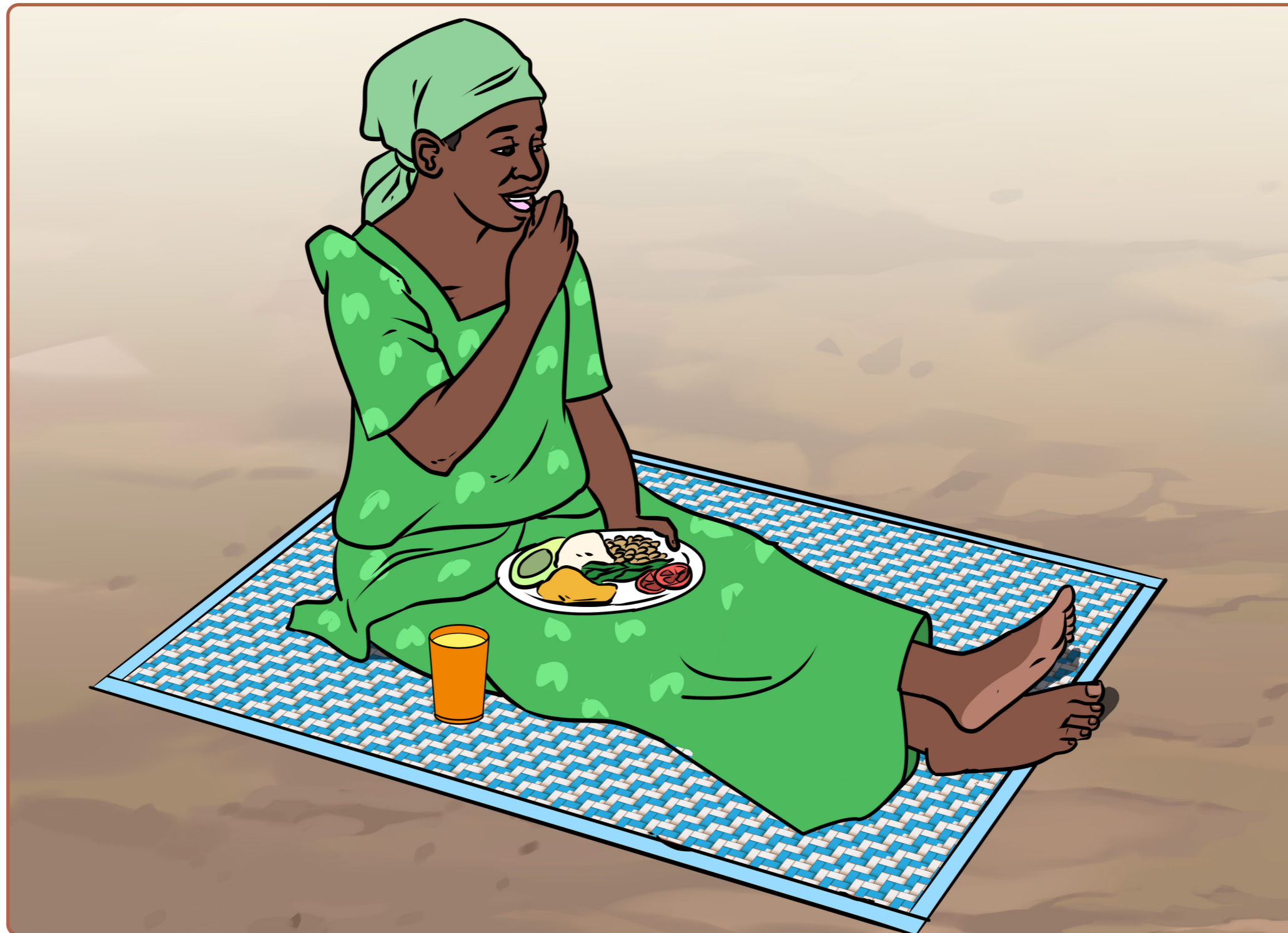
Low viral load count means:

- Treatment adherence is good.
- The virus has been suppressed.
- Maintain treatment plan and ensure zero missed drugs.



NUTRITION AND HIV

HIV CARE AND TREATMENT LITERACY FLIP CHART



NUTRITION AND HIV

HIV affects nutrition by increasing nutrient requirements, decreasing food consumption, impairing nutrient absorption, and causing metabolic changes that lead to weight loss, vitamin and mineral deficiencies. Poor nutritional status is associated with faster HIV disease progression and death.

Classes of food

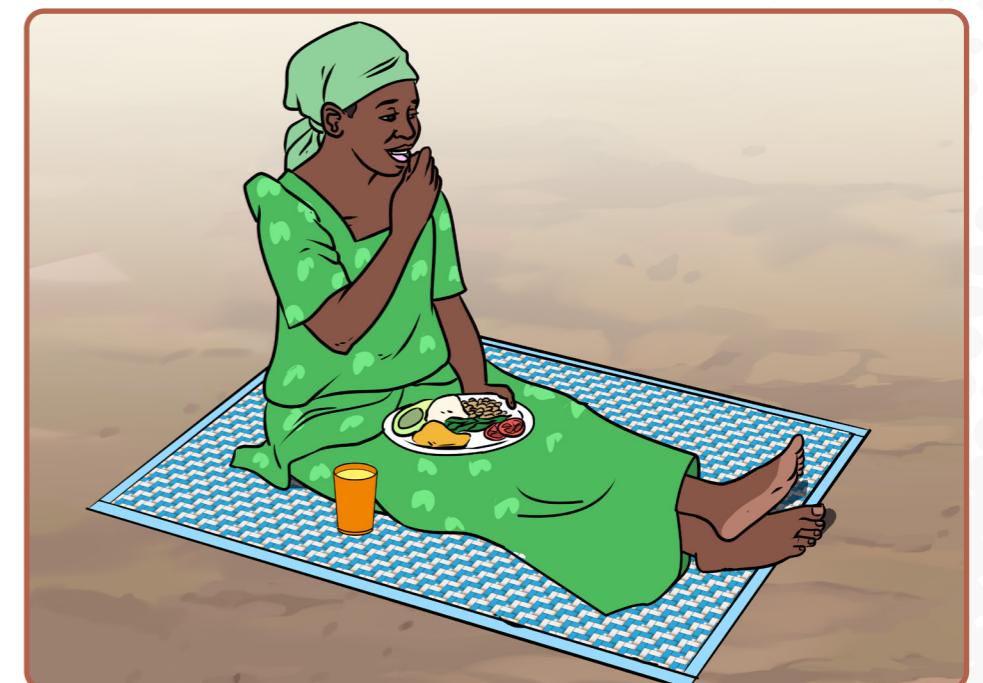
- **Carbohydrates:** Energy Giving Foods (Go foods) These include; Sweet potatoes, Irish, Matooke, Sorghum, millet, cassava posho, maize
- **Proteins:** Body Building Foods (Grow foods) These include; Animal-source foods (meat, poultry, fish, eggs, dairy) and Plant Source proteins: Beans, G.nuts, Soya beans.
- **Fruits and Vegetables:** Body protective foods (G low foods) These include; fruits like oranges, mangoes, yellow bananas, pawpaw, pineapples, apples, grapes.
- **Vegetables:** Cabbages, Ddodo, Sukuma, Nakati, carrots, Tomatoes
- **Fats**
- **Fluids** (water, juice ...)

Nutritional assessment

- Nutritional assessment will be done using the Mid-Upper Arm Circumference (MUAC). MUAC tapes are available and can be collected at 1the health facilities.

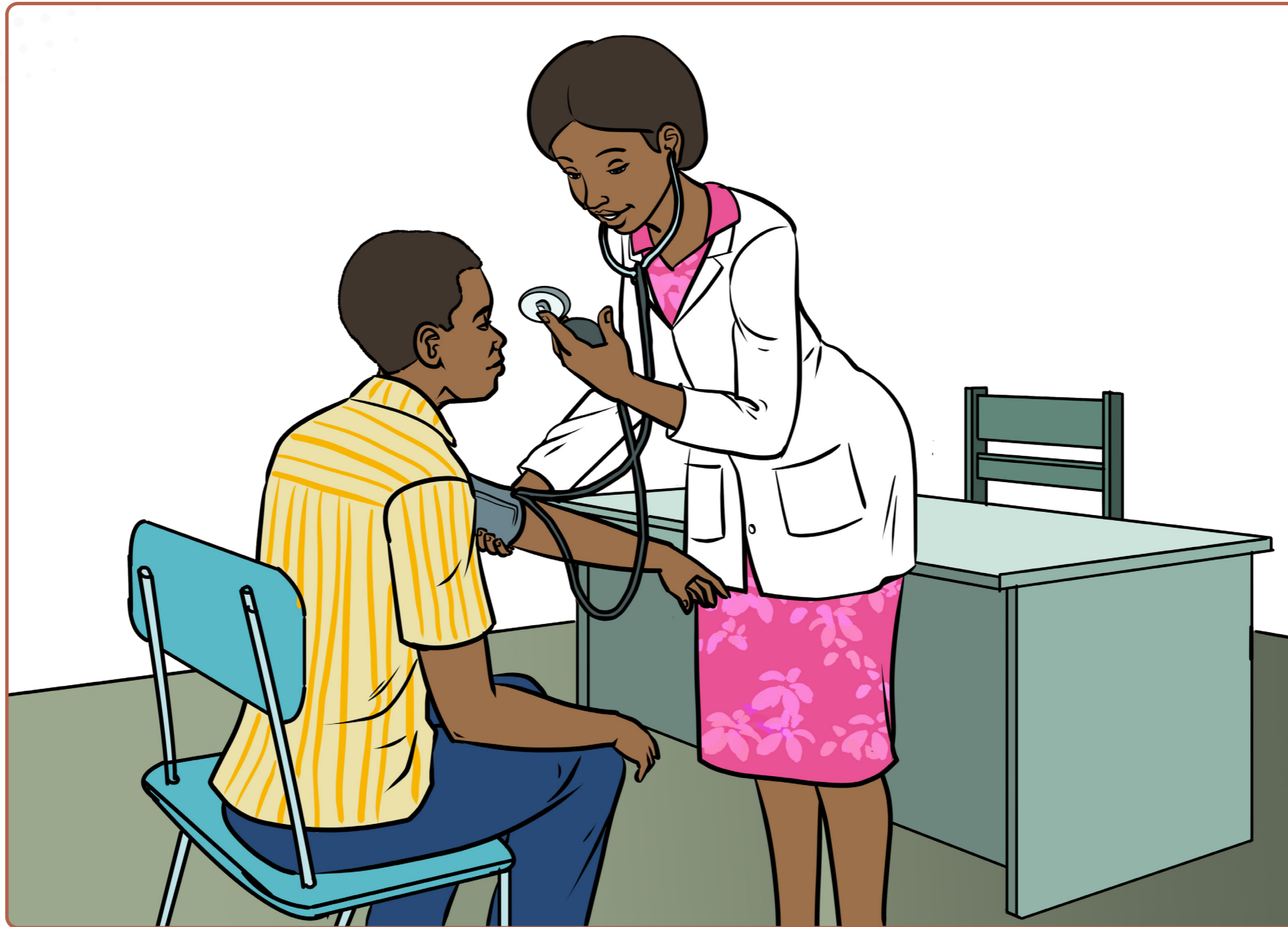
Signs of malnutrition

- Underweight for age
- Physically weak
- Looking sick
- Reduced appetite
- Swollen hands, feet and face



NON COMMUNICABLE DISEASES AND MENTAL ILLNESS

HIV CARE AND TREATMENT LITERACY FLIP CHART



NON COMMUNICABLE DISEASES AND MENTAL ILLNESS

HIV CARE AND TREATMENT LITERACY FLIP CHART

HIGH BLOOD PRESSURE /HYPERTENSION

- High blood pressure is blood pressure that is higher than normal. Blood pressure changes throughout the day based on your activities. Having blood pressure measures consistently above normal may result in a diagnosis of high blood pressure (or hypertension)

What are the common symptoms?

- Headache
- Blurred vision or double vision
- Chest pain
- Shortness of breath
- NB: A person may have high blood pressure without these symptoms

How can it be prevented and or controlled

- Eat healthy foods such as vegetables cereals, fruits fish etc.
- Reduce salt intake
- Maintain a healthy weight
- Enhance physical activity
- Quit smoking
- Avoid excess alcohol
- Avoid stress

TYPE II DIABETES

Diabetes is a chronic (long-lasting) health condition that affects how your body turns food into energy. Most of the food we eat is broken down into sugar (also called glucose) and released into your bloodstream. When one's blood sugar goes up, it signals your pancreas to release insulin. Insulin acts like a key to let the blood sugar into your body's cells for use as energy. If you have diabetes, your body either doesn't make enough insulin or can't use the insulin it makes as well as it should. When there isn't enough insulin or cells stop responding to insulin, too much blood sugar stays in your bloodstream.

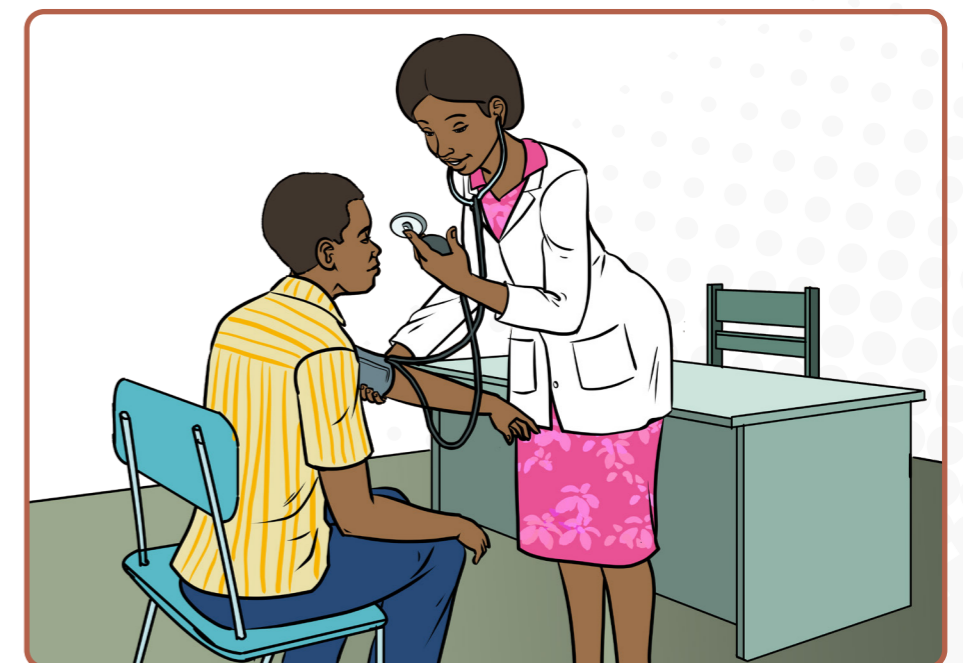
What are the common symptoms?

It usually has no symptoms in the early stages a reason why it is known as a silent killer. However, in the late stages symptoms include; frequent urination, unusual thirst, extreme hunger and unusual weight loss, extreme, frequent infection and wounds which are slow to heal.

How can it be prevented

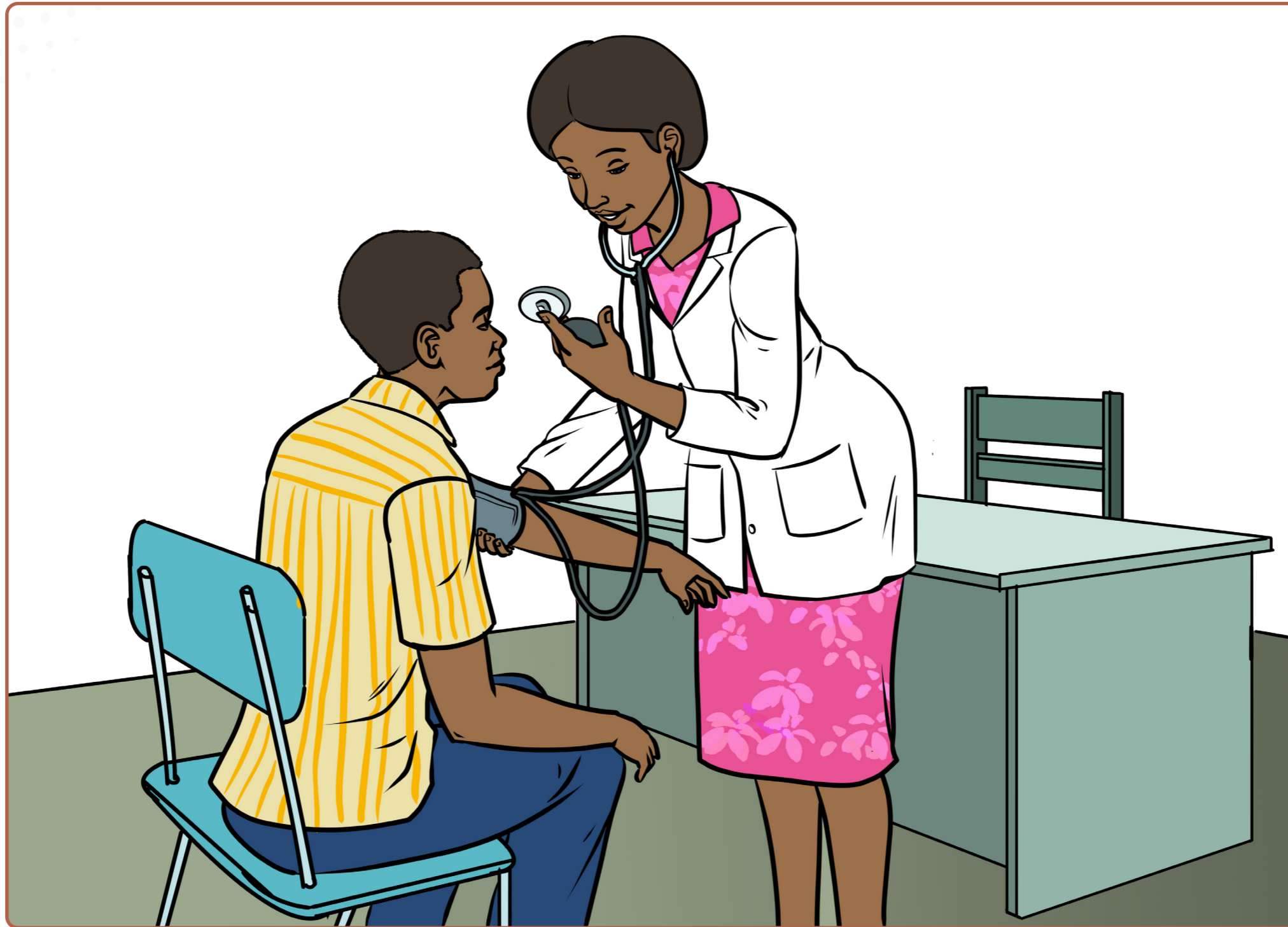
- Eat healthy foods such as vegetables cereals, fruits fish etc.
- Reduce sugar intake
- Maintain a healthy weight

- Enhance physical activity
- Quit smoking



NON COMMUNICABLE DISEASES AND MENTAL ILLNESS CONT.

HIV CARE AND TREATMENT LITERACY FLIP CHART



NON COMMUNICABLE DISEASES AND MENTAL ILLNESS CONT.

HIV CARE AND TREATMENT LITERACY FLIP CHART

ANXIETY AND DEPRESSION (MENTAL ILLNESS)

Mental Illness is a condition that impacts a person's thinking, feeling or mood and may affect his or her ability to relate to others and function normally. It affects how one feels, thinks and behaves and can lead to a variety of emotional and physical problems. When a sad mood lasts for a long time and interferes with normal functioning, a person may be depressed.

Symptoms of depression among PLHIV;

- Feelings of sadness, tearfulness, emptiness or hopelessness.
- Angry outbursts, irritability or frustration, even over small matters.
- Loss of interest or pleasure in most or all normal activities such as sex, hobbies or sports.
- Sleep disturbances, including insomnia or sleeping too much.
- Tiredness and lack of energy, so even small tasks take extra effort.
- Reduced appetite and weight loss or increased cravings for food and weight gain.
- Anxiety, agitation or restlessness.
- Slowed thinking, speaking or body movements.

- Feelings of worthlessness or guilt, fixating on past failures or self-blame.
- Trouble thinking, concentrating making decisions and remembering things.
- Frequent or recurrent thoughts of death, suicidal thoughts, suicide attempts or suicide
- Unexplained physical problems, such as back pain or headaches.

How to support PLHIV with mental health

- Connection with friends and family to others.
- Psychosocial counseling.
- Good nutrition.
- Emotional supporter.
- Referral and linkage for further management to a health facility or a rehabilitation centre.

CERVICAL CANCER

Cervical cancer is a type of cancer that affects women at the mouth of the womb (cervix). Men don't have a cervix, so only women can get cancer of the cervix. Cancer of the cervix develops due to the presence of the Human Papilloma Virus (HPV) and HPV is sexually transmitted. Women who have unprotected sex early in their lives are at risk of acquiring the HPV and later develop Cancer of the Cervix.

How reduce chances of acquiring HPV and Cervical cancer

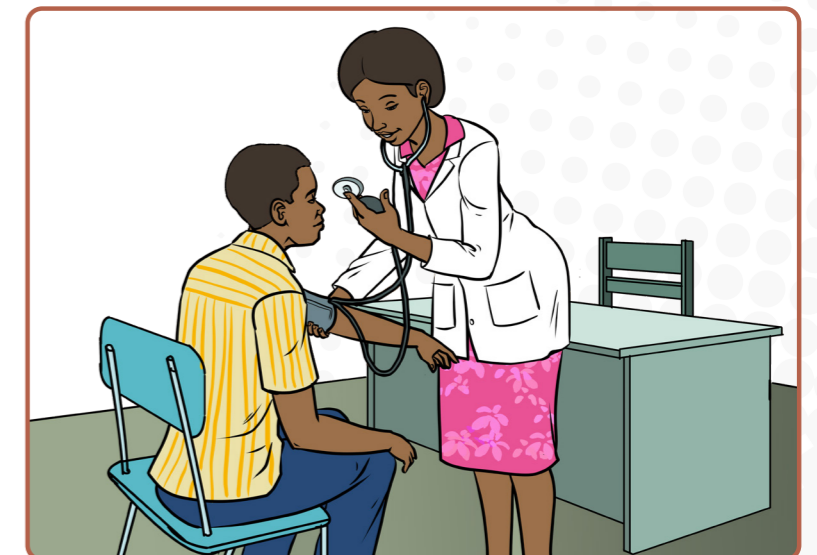
- Delay in sexual debut
- Consistent use of condoms
- Abstinence from sex
- Screening regularly for cervical cancer
- Vaccination for all girls

Prevention of cervical cancer

Cervical cancer can be prevented by HPV vaccination or girls.

Routine cervical screening for women prevents cancer of the cervix and saves lives.

WLHIV must get screened every year after they've reached 25 years of age





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UGANDANS AND AMERICANS
IN PARTNERSHIP TO FIGHT HIV/AIDS

Obulamu?