



ANNUAL REPORT, 2010



Reach Out celebrates World AIDS day with the community

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Our Vision

A community free of the spread of HIV where those persons already infected and affected by HIV and AIDS are living positively with an improved quality of life.

Our Mission

We are a faith-based, non-governmental organization working in the geographical boundaries of three Catholic Parishes of Mbuya, Kasaala and Biina. We aim to curb the further spread of HIV infection among the less privileged members of society in these communities and enable those already living with HIV and AIDS to live a responsible and dignified life. We do this by focusing on educating individuals and the community about HIV and AIDS as well as providing holistic care to those already infected and their families.

Our Core values

Teamwork

Client focus

Professionalism

Learning and growing organisation

Solidarity

Encouraging the direct involvement of persons living with HIV

Respect for human life and enhancing human capacity

“Good health is the thing that makes you feel that now is the best time of the year.” Franklin P. Adams

Forward



This Annual report provides definitive evidence that community based approaches are a perfect strategy to reach the poor with HIV services! This statement is correct when we look back at the beginning of Reach out Mbuya in 2001 and measure the increments in the numbers of patients served and programs implemented over the years. The experience has also been very exciting as we listen to our patients' testimonies and as we observe several patients go through the "Lazarus" effect as a result of our comprehensive approach. Nevertheless, as you will read in this report the success has been demonstrated, but also the challenges cannot be ignored.

The big "WHY?" is Reach Out's such a successful model for people living with HIV! If you have read our previous reports you are probably aware that our community based approach entails involving people living with HIV in the design and implementation of our programs. We consider them the solution to the problem as opposed to viewing them as a problem. The peer led model improves uptake and patient outcomes as you will read in the ART adherence and TB outcomes section. However, as we have expanded we also experience challenges that are not unique to us including the increasing staff and patient attrition.

Introduction/Acknowledgments

The festive of past years are long forgotten and the hype of the New Year has died down. As we tune our reflections back to the present, there are mind boggling thoughts. Six years ago, many HIV positive people would not reckon that they would live 10 years after testing HIV positive. Through the PEPFAR program hundreds of lives have been revamped. Sarah (not real names), says ‘‘I would be dead by now but these life saving drugs, ARVS, gave me a new lease of life. I am able to provide for my family’’. Many clients like Sarah have openly disclosed their HIV status and are now agents for positive prevention within their communities. Reach Out has continued to use clients and has maintained the involvement of People Living with HIV in its programs at 43%. We have built a strong and sustainable relationship with the poor communities we serve. The holistic approach has changed the lives of the vulnerable people in the communities and every day that passes by another life is saved. The Visible treads would not have been possible without the support from our various Donors who have provided funds, drugs, material support, technical support and a word of encouragement at every opportunity. The Catholic church, Ministry of Health (MOH), Uganda Catholic Medical Bureau(UCMB), Centers for Disease Control (CDC) through PEPFAR, Barclays bank, Centenary bank, Housing Finance, Quality Supermarket, Tullow Oil, Medical Mission International(MMI), M+R SPEDAG, Program for Accessible Health Communication and Education, Friends of Reach Out (FORO), ROSE, SID ECOLE, AVSI, The Uganda Bickers, Stephen Lewis Foundation (SLF) and several individual donors, we thank you for contributing to the lives of the poor and vulnerable within Mbuya and Kasaala Parishes. Through you a vulnerable child had a chance to go to school and eat at least a meal a day, hundreds who would have died are now alive because of the life saving ARVs and many who depended on handouts can now provide for their families. Makerere University School of Public/CDC fellowship program, thank you for the partnership which has seen fellows support capacity building at Reach Out. To our staff, clients and the community we serve, your benevolence is the reason we have successfully touched the lives of many and created a foundation for the many smiles we witness here on a daily basis.

Success story



I am a student at Nile Vocational Institute.

When I began it was not easy for me. After completing Primary School, I had to decide whether to continue to Secondary School or go to Vocational School. School fees has been a challenge since my both my parents died. In addition I have 3 siblings to take care of and therefore needed the fastest opportunity to begin earning money to support them.

After the counseling I received from the Operation child support at Reach out Mbuya, I opted to enroll for mechanical engineering at Nile

Vocational Institute where I have now spent a year. At the end of the year I was awarded the first certificate, and will be going back for the next level. Using this certificate I have been able to find part time work to support my siblings.

I would like to encourage my peers to be focused and pray to God that he may guide and help you in every challenge and oppression you go through in life. Do not forget to obey your parents and elders at all times.

I would like to thank Reach Out for offering me free education in the vocational training and also providing to me the scholastic requirements throughout the year. May God bless you and keep up the spirit.

Kajoro Robert

Nile Vocational Institute

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ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ARV	Anti Retroviral
ART	Anti Retro Viral Therapy
BCP	Basic Care Package
CATTS	Community ARVS and TB Treatment Supporters
CDC	Center for Disease Control and Prevention
CT	HIV Counseling and Testing
DNA-PCR	Dioxyribo Nucleic Acid — Polymerase Chain Reaction
EPTB	Extra Pulmonary Tuberculosis
FORO	Friends of Reach Out
HBHCT	Home Based HIV Counseling and Testing
HIV	Human Immunodeficiency Virus
IDI	Infectious Disease Institute
MoH	Ministry Of Health
MTCT	Mother to Child Transmission of HIV
OVC	Orphans and Vulnerable Children
PACE	Program for Accessible Health Communication and Education
PEPFAR	Presidential Emergency Plan for AIDS Relief
PHC	Primary health care
PIDC	Pediatric Infectious Diseases center
PMTCT	Prevention of Mother To Child Transmission of HIV
PTB	Pulmonary Tuberculosis
RCT	Routine Counseling and Testing
VCT	Voluntary Counseling and Testing
ROK	Reach out Kasaala
ROM	Reach out Mbuya
SPH	School of Public Health
TB	Tuberculosis
ToT	Trainer of Trainers
WHO	World Health Organization

Key definitions

1. Adult literacy program: Aims at empowering adult clients with numeracy and literacy skills. This enables them to communicate with their doctors and adhere well to their treatment as well as become competitive in the business sector.
2. Basic Care Package: Contains a Jerrycan with a tap, two long mosquito nests, water guard and IEC. It is given to clients to improve their hygiene and sanitation and to reduce on frequencies of malaria and diarrhea.
3. Bread of Life (BOL): A microfinance program which provides loans to our clients at modest interest rate of 10%.
4. Community ART and TB Treatment supporters (CATTS): Are trained HIV+ clients who follow up other clients to ensure they adhere well to their treatment. They use a peer to peer approach to understand their clients' challenges and give feedback to both the client and Reach Out.
5. Community Network Of care (CNC): A section under the community support department. Its major function is to ensure that all enrolled clients are monitored for adherence and followed up at home based on their health status while ensuring that appropriate referrals to ROM departments for support are made. It is comprised of CATTS, M2M and Adolescent supporters.
6. Friends For Life: The prevention and sensitization arm of Reach out and aims at sensitizing adults in the community through the Treasure life and operation Gideon programs, in-school and out of school youth about HIV.
7. Good Samaritan: Targets women empowering them with life skills to enable them become self sustaining.
8. Hope restoration centers (HRC): Shelters built with support from SPEDAG (a clearing and forwarding company) to support weak clients who can't work to pay for their accommodation.
9. Mother to Mother community supporters (M2M): Women who are PMTCT recipients themselves and ensure that mothers attend and adhere to PMTCT services.
10. Operation Gideon: A prevention program which targets men with messages so that they become fully involved in the fight against HIV/AIDS.

11. Operation school fees (OSF): A section which supports children with education support through provision of school fees and scholastic materials as well as addressing their psychosocial needs.
12. Rose of Mbuya: An Income generating project. It has a workshop which undertakes institution contracts. They make a wide range of products including textiles(clothing), household accessories like kitchen wear, beddings and gift items like paper beads that are made out of recycled papers, jewellery, school uniforms and handmade cards. Proceedings are used to pay school fees for vulnerable children.
13. TB treatment success rate: The additive of clients who have completed TB treatment and those declared cured of TB over the TB treatment outcome total (Treatment failure, death, transfer out, defaulters, treatment cure and those completed).
14. Teenage and Adolescent Supporters: ensure that all teenagers and adolescents are supported to adhere to their drugs, remain in care and live positively.
15. Treasure Life Campaigns: are aimed at addressing specific health related topics designed for specific target groups. The campaigns are held within a community for at least one month to ensure acceptance and phased introduction of messages.
16. Village savings and Loans associations (VSLA): An alternative loan scheme targeting the entire communities. It brings together community groups based on self selection. Group members are able to work together to save money.
17. Youth Program: Targets out of school youth with prevention messages through small group discussions and games.

Highlights of program activities

Medical Department

- A total of 3,794 (540 from Kasaala) active clients were offered holistic care during this year including 346 active children; this represents 76% of the targeted 5,000 active clients in our strategic plan 2007-2011.
- Seventy percent (2,656) of the active clients are females, while 42% (1,593) are in the age brackets of 19-35 years and 30% (1,138) in the age brackets 36-45 years. Overall, 69% of the active clients are Catholics, 29% are Protestants, while Moslems represent 2%.
- During 2010, the Counseling section tested a total of 8,231 individuals (9% above the 2009 figures). This increase is attributed to the scaling up of VCT through community outreaches and expansion of our catchment area to Bweyogere Parish.
- Of those who tested for HIV, 1,659 (20%) tested positive. Overall, 483 PHC service seekers received a provider initiated HIV test out of which 57 (12 %) tested positive.
- Out of the 1,659 HIV positive people, 851 new clients were enrolled into care. Majority (73%) were women.
- A total of 26,698 consultations were made to 3,794 active clients; on average 90 clients visited our clinics on a daily basis. At Kasaala the PHC wing had on average 20 daily consultations.
- The number of clients who died this year was 102, while 180 (compared to last year's 86) were lost to follow up, representing a 35% increase. One hundred forty three (143) clients were transferred out.
- By the end of December 2010, we had 2,328 clients on ART. Ninety eight percent of the patients adhered between above 95%.
- All our clients received Cotrimoxazole prophylaxis.
- A total of 456 clients were enrolled on ART during the year. 14 clients were started on second line regimen following a detectable viral load.
- A total of 531 clients were screened for TB using sputum smear across the four clinic sites. Consequently 154 clients were found to have TB and received

treatment. By the end of December 2010 we had a total of 110 clients active on TB treatment. None of the clients' defaulted treatment. We had a 72% success rate compared to last year's 51%.

- This year, we screened 407 women for pregnancy, and found 142 (35%) pregnant. All pregnant women were linked to the PMTC program. Fifty six expectant mothers were active by the end of December 2010 and 116 mothers delivered and all the infants received single Dose NVP and AZT syrup.
- By the end of this year, we had 23 active pregnant mothers on Prophylaxis, while 33 were on HARRT.
- Two hundred and four (204) infants received an HIV DNA-PCR or rapid test. Of these (197) 97% tested negative while (7) 3% tested HIV positive.
- A total of 189 mothers were counseled on feeding options. One hundred and fifty four (154) chose exclusive breast feeding for 3 or 6 months and of these 4 of their infants tested HIV positive. Of the 35 who chose replacement cow milk 3 of their infants tested HIV positive.
- A total of 29,774 laboratory tests were carried out across the four sites with 28% being HIV screening, 20% for Cd4 count, 12% B/S for malaria and 8% sputum.

Community support department

- This year food was distributed to 140 OVC households (891 individuals) with support from Medial Mission International (MMI) while 57 OVC were supported with food through Sid Ecole.
- A total of 36,300 home visits (664 from Kasaala) were made to 3,794 clients by 43 CATTS, representing a 12% increase over last year's figures.
- During 2010, a total of 12 clients were accommodated in the Hope Restoration shelters.
- A total of 851 new (143 in Kasaala) clients received Basic care package kits.
- Operation Gideon reached a total of 1,124 men through 45 sessions each of small groups of 10- 25 individuals.

- Through the Treasure Life school clubs, Abstinence messages were delivered in 13 Primary schools (age 10-14) and 5 secondary (age 15-18) schools within our catchment area reaching a total of 10,551 young people.
- Youth Program targeted out of school youth with small group discussions and games. This year, a total of 1,076 (747 male) were involved in discussions about life skills and values.
- Eighty (80) couples attended a discordant couple's intervention, and 40 discordant couples were retested out of which 1 (3%) tested HIV positive.

Social support department

- By the end of December 2010 a total of 1,049 OVC were supported through the school fees program, 729 (69%) of the OVC are in primary level, 280 (28%) in secondary school and 40 (3%) in vocational. All 1,049 children received scholastic materials.
- A total of 240 (20 from Kasaala) school visits were conducted reaching 1049 children.
- A total of 216 children were followed up at home during the year to address issues affecting school attendance and performance.
- Seventy two (72) children participated in the Friends forum workshop which targets HIV positive children.
- The VSLA has a total of 80 groups formed. Overall, 1,975 people with 330 (17%) men and 1,058 (83%) women were reached. Twenty four (24) Village savings loan association groups, shared out their savings.
- A net profit of ug.shs.4,098,000 was generated from the Roses of Mbuya
- A total of ug.shs.4,215,000/= was raised through our brass band and Music dance and drama children's group performing at various functions.

Monitoring and Evaluation Department

- Development and implementation of the HMIS is ongoing and 9 modules have been completed and are at testing stage.
- Six monitoring visits were carried out to different ROM sections.

- This year 569 (15%) of the 3,794 active clients missed at least one clinic appointment.
- Reports were written and submitted to Center for Disease Control, SLF, MMI, FORO, Barclays Bank and SPEDAG while monthly reports were submitted to Uganda Catholic Medial Bureau and Ministry of Health.
- Ninety percent of our Clients were satisfied with the services they received at the clinic. Ninety-eight clients who were lost to follow were followed in the community, out of which 56% were not happy with the services offered, 19% went to their villages and failed to come back.

Executive Director's office Department

- We received a total of 450 visitors out of whom 131 (29%) were international.
- Reach Out had its CDC specific audit carried out by Ernest and Young.
- We had 12 Stock takings carried out for drugs and other items.
- Time lag for procurement was 21 days from receiving of requests to final payment. This year the Procurement manual was approved by the Board of directors.
- Major procurement done in the year included drugs and laboratory supplies.

Finance and Administration Department

- We had a total of 234 staff (36 are from Kasaala), 63% are female while 43 % are clients.
- This year we received a total of 100 volunteers. Of these 27 were international volunteers.
- A total of 23 (14 females) students came for placement at Reach out.
- A total of 794 clients and staffs attended internal trainings while 318 staffs participated in external trainings.
- Thirteen staff was promoted to various levels, 20 recruited and 11 resigned while 4 absconded and 2 had their contracts terminated.

MEDICAL DEPARTMENT

The medical department through the Counseling, clinic, Pharmacy, Nutrition and Laboratory sections continued to provide comprehensive HIV/AIDS care and treatment services to our clients. The activities carried out in the various sections and their outputs/outcomes are elaborated below in this section of the report.

HIV Counseling and Testing

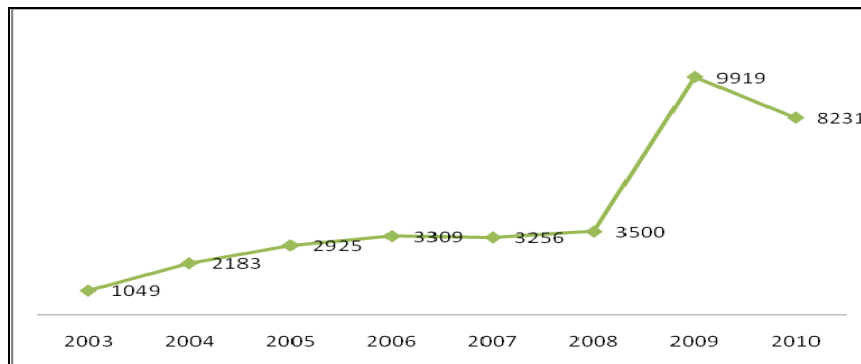
HIV counseling and testing (CT) remains the entry point into our services. Pre and post test counseling was provided to equip individuals with HIV/AIDS information, treatment options, prevention and to support individuals cope with their HIV positive status. This year a mix of CT delivery models comprising of facility based CT, community based CT, moonlight CT, home based CT, corporate CT and Routine Counseling and Testing (RCT) at Kasaala were used to reach various populations in need of these services. Overall, 91% of the annual target of 9,080 individuals were counseled and tested. Through the community outreaches we reached 18% of our annual target of 1080. The facility had the highest positivity rate (28%) while corporate league CT had the lowest with 1%. The table below details the outcomes of the various CT models.

Outcomes of persons tested and positivity rates 2010

VCT	Annual targets	Total Tested	Total HIV positive
Facility	6000	5398(90%)	1518(28%)
* Routine CT		406(7%)	48(12%)
Community	1400	1658(118%)	43(3%)
moon light		348(25%)	25(7%)
HBCT	1080	163(15%)	22(13%)
Corporate League VCT	600	258(43%)	3(1%)
Total	9080	8231	1659

**Includes those referred for VCT through ANC*

Individuals counseled and tested for HIV at Reach Out (2003- 2010)



One of the participant testing during a moon light VCT



One of the facilitators disseminating IEC materials

Couples' program

Over the years, a total of 999 (39 from Kasaala) couples were counseled, tested for HIV and received their results, of whom a total of 320 couples were discordant, 311 concordant negative and 368 concordant positive.

In 2010, a total of 324 couples were tested, representing 93% of the annual target of 350 couples, out of which 31% were discordant, 181 concordant negative and 42 concordant positive. In 2010, there was a drop in discordance rate by 6% and concordant positive by 61% and from the previous year.

This drop in both discordance and concordant positive couples was attributed to ongoing couple HIV prevention program. Details of couple outcomes are found in the table below;

Outcome of Couples VCT (2006- 2010)

Couple category	2006	2007	2008	2009	2010	Total
Discordant couples	45 (35%)	49 (40%)	35 (37%)	90 (28%)	101(31%)	320 (32%)
Concordant Negative	34 (26%)	22 (18%)	24 (23%)	50 (16%)	181(56%)	311(31%)
Concordant positives	50 (39%)	51 (41%)	47(40%)	178 (56%)	42(13%)	368(37%)
Total	129	122	106	318	324	999

Discordant couples program

This program focuses on HIV risk reduction. Since its inception in 2008, a total of 170 discordant couples (35 from Kasaala) have enrolled for the intervention. In 2010, 41% of the annual target of 192 discordant couples underwent a risk reduction intervention. A total of 40 couples were re-tested and one individual had a HIV positive result.

Ongoing counseling

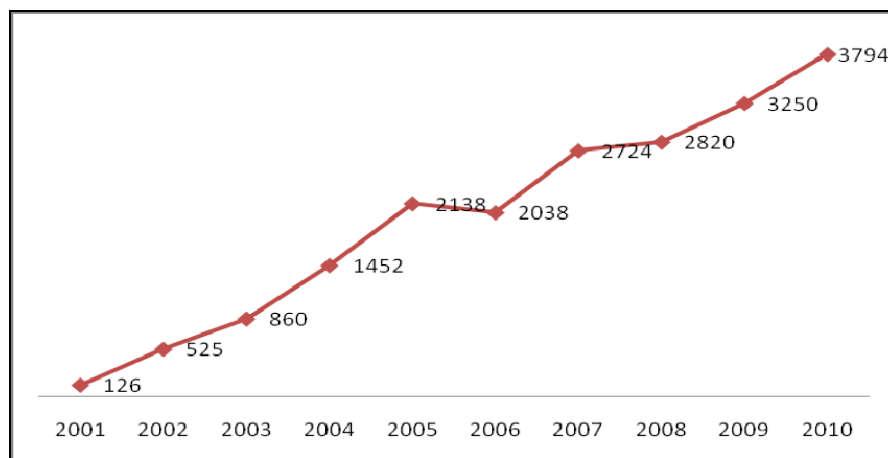
Ongoing counseling addresses psychosocial aspects of HIV/AIDS including those that may affect HIV treatment outcomes such as ignorance of ART, adherence to HIV treatments, HIV coping strategies, effects of alcohol and other lifestyles, importance of disclosure and HIV risk reduction.

This year a total of 1,842 (271 from Kasaala) clients received ongoing counseling compared to 2,494 in the previous year, representing 15% drop. Details of the top five issues for which patients were counseled in 2010 are found in the table below.

Counseling Issues addressed disaggregated by gender, 2010

Counseling issues	Females	% of females	Males	% of males	Total
Coping with HIV/TB results	424	40%	287	37%	711
Pre- ARVs individual counseling	399	38%	280	36%	679
Others	162	15%	124	16%	286
Missed appointments	61	6%	53	7%	114
Alcohol issues	17	2%	35	4%	52
Total	1063	100%	779	100%	1842

Active clients of Reach out Mbuya (2001 to 2010)



Clinic Consultations

Reach Out continues to use a nurse led model of service delivery. This year we had 17 nurses (6 from Kasaala) and 6 medical officers (one from Kasaala) providing clinical care through our 4 clinics (Mbuya, Kinawataka, Banda and Kasaala). A total of 26,698 (8,299 from Kasaala) clinic consultations were made to 3,794 (540 from Kasaala) active clients this year, representing 8% drop made in the previous year. The decrease was attributed to

a strengthened triage system and introduction of Pharmacy only refill visits for stable patients.

Clinic consultation (2006-2010)

Consultations	Total Number
2006	29,864
2007	22,646
2008	19,800
2009	31,500
2010	26,698
TOTAL	130,508

Home and Hospital visits

We continued to provide medical care to the terminally ill clients and those with disabilities at their homes once a week. In addition clients who were referred to hospitals for further management were visited by the medical team in order to ensure a continuum of care to these patients. Overall, 274 patients were home visited in 2010, out of which 43% were in WHO stage III while 9% are in WHO stage I. Details are found in the table below

Patients home visited by year and by WHO staging

Home visits	Total Number	WHO I	WHO II	WHO III	WHO IV
2006	465	90	85	145	145
2007	443	28	72	168	175
2008	328	20	57	139	112
2009	217	8	49	77	83
2010	274	10	21	208	35
Total	1727	156 (9%)	284 (16%)	737(43%)	550 (32%)

Hospital visits

By the end of 2010, a total of 76 clients were admitted and followed up in hospital compared to 91 in the previous year. Most admitted clients had a diagnosis of cryptococcal Meningitis.

External referrals

Reach out has continued to refer clients to specialized clinics (Mulago, Kiwoko and Butabika Hospitals). This year MOUs were signed between Reach Out, LMK and Kampala Imaging Center to provide laboratory and radiological investigations respectively to clients of ROM. In addition Bugolobi Nursing Home and Paragon Hospital which are closer to the ROM sites, continue to support ROM clients with X-ray and Ultrasound services. This year, 1,271 (175 from Kasaala) clients were referred to other facilities for the above mentioned services compared to 994 clients in the previous years, representing a 12% increase. Three hundred sixty (364) clients were referred to Mulago Hospital and 172 clients were referred for radiological and laboratory investigations. Chest X-ray (322) was the most commonly done external investigation. Two clients were referred to hospice for pain management. The visiting physiotherapist managed 66 clients.

Patient retention

Out of the 1,659 individuals who tested HIV positive in 2010, 851(41%) were enrolled into HIV care at ROM compared to last year's 1,070 clients, while 65 (4%) were linked to other HIV care/ treatment centers. There is obviously still a challenge in ensuring that individuals with positive results are linked into care. We have introduced phone tracking and community follow up as a strategy to improve linkage to care.

Over the ten years of our existence, we have had over 3,000 clients lost to follow up and over 998 clients have died. In 2006, lost to follow up was at 33% and dropped in 2009 (7%) because of strengthened enrollment procedures in 2008. The mortality in 2006 was at 30% but dropped in 2008/2009 and increased in 2009/2010 because most of the clients enrolled were very sick.

Clients transferred out in 2010 increased to 43% because majority of the clients within the catchment area were displaced by investors and opted to go to the villages and/or other health centers since they were outside our catchment area.

In 2010, 180 individuals were lost to follow up. Other details pertaining to non retention are found in the table below

Non retention at Reach Out (2006-2010)

Years	Active clients	Newly Enrolled clients	% Enrolled	Total LTFU P	% LTFU UP	Death	% Death	Transfer in	% Transfer in	Transfer out	% Transfer out
2006	2038	1087	24%	400	33%	109	30%	24	18%	29	10%
2007	2724	801	18%	323	27%	43	12%	14	11%	26	9%
2008	2820	734	16%	210	18%	37	10%	9	7%	57	21%
2009	3250	1070	24%	86	7%	77	21%	27	21%	22	8%
2010	3794	851	19%	180	15%	102	28%	56	43%	143	52%
Total		4543	100%	1199	100%	368	100%	130	100%	277	100%

ART Scale up

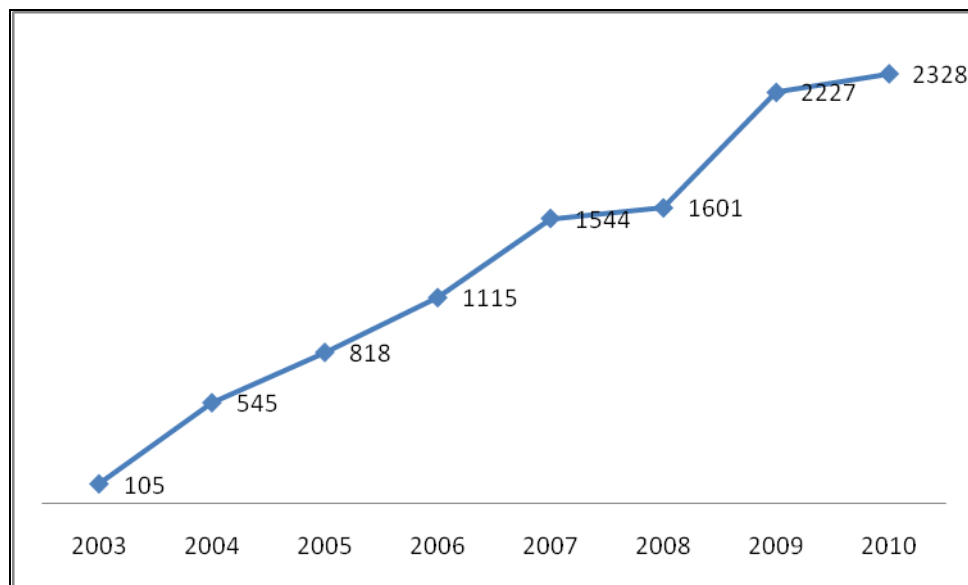
Since the ART program started at Reach Out six years ago, two main donors have been maintained ; PEPFAR and MOH-Global Fund . At the end of this year we had a total of 2,328 clients (262 from Kasaala) on ART, 60% of the clients are supported by PEPFAR. Overall, between 2006 & 2010 there has been an increase in eligibility to ART.

In 2010, 709 clients were eligible for ART, however 50% were enrolled, and representing 85% of the annual target 670 and 140 eligible clients did not start ART, because of myths, fear, alcohol and lack of food support. Details of Patients on ART over time are summarized in the table below

ART eligibility and enrollment (2006-2010)

Years	Active clients	Eligible for ART	% Eligible	Adult enrolled on ART	% Adult enrolled	Children enrolled on ART	% children enrolled
2006	1115	573	17%	406	18%	38	17%
2007	1544	714	21%	542	24%	28	12%
2008	1601	634	19%	329	15%	13	6%
2009	2006	773	23%	495	22%	35	15%
2010	2328	709	21%	456	20%	113	50%
Total		3,403	100%	2228	100%	227	100%

Number of Active clients on ARVs (2003-2010)



ART regimen lines and ART adherence, 2010

Ninety six percent of ART recipients are on 1st line regimen. Majority of the patients at ROM adhere above 85% as shown in the table below. The excellent adherence is attributed to peer-peer community support model and the comprehensiveness of our services.

Adherence outcomes by levels 2010

Adherence Level	2010
95 - 100	1984 (85%)
85 - 94	159 (7%)
Below 75	185 (8%)
Total	2328

Absolute CD4 cell count

A total of 1,483 absolute CD4 tests were carried out; 77 were newly bled clients and 1,406 were old clients. Of those bled 24% had CD4 counts less than 250 and 76% had CD4 counts above 250cells/dl. Overall, 48% of the newly bled clients are eligible for ART while 23% on prophylaxis were eligible for ART. Details of the absolute CD4 counts are found in the table below.

Outcome of CD4 cell counts, 2010

Category	<250	>=250	Total bled	% eligible for ART (CD4<250)
New (baseline)	407	449	856	48%
Follow up CD4 for those on prophylaxis	564	1899	2463	23%
Follow up CD4 for those on ART	856	1930	2786	

Viral Load Testing

Viral load testing was performed on clients with suspected immunological failure. Over the years, a total of 120 clients have received a viral load testing, of these 38 clients had a detectable viral load and were all switched to 2nd line. In 2010, a total of 69 clients were bled and (14) 37% had a detectable viral load and were all started on 2nd line. Four of the

client's viral load results were not back by the time of compiling this report. There was a sharp increase in clients bled in 2010 from the previous year. Details are found in the table below

Viral load testing and outcomes (2006-2010)

Viral load	Bled	Detectable viral load and enrolled on 2 nd line
2006	0	0 (0%)
2007	0	0(0%)
2008	30	16(42%)
2009	21	8(21%)
2010	69	14(37%)
Total	120	38

Prevention of Mother to Child Transmission (PMTCT)

We continue to offer a comprehensive PMTCT package for the pregnant mothers and their families including pregnancy screening, male involvement, nutrition counseling and support, ANC services, HCT and ART. The Kasaala site in addition, provides maternity services.

Pregnancy Screening

As part of our routine clinical care for women in reproductive age group, we screen all female clients for pregnancy at every clinic visit. In addition at the Kasaala-Luwero site pregnant women attending the ANC clinic are screened for HIV. At Kasaala, 155 pregnant women were counseled, tested and received HIV results during ANC out of which 14 had positive result and were all linked into HIV care. This year, 142 (30 from Kasaala) HIV positive mothers were enrolled into the PMTCT program out of the annual target of 270. Details to PMTCT activities are summarized in the table below

PMTCT outcomes, 2010.

HIV counseling and testing	1st quarter	2 nd quarter	3 rd quarter	4 th quarter
Number of new ANC clients	67	58	75	94
Number of pregnant women counseled tested and received their results	32	31	37	39

Number of pregnant women tested HIV positive				
a) Number of women with known HIV positive status before ANC visit	35	27	38	55
b) Number of women tested positive in ANC in the facility	1	4	4	5
Number of partners counseled, tested and received results	7	3	22	0
Number of partners testing HIV positive	4	-	3	0
Number of women who are assessed for ART eligibility	2	-	13	8
Antiretroviral drug administration				
Number of HIV (+) pregnant women given combivir and sd NVP	13	17	22	6
Number of HIV (+) pregnant women received single dose Nevirapine (sd NVP) only for prophylaxis	0	0	0	0
Number of HIV positive pregnant women receiving HAART (Triple Therapy)	19	21	22	12
Labour and Delivery Care				
Total number of deliveries	53	43	45	51
Number of HIV (+) deliveries	28	30	26	32
Number of women (new clients) tested during labour and delivery	2	0	0	0

Number of women (new clients tested HIV positive during labour and delivery	0	0	0	0
Number of HIV(+) deliveries received combination ARVs and swallowed Nevirapine during labour	14	27	13	32
Number of HIV (+) deliveries swallowed sd NVP only during labour	0	0	0	0
Number of HIV (+) mothers initiating exclusive breastfeeding within 1 hour after delivery	28	30	21	32
Number of infants give NVP suspension and started on AZT	29	29	26	33
HIV testing for children aged 18 months and below born to HIV (+) mothers				
Number of children born to HIV positive mothers tested for HIV	49	61	52	42
Number of children born to HIV positive mothers testing HIV positive	1	4	1	1

HIV transmission outcomes

We have continued to reduce HIV transmission. We have continued strengthening follow-up of expectant HIV positive mothers, couple counseling, infant feeding, family planning & guidance, nutrition counseling, as well as follow up of children born to mothers under the PMTCT program using option A of the new PMTCT guidelines. The HIV transmission rate from mother to child has reduced over the years as detailed in the table below. In addition (204) 84% of the babies were tested for HIV out of the annual target 243.

HIV transmission rate was 3% in 2010. Details are found in the table below

HIV transmission outcome (2006-2010)

Years	Newly enrolled pregnant mothers	babies testing HIV+ sing PCR	Babies tested HIV +	HIV transmission rate
2006	111	81	3	4%
2007	153	77	6	8%
2008	132	105	7	7%
2009	139	139	4	3%
2010	142	204	7	3%
Total	677	606	27	

Feeding options

During 2010, a total of 189 mothers were counseled on feeding options and made their decision on whether to breastfeed or not. Details of adopted feeding options are in the table below

Feeding option outcomes 2010

Years	Exclusive Breast feeding for 3 or 6 Month	DNA-PCR test result	Replacement Cow Milk	DNA-PCR test result
2006	57	3	24	0
2007	32	4	31	1
2008	75	6	30	0
2009	99	4	24	0
2010	154	4	35	3
Total	417	21	144	4

Referrals for family planning

We are affiliated to the Catholic Church and we do not offer family planning services and have therefore strengthened referral linkages for these services. This year, a total of 611

(23 from Kasaala) clients were referred to Kiswa Health Center and Kiwoko hospital-Luwero for family planning out of which 382 received the services.

Tuberculosis (TB) activities

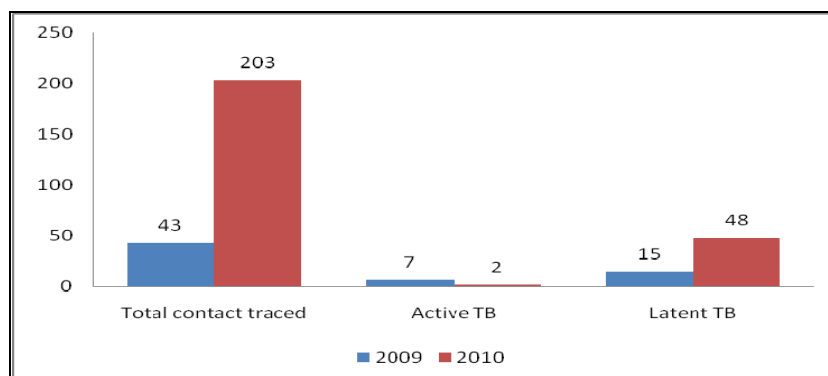
TB screening

In ROM screening for TB is carried out during VCT, at the point of triage, during clinic consultations and during TB contact tracing. Out of the 3,794 clients screened, (531) 14% (120 from Kasaala and 115 through VCT) clients were identified to have cough for 2 weeks or more. Of those who presented with cough >2weeks, 154 (30%) had positive sputum smears for TB. Repeat sputum analyses were done at 2, 5 and 8 months of treatment for 110 clients on TB treatment. Out of these 23 still had positive sputum smears at 5 months. The screening for TB needs to be extended beyond the point of facility based VCT and include the other VCT outlets in the community.

TB contact tracing

ROM integrated TB contact tracing in its activities in 2008 and since then a total of 246 people have been traced and screened for TB. Out of these 63 people were diagnosed with latent TB and 9 with active PTB infection. The 63 with latent TB were put on INH prophylaxis and currently we have 37 on INH prophylaxis. A graph shows details on TB contact tracing.

Contact tracing outcome 2010



Sputum analysis outcomes:

By the end of 2010, a total of 173 (17 from Kasaala) new cases of TB were diagnosed during the year. Of these 156 were diagnosed with pulmonary TB and 17 with extra pulmonary TB.

Of those with pulmonary TB, 27 had their diagnosis made based on positive smears and for the rest diagnosis was based on clinical features, chest X-Ray findings and Mantoux test. Overall in 2010, we had a 72% success rate compared to last year's 51.5%. The cure rates have decreased by 20% from the previous year. TB outcome details are found in the tables below.

New cases of TB diagnosed 2010

Facility	Sputum smear positive	Sputum smear negative	PTB no smear done	EPTB	Total
ROM	112	47	11	16	186
ROK	17	165	1	1	184
Total	129	212	12	17	370

TB treatment out comes (2006- 2010)

TB Treatment Outcome	2006	2007	2008	2009	2010
Cohort started on treatment	242	189	211	177	154
Treatment cure	125	25	36	40	48
Treatment completed	134	88	30	22	74
Treatment failure	9	4	21	2	3
Deaths	40	19	5	8	12
Defaulted	29	28	5	6	2
Transfer out	13	9	7	8	42
Total	350	173	104	86	181
Cure rate	36%	14%	35%	47%	27%
Success rate	62%	83%	45%	51%	72%

Nutrition support

Activities include:

1) Supplementary feeding where Plumpy-nut a high energy, ready to use therapeutic feed is given to malnourished Children. 2) Complementary feeding comprised of Soya/millet porridge given to PMTCT mothers and infants weaned from milk for a period of 24 months. It is also given to HIV positive children during their clinic visits. 3) Nutrition

therapy is given to clients who are malnourished because of TB or any other opportunistic infections and comprises of a combination of Milk, sugar and vegetable oil (High energy milk) given in specific measurements 4) Nutrition counseling is given to clients who have been assessed (using BMI) during clinic visits. Clients found with moderate malnutrition are counseled while severely malnourished are referred. Fifty-four percent of the males were on dietary therapy while 51% of the males on ready to use therapeutic feed. Detailed are found in the table below:-

Nutrition outcome by category and sex2010

Type of feeding	No in program			outcome						
	M	% M	F	%F	Total	discharge	Cure	Defaulted	Dea	Lost to follow up
Supplementary feeding	201	51%	191	49%	393	0	10	0	1	0
Complementary feeding	923	39%	144	61%	2364	22	5	6	0	0
Diet/nutrition therapy	67	54%	58	46%	126	7	0	5	2	0
Total	1191	41%	1690	59%	2881	29	15	11	3	0

Nutrition assessment and counseling

Through anthropometric measurements, a total of 2,550 (1,447 males and 1,103 females) clients' nutrition status were assessed. Fifty eight of the females were obese compared to 6 of the males while 4 of the clients were severely malnourished.

All the severely malnourished children were referred to Mwana Mugimu and Mulago for further Nutrition management. Details of nutrition status are found in the table below

Nutrition assessment outcomes, 2010

Clients with	Female	%Female	Male	%Male	Total
Normal weight	952	59%	670	41%	1622
under weight	243	49%	255	51%	498
moderately malnourished	116	42%	160	58%	276
Over weight	76	88%	10	12%	86
Obesity	58	91%	6	9%	64
Severely malnourished	2	50%	2	50%	4
Total	1,447	100%	1103	100%	2550

The Pharmacy

The pharmacy section continued to: ensure rational drug use; drug dispensing, provide prescription counseling and ensured availability of drugs. PEPFAR and Ministry of Health through the Global Fund continue to be the main sources of funding for ARVs. The Clinton foundation continued to fund the pediatric ARVs. By the end of this year, 64% of the clients were receiving drugs through the PEPFAR sponsorship while 36% benefited from the Ministry of Health funds with Stock outs experienced in the Ministry of Health/Global fund arm.

Laboratory

A total of 29,774 Laboratory tests were carried out across the four sites. Twenty five percent of the tests done were HIV tests with a 28% positive rate while Filariasis had the least number of tests done with 19% positive rate. Major tests done and their outcomes are detailed in the table below:-

Key tests outcome 2010

Tests	Total tested	% Tested	Total positive	% positive
Filariasis	1289	4%	245	19%
TB	2283	8%	156	7%
Syphilis	2379	8%	238	10%
Malaria	3653	12%	534	20%
CD4	6088	20%		
Others	6704	23%		
HIV	7378	25%	2063	28%
Total	29774	100%	3236	

Primary Health care (PHC) at ROK

HIV/AIDS care is fully integrated into the primary Health Care (PHC) in Kasaala, Luwero as elaborated below;

1) Integration of counseling and testing

Routine CT was carried out were 483 people seeking non HIV/AIDS care were counseled, tested and received results, and 57 tested had a HIV positive result and were all linked into HIV/AIDS care.

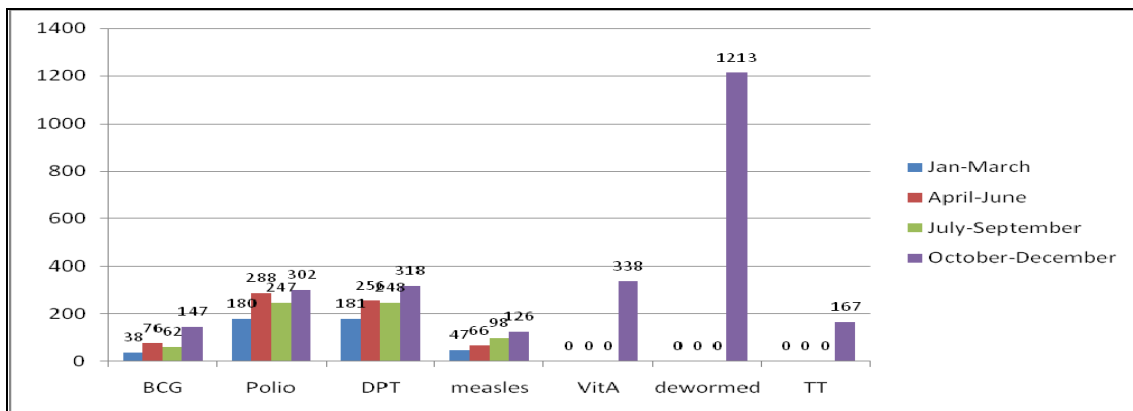
2) Integration of admissions

During this year, a total of 920 patients were admitted, 128 (14%) of the admitted patients were HIV positive. Seventy two percent of clients were admitted with malaria, 23% with pneumonia and 5% with other diseases.

3) Integration of maternal child health;

Immunization of children this year was done at both facility and community outreaches and a total of 2,611 children were immunized representing an increase of 50% from last year. This was attributed to the ongoing immunization campaign across the country and the increase in the number of immunization days to 3 from once a week at our Kasaala facility. We are now in the process of integrating immunization in all our activities even within Mbuya parish. During immunization outreaches 50 people were counseled and none had an HIV positive result. Details of integration of PMTCT are found on page 23. Details are shown in the graph below:-

Immunization Outcomes 2010

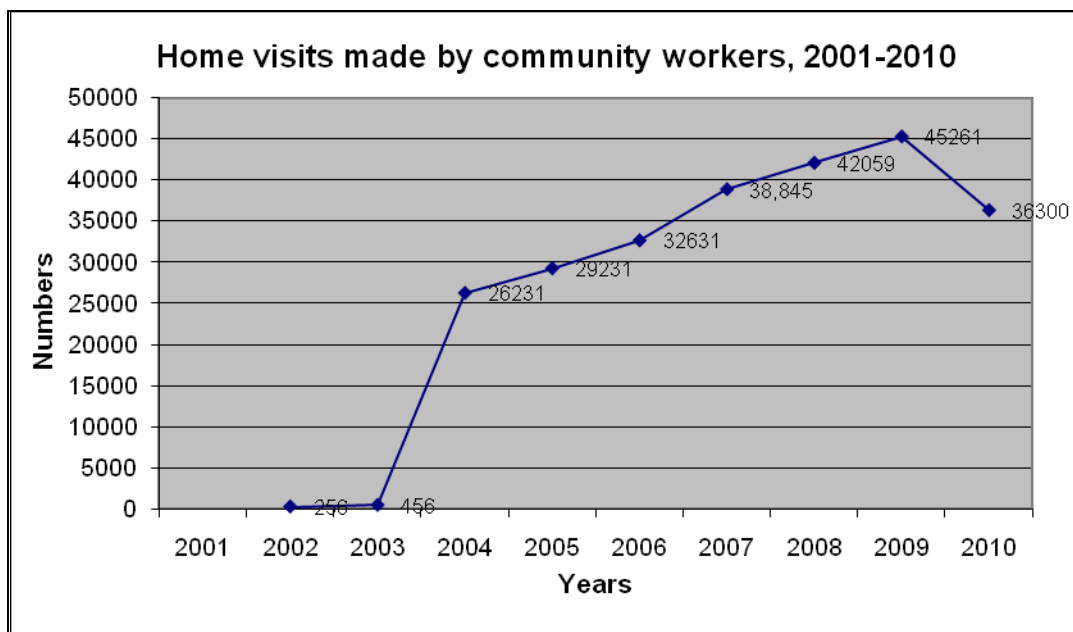


COMMUNITY SUPPORT DEPARTMENT

The Community department aims at addressing the factors contributing to the spread of HIV and AIDS through AB activities, provision of comprehensive home based care, and ensuring that clients are empowered through skills building and sustainable livelihoods. To achieve its objectives, the department has three sections: Community Network of Care, Friends for Life and Food and sustainable projects.

Community Network of care

We provided home based care and supportive services to 3,794 Clients and their caregivers this year. Since 2001, as illustrated in the graph below, the number of home visits made to clients have steadily increased then dropped in 2010 by 12% because majority of our clients health have improved . Trends over 10 years are detailed in the graph below.



Client Village meetings

In an effort to serve our clients better, Reach Out organizes client's monthly meetings which serve as feedback mechanism as well as enabling interaction between staffs and clients. This year we had 6 meetings in the six communities and reached a total of 1,251 (33%) clients (834 females)

Pastoral care

A total of 900 (24%) clients received pastoral care this year through community prayer days for the deceased. While 349 clients were reached through pastoral care visits



Clients at one of the community prayer days held in Kinawataka community

Material Support

Reach Out supports vulnerable clients, with various domestic needs including rent and material support. With support from Friends of Reach out (FORO), and individual donors who donate in kind, poor clients are supported with a 3 month's rent payments and beddings depending on the need. This year, we assessed 107 most vulnerable clients for accommodation out of which 70 were eligible and received rent payment for three months. Ninety one percent 91% of our total beneficiaries were on ART while 9% were on Prophylaxis. A total of 17 beneficiaries were below the age of 18yrs and 53 above 18 years. Furthermore, 12 female clients were housed at Hope Restoration Center, The table below details material support to clients.

Clients Supported with material support2010

Item	Female	Male	Total
Mattress only	1	0	1
Blanket only	1	0	1
Mattress and Blanket	37	11	48
Rent	15	5	20
clothes	38	1	39
Total	92	17	109



Nalubega a 34 year old single mother with her HIV+ daughter Nakato Ssalima in front of their old house are both on ART/TB treatment. They lived in a mud house constructed in a swamp. During rainy seasons their house gets flooded and they have to stand throughout the night. They received a three month grant (90,000/=) to get better accommodation. They are grateful to ROM for the grant and food support they received.

Basic care package:

With support from the Program for Accessible Health Communication and Education (PACE), Reach Out provided a total of 864 kits (143 in Kasaala). The details are found in the table below

Basic Care Package Distributions by site and sex, 2010

	Starter kits		Water guard		ITN replacements		
	F	M	F	M	F	M	
Mbuya	150	125	186	119	63	122	
Kinawataka	173	153	112	60	205	98	
Banda	44	76	55	29	59	56	
Kasaala	77	66	0	0	0	0	
Total	444	420	353	208	327	276	

Health Talks

Eighty six (40 from Kasaala) health talks were conducted in our clinics. This year, the team concentrated on TB spread prevention, child immunization, drug adherence, Nutrition and Pharmacy only refills.

Friends For Life (FFL)

Friend For Life (FFL) is the prevention and sensitization arm of Reach Out. It aims at educating and sensitizing adults, in-school and out of school youth about HIV and AIDS. Through our various programs, we aim at curbing down further spread of HIV by targeting different most at risk groups with tailor made messages. These programs include Operation Gideon targeting men, The Youth activities targeting youth in and out of school, and the Treasure life campaigns. This year, the section reached a total 12,023 people (1,774 from Kasaala) out of which 5,938 were males and 6,085 were females.

Treasure life program: These are campaigns aimed at addressing specific health related topics targeting specific groups. The campaigns are held within a community for at least one month to ensure acceptance and phased introduction of messages. A total of 653 people (142 males) were reached through 28 sessions in groups of 25 people. Twenty five percent of the people reached were new participants. Overall, there was low male involvement because these sessions are carried out late in the day and most men are still at work while others are going for night duty.

Community people reached through the Treasure Life program 2010

Community	Age bracket	Old males	Old females	New males	New females
Acholi quarters	15-24	8	8	61	17
	25 above	5	6	25	13
Kinawataka	15-24	0	0	41	6
	25 above	0	0	23	15
Banda b9	15-24	0	0	0	0
	25 above	2	16	2	20
Gizagiza	15-24	9	32	9	24
	25 above	16	42	10	27
Banda b5	15-24	0	0	0	1
	25 above	0	0	0	12
Kasokoso D	15-24	0	0	22	31
	25 above	0	0	28	20
Banda	15-24	0	6	0	0
	25+	4	33	3	11
Kitintale	15-24	2	12	2	12
	25+	4	0	0	0
Grand total	15-24	19	58	135	91
	25+	32	109	91	118

Schools Program: Abstinence only programs were delivered through the Treasure Life Clubs in 13 Primary age group (10-14) years and 5 secondary age group (15-18) years schools within our catchment area. This year a total of 10,551 (4,742 males) young people were reached, representing a 10% increase of young people reached over the previous year. The young people were reached with information to help them live life guided by values and goals including life skills. The FFL team together with the Great Generation; a UK based organization administered a total of 20 questionnaires to the students to understand their knowledge gaps in terms of HIV/AIDS. Sixty five 65 of them were females; Eighty five percent of the respondents had adequate knowledge on HIV/AIDS. Fifteen percent of the students wanted to know why discordance exists, how long does one take ARVs and how they work.

The section successfully organized Music, Dance and Drama Competitions on the 25th for primary and 26th for secondary schools in June 2010. A total of 253 students actively participated, 8 in primary and 4 in secondary schools. The theme was; ***“Good cultural values for healthier life styles”***. This was aimed at helping the youth exercise and appreciate their cultures.



AMKA classic secondary school Winners of the 2010 MDD competitions

Out of school Youth Program: Targets out of school youth with small group discussions and games. A total 1,076 (747 males) were reached. We also made home visits to 10 youths as a way of informing and involving their parents in our activities. Six youth involved in piggery projects were followed up and advised on how to best implement the activity.



A facilitator during a behavior change seminar at Banda site

Operation Gideon`

A total of 1,124 participants were reached and of these, 425 (47%) were attending this program for the first time. This year we discussed; issues on fidelity, monogamy and Male involvement in PMTCT. We provided VCT to 169 men through our Counseling section during outreaches.



One of the men in a VCT counseling session

Food and sustainable Projects

This section implements income generating activities (IGAs) aimed at empowering clients to become self sustaining. It also provides food to food insecure households. These activities have been possible with support from the Stephen Lewis Foundation (SLF), Medical Mission International (MMI) and Sid Ecole. This section implements two main projects namely; the Sustainable projects (piggery, mushroom growing and large scale farming) and food distribution.

The Sustainable Projects

Aims at empowering Reach out clients to overcome the problems of poverty and dependency. The targeted beneficiaries are grandmothers and clients who have access to land for small scale farming

Domestic farming

A total of 88 clients are engaged in domestic farming at Kasaala, Luweero. However, this year activities were affected by prolonged drought. With the up-coming installation of an irrigation system supported by SLF and Kenny family foundation, we hope to overcome this challenge. We planted four acres of cassava at Reach Out's farm and our banana plantation has started yielding as in the picture below.



One of our gardeners being instructed on how to carry out pruning

The Piggery Project

The piggery project is implemented at Banda, Kinawataka, Acholi-Quarters and Kasaala sites. Currently we have a total of 88 beneficiaries out of which 85 are women. A total of 26 pigs were vaccinated against swine fever and 17 clients were trained on how to treat their pigs. 16 beneficiaries were home visited to find out how they care for the pigs. 14 piglets were redistributed to 7 clients.

Food support

Beneficiaries include HIV positive children and AIDS orphans. The OVC food basket comprise of Rice, Beans, Corn-Soya blend, and Vegetable oil. We have adopted two standard household categories; Food ration for household size of 1 to 4 consists of 12.5kg maize meal, 4.16 kg beans, 8.33kg CSB and 1.85kg (2 liters) of oil while the ration for households 5 and above is doubled. Body Mass index (BMI) is estimated every 3 months to measure impact of the food. Overall, children who are malnourished become healthy again within few months of enrollment, underscoring the importance of food support in the management of HIV and AIDS. A total of 197 (57 sponsored by Sid Ecole) children were supported with food and 817 secondary benefited. One such example is one Nakato Salima, whom we have followed over the last six months.



Nakito Salima in March 2010

Nakito Salima

in June 2010



Nakato Salima now spends the day time with the grandmother as her Mom works in a flower garden. She plays with neighboring children and looks much healthier than she did six months ago. Nakato's weight stagnated at 13.3kg between in July and August and slightly increased to 14.1 at the end of September 2010

Children after receiving food, Special thanks to Sid Ecole



OVC households received food in 2010

Drugs	Type of beneficiary	F	M	Total
ARV	Primary	24	35	59
	Secondary (adults)	81	41	122
	Secondary (children)	112	94	206
	Total	217	170	387
Orphan	Primary	7	6	13
	Secondary (adults)	12	10	22
	Secondary (children)	34	18	52
	Total	53	34	87
Prophylaxis	Primary	24	32	56
	Secondary (adults)	62	31	93
	Secondary (children)	102	76	178
	Total	188	139	327
TB	Primary	4	4	8
	Secondary (adults)	11	3	14
	Secondary (children)	15	17	32
	Total	30	24	54
Total primary beneficiaries		59	77	136
Total secondary beneficiaries (adults)		166	85	251
Total secondary beneficiaries (children)		263	205	468
Total beneficiaries		488	367	855

Of the 140 OVC beneficiaries 43% are on ARVs, 41% are on prophylaxis, 11% are total orphans and 6% are on TB treatment.

SOCIAL SUPORT DEPARTMENT

The Social Support Department was started out of the need to restore the social functioning of households and is mandated to offer social support to Reach Out clients and their families. The department has 3 sections namely: Operation Child Support (OCS) which has two subsections of: school fees and Psychosocial support (PSS), Roses of Mbuya and Village Savings and Loans Associations (VSLA). Details of their activities are elaborated below.

OVC core program areas

OVC are provided with services in the seven core program areas which include;

1. Medical care; provided of health care to HIV positive children including OVC. Details are found in the medical department section on page 14
2. Nutrition support provided to Child -Headed, Malnourished children & mothers who do not breast feed, in form of: nutrition counseling/education & supplementary feeding. Details are found page 29
3. Legal and child protection support; Staffs were trained, Sensitization to Children & Guardians, Development of Child protection policy
4. Shelter support in form of: Payment of rent in a grant form for a period of three months, Provision of shelter at one of our sites for a period of three to six months. Details are found in the community department section on page 33
5. Psychosocial support; creates a sense of belonging and human dignity, Support OVC in building life skills, Support children in economic child sustainable activities and peer to peer support in fighting stigma and discrimination, . Details are found on page 47
6. Education; provide tuition, scholastic material and uniform. Details reflected on page 43.

Out of the 2,000 OVC served, 54% received 1 or 2 core program areas (Education) and 13% received 3 or more core program areas (Education, Health care and nutrition support), Details of nutrition support are found on page 41 and 67% OVC received one core program area.

Operation Child Support (OCS)

Provides vulnerable children with school fees, scholastic material (comprises of exercise books, pens and uniforms), home assessments, enrollment and performance assessments of our children. Of the 22 schools we partner with in educating these children, five are primary government schools and 18 are private schools. Psychosocial support including school and home visits is provided to all children through the psychosocial support arm.

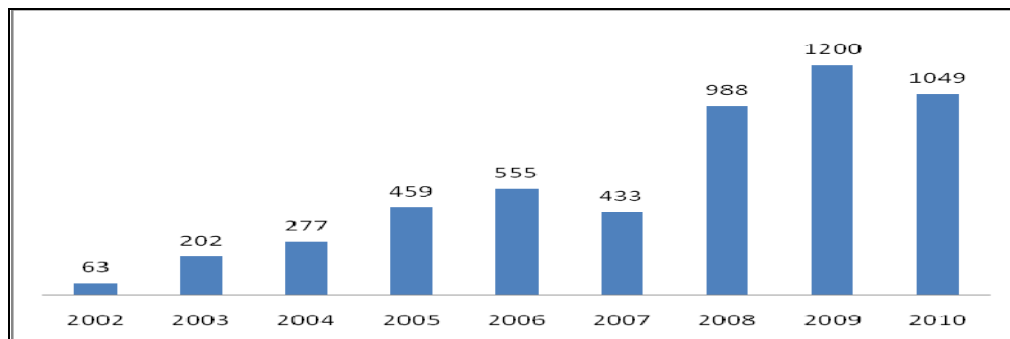
Child assessment and enrollment

Overall, a total of 1,049 active children were supported in school during the year. A total of 192 OVC were assessed for school fees support and 77 were selected for school fees support. 115 children were not considered because they were not eligible according to the selection criteria. Some were not ready to change from their schools to our selected schools. Details of enrollment are in the table below:-

Outcome of children assessed and enrolled by level and sex 2010

	Assessment		Enrollment	
Level	Male	Female	Male	Female
Primary	80	89	43	34
Secondary	7	12	0	0
Vocational	2	2	0	0
Total	89	103	43	34

The graph shows the number of children sponsored under the OSF program over the years



School fees payment

Reach Out has signed a memorandum of understanding with all partner schools. In government schools Reach Out contributes only to non tuition costs like lunch, and school administrative costs. A total of 1049 children had their school fees paid during the year. Children under CDC (600) and AVSI (45) sponsorship had their school fees paid for the whole academic year. Some children had their school fees payment pended because they were in senior six vacation, others were recently assessed and awaiting verification. **School performance;** A total of 1049 children had their last term's performance assessed. Generally 58% of our children are below the 50th percentile and 22% failed. Seventy percent of the children were involved in petty trade to put food on the table while their parents too sick to work and this has affected their school attendance and performance. Details are shown in the table below.

Performance out come for ROM children in the last term 2010

% Grade	Division	Number of children	% of children
Above 75	D1	88	8%
70-74	D2	58	6%
65-69	C3	66	6%
56-64	C4	215	20%
50-55	C5	126	12%
46-49	P7	107	10%
40-45	P8	137	13%
Below 39	F9 (Failure)	216	21%
sick		2	0%
Left		32	3%
Deceased		2	0%
Total		1049	100%

Vocational school support

A total of 40 children (20 from Kasaala) are in vocational school. A total of 14 students in NVI graduated on 24th/9/2010. 9 of the children (7 girls) graduated in Catering& Hotel management, 3 boys in Motor Vehicle Mechanics and 14 (9 girls) in Business Administration. Details are found in the table below:-

Outcome of the Kasaala vocational training completed in 2010

School	Course	F	M	Average marks per course
St Kizito Vocational school	Carpentry and joinery	0	5	42.7
	Building and concrete practice	0	2	50.1
St Mary's Domestic Vocational school	Hair dressing	5	0	55.5
	Tailoring and design	1	0	55
St Jude Technical college	Motor vehicle mechanics	0	1	80.3
	Tailoring and design	0	1	40.2
Don Bosco Vocational Training Centre, Namaliga	Electrical installation	0	2	70
	Carpentry and joinery	0	1	50
Total		6	12	

At the end of 2009, primary seven, senior four and six children sat for their final examination. This is attributed to the timely payment of school fees, consistent follow up of children in school, psychosocial support and support from parents.



<i>Balese Eddie was the best (UCE) Kyambogo College student with aggregate 9 in 8 subjects.</i>	Sekajugo Daniel was the best with 6 aggregates - Mbuya Parents Academy in P.L.E 2009.	Nayiga Fatumah was the best in females – Uganda Youth Aid Nursery & Primary School
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School and home Visits

Two hundred and forty (20 from Kasaala) school visits were made to 1049 children. During these visits children's attendance in school was ascertained, Sessions were held with the children to discuss issues affecting their performance, discipline and personal hygiene. A total of 216 (17 from Kasaala), Follow up home visits were made to establish why these particular children were not regularly attending school. The major reason for poor performance is peer pressure which hindered the children's regular attendance in school.

Scholastic Material distribution

Scholastic materials were distributed in phases to supported children in a bid to promote regular school attendance and reduce the parent's burden to providing scholastic materials. A total of 1069 (17 from Kasaala) children received scholastic.

Lost to follow

We lost a total of 96 children this year. The major reasons for lost to follow up included relocation of parents. Below in a table are details of children lost to follow

Lost to follow up 2010

	Primary		Secondary		vocational	
	M	F	M	F	M	F
AVSI	0	1	0	0	1	0
CDC	32	36	5	11	3	1
ROSE	2	1	0	1	0	0
Sid Ecole	1	0	0	0	0	0
UBA	1	0	0	0	0	0
Total	36	38	5	12	4	1

Career guidance

A total of 214 children attended a career guidance meeting with Social workers this year. Issues handled included; need for hard work, Choice of schools for next year especially for Primary seven candidates, need for some students to join vocational training and the children were also able to present some of the reasons why they don't perform well like staying in small houses with no electricity which stops them from revising at night. Some of their houses also act as bars at night making them go to bed late.

Details of children who attended the career guidance meeting are detailed below

Children guided in career by level and sex 2010

Level	Male	Female
Primary	65	123
Secondary	11	11
Vocational	1	3
Total	77	137

Psychosocial Support

Psychosocial support (PSS) interventions for OVC are aimed at providing holistic model of care to children. The interventions are conducted through various child centred interventions which include; Saturdays children's club, HIV positive children friends forum, counselling, music dance, drama (MDD) and brass band training.

Saturday children's club

A total of 216 (20 from Kasaala) children turned up for Saturday children's club activities of which 102 (47%) were girls and 114 (53%) boys. Activities included, sports home work groups, health education, counselling and social interaction

A total of 87 children (52 boys and 35 girls) have been training in MDD and brass band activities with the objective of helping them. Children staged 14 performances including church functions, school days and the national Adult Literacy day celebrations and raised a total of ug.shs. 4,215,000/=. The PSS team in collaboration with other Organisations such as Baylor, MUJHU, and Naguru Teenage centre held a sports gala event on 4th/September/2010. A total of 751 children were reached out of which 74 (10%) were from Reach Out.

HIV positive children "friends' forum";

HIV positive children on meet every first Saturday of the month meet to discuss several issues concerning their physical, social, and mental/psychological health. The main goals/purpose of the friends' forum is: to discuss issues of stigma, discrimination and to understand other barriers the children face in accessing care and treatment. Children share their experiences of living positively with HIV /AIDS. A total of 72 adolescent children were reached through the friend's forum and positive changes have been

registered in children's general wellbeing. Many children adhere well to drugs and are equipped with knowledge of how to deal with stigma and discrimination, they can make informed decisions in life and they live positively with HIV/AIDS. Six HIV positive children represented the rest of the children in the paediatric residential conference which took place from 28th to 30th September 2010 at Hotel Africana.

Village Loans and Savings Association VSLA)

Reach Out supported by CARE Uganda initiated VSLA through which money is saved and Loaned to members of the group. It brings together community groups based on self selection. Details of the strategy can be found on our website: www.reachoutmbuya.org. As at 31st December 2010 a total of 80 groups were formed comprised of 1,975 people (330 men and 1645 women), saving and loaning members, and 18 undergoing training. The total cumulative savings of ug.shs. 194,711,200 was realized out of which ug.shs. 363,269,100 were outstanding in loans.

Trainings and Workshops

Three training workshops were organized by Care Uganda to strengthen the ability of the project field staff to implement the program. The workshops comprised of an in house one week's training on the methodology Village Agents (VA) model, and selection, planning and management (SPM) of income generating activities and two follow up trainings.

Groups graduating

Twenty four VSLA groups shared out their savings with the average sharing out amount being ug.shs. 112,404,146/=



One of the groups sharing their savings one of the groups during the saving meetings

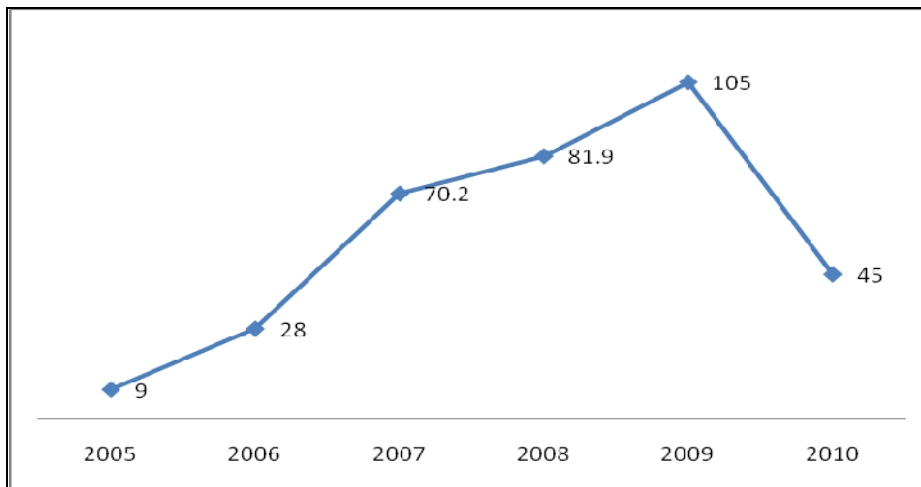
BREAD OF LIFE (B.O.L)

This year a total of ug.shs.176,125,000 /= was given to 78 clients and staff of Reach Out; A total of ug.shs.191,053,171/= (98%) was recollected from staffs, while only 2% was collected from clients. A net profit of ug.shs.18,087,750/= was made.

Roses of Mbuya (ROM)

Roses of Mbuya provide practical skills, employment opportunities to the clients on the one hand while generating income for ROM on the other hand. It has a workshop which undertakes institution contracts and makes a wide range of products ranging from textiles(clothing), household accessories like kitchen wear, beddings, paper beads, school uniforms, wall hangings, floor rugs, table mats, Shawls and handmade cards. The items were sold at Roses Shops and exhibitions during this year; ug.shs. 45,363,000 was made, significantly lower compared to ug.shs. 105,000,000 earned in 2009. This year, Roses of Mbuya participated in exhibitions at Hotel Africana at the 4th National Pediatric Care Conference and at the African Youth Forum. Sales are represented in the graph below:-

Net profits (million ug.shs) made on sales of products of Roses of Mbuya (2005-2010)



Monitoring and Evaluation Department

This department comprises of Information Technology, Client Registry and Data Management. This year the department supported the development of the RFA for the next five year funding to be submitted in April 2010 and we won the award.

Registry

Here all clients' file records are stored for easy access and use by different departments. For a while now ROM implemented the pre-generation of appointment lists prior to client clinic days to reduce the waiting times, along this we emphasized on clients keeping their appointments. This year 569 (15%) of the 3,794 active clients missed their appointments. Majority of the clients said they missed appointment because of the following reasons:

Reasons for missed appointment 2010

Reasons for missing appointment	Number/Percentage
Traveling to the village	78 (14%)
Forgetting the appointment date	302 (53%)
Tight work schedules	96 (17%)
Sick at home and unable to come to clinic.	42 (7%)
Burial programs	51 (9%)
Total	569

Management of information systems (MIS)

We have been able to respond to all our donor reporting requirements. The Development and implementation of the HMIS is ongoing and data entry for the modules that have been developed is taking place. Data cleaning, validation of entered data is continuously done for observing quality. We had our interface changed from visual basic to Microsoft access to the SQL server. In 2010 the team embarked on data collection training to improve data from the source.

Monitoring

This section disseminated the annual report 2009 to staffs during their staffs meeting and all notice boards to continuously inform public about ROM activities, a performance monitoring plan is in progress for program activity. This year the section is compiling

achievements of the Strategic Plan to inform the development of a new strategic plan and to evaluate performance.

Reports

This year we submitted Organizational periodic reports to: Uganda catholic medial bureau (Monthly submissions), Center for disease control (Quarterly submission), PMTCT Ministry of Health (Monthly submissions), FORO (Quarterly submission), Barclays (Quarterly submission), SPEDAG (Quarterly submission). Reports were also disseminated to over 1,200 stake holders.

Client satisfaction survey

This year ROM carried out a client satisfaction daily to clients who attend clinic, and 90% of them were satisfied with the services offered by ROM. However, a total of 98 clients lost to follow were followed to the community to find out why they left the program. Details are here below.

Outcome on lost to follow-up satisfaction survey 2010

Issues on assessments	Number
Went back to villages	19
Self referrals	10
In the community got saved and no longer interested in HIV care	14
Not found in the community	55
Total	98

Program Evaluations

We are working closely with academic professionals from Infection Disease Institute, the Queen Margaret University, Makerere University School of Public Health and John Hopkins University with intent to improve program services.

Presentations

This year six (6) abstracts were accepted at the XVII International AIDS Conference (AIDS 2010). 5 were poster presentations authored by, Agnes Nakanwagi (Two), Lydia Tamale (One), Sheila Kalenge (One) and Rhona Hogg (One), and one an oral presentation by Dr. Stella Alamo. Two staffs (Dr Stella Alamo and Agnes Nakanwagi)

obtained Scholarships and represented ROM in Vienna from July 18th 2010 to 23rd July 2010. These include;

1. Evaluation of the knowledge, attitude and practices of PMTCT recipients
2. Retention study in collaboration with IDI
3. Evaluation of the impact of ART on social, economic and risk behavior outcomes
4. Evaluation of a community based ART model (PhD student)

Evaluation on the domestic farming at Kasaala

Out of the 35 clients who received 5kgs of soya and bean seeds, a total of 21 clients were evaluated. Eighteen clients were females, 90% of the clients had no education while majority of them were farmers. Eleven clients planted within the season and were able to raise funds for food, income, paid school fees and replaced in the next season.

Executive Director's Office

The department comprises of Communication and Public Relations, Internal Audit, Procurement, Quality Assurance and Research sections.

Communication and Public relations

We received a total number of 450 visitors from various organizations, both local (319) and international (131). Notably of these included; Her Royal Highness the Nabagereka of Buganda Sylvia Nnagginda Luswata, Mr. Dough Kendrick from MMI and Country Representative AVSI Uganda- Mr. John Makoha. . Former director of the Stephen Lewis Foundation (SLF), Ms. Alexis ,the Managing Director of Surgipharm Uganda Limited Mr. Kinny Nayer, On the 16th February 2010 we bid farewell to Dr. Florence Kitabire of Centers for Disease Control and Prevention.

Public Relations/New Publications

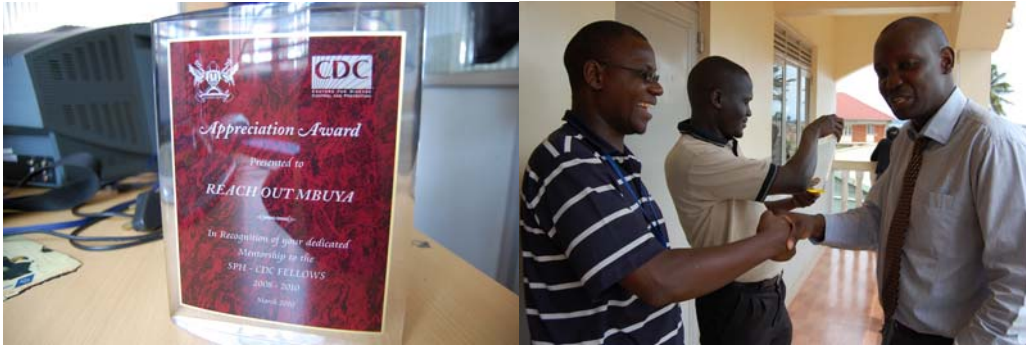
Reach Out appeared in the 60 Minutes Video to acknowledge the worth of 1 dollar in Uganda by the US Mission that was aired in America on the 04th /April/2010. We had a total of 6 electronic media coverage; 3 were done with Wavah Broadcasting Services (WBS), 3 with Uganda Broadcasting Cooperation (UBC) and one with Radio one. We also had 3 articles appearing in the print media; one in the New Vision-Bukedde, one in the Monitor, and one in the Weekly Observer papers. ROM featured in the September issue of the leadership magazine produced by the Comboni missionaries.

Updating Reach out Documentary and the Website

The Communications sections in collaborations with external consultants have finalized a new Reach out Documentary and a new Website.

Awards received by Reach Out

For over 5 years now we have been mentoring fellows from the School of Public Health, Makerere University. By the end of this year we had two fellows completing their fellowship program and we had one of them Dr. Okiria Alfred emerging as the best fellow 2010 while Reach Out received an award for the best host institution.



Dr. Okiria (extreme right) won the best fellowship award; he was attached to Reach out Mbuya

Information, Education and Communication (IEC) materials

Publications

- Received the draft communications strategy and policy.
- Specific messages on HIV/AIDS and related activities were developed for clients and the general public in English, Luganda, Kiswahili and Luo.

We distributed over 4,063 publications which included; the HIV Newsletter, 2009 Annual Report, Exploring Talents Magazine, 2011-2015 Strategic plan, Roses Catalogue. We produced the 2011 Calendars.

Internal Audit

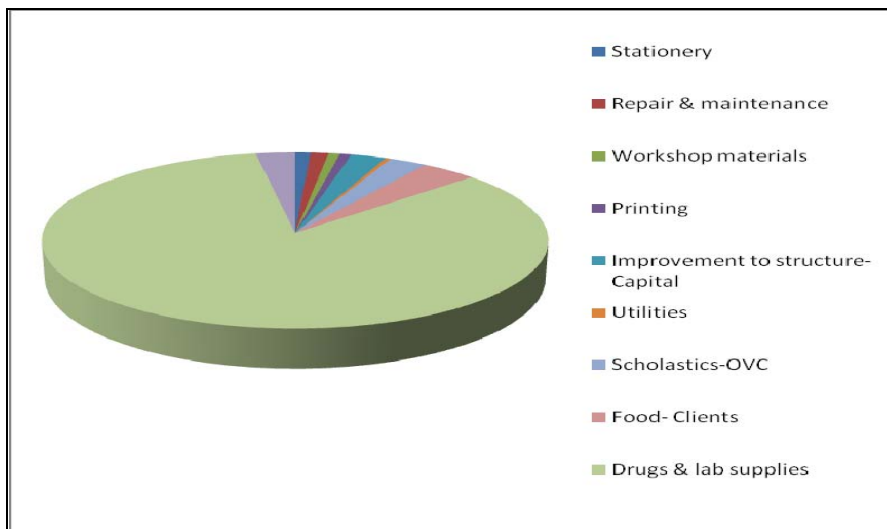
This year, ROM was audited by Ernest and Young. The Internal Audit section carried out a number of audits and several routine checks and verification in all Departments, Sites, Sections and Units.

Procurement

The Procurement Policies and Procedure Manual was approved by the Board of Directors. This year the procurement section received a total of 182 procurement requests

(18 were carried forward from previous year). The Procurement committee sat 6 times during the year to address procurement requirements, out of the 182 a total of 154 were approved, 18 rejected, and 10 carried forward to the next year because they came in towards the end of the year.

Compared to prior periods, emergency cases reduced with exception of Roses of Mbuya material requests. The pie chart below shows different procurement items handled.



Finance and Administration Department

This department comprises of 4 sections which include Human Resources Administration and Finance.

Human Resource

We had a total of 234 staffs by the end of the year, of which 36 are from Kasaala. 63% of the staff are female while 43 % are clients.

Recruitment & Selection

This year we had staff recruitments, transfers, promotions and resignations.

A total of 13 staffs were promoted to various levels, 20 recruitments were done, and 11 staffs resigned, 4 staff were transferred out, 4 staffs absconded, 2 had their contracts terminated because of work related challenges while one died.

Staff welfare

During the year, we had 10 staffs compensated for accidents they were involved in by the Insurance Company of East Africa. We held a clients gathering on 17th Dec 2010 and awards were given to best performing staff in each departments. Staff of year was Robert Isabirye the laboratory assistant while several volunteers were appreciated for the excellent spirit of voluntarism.



The staffs and community jubilate with Robert, staff of the year

Staff Movement /Travel

6 staffs traveled to Kenya on a mentorship program for KIPewa under the sponsorship of Stephen Lewis Foundation from 28th March to 3rd April 2010.

Volunteers and Students on Placement

We received a total of 175 volunteers (109 females); of these 43 (25%) were international volunteers. We majorly collaborate with the University of California San Francisco (UCSF) and Voluntary Service Organization (VSO). 100 students (89 Female) came for placement at Reach out from Makerere, Mukono, and Kyambogo Universities, IDI, Hospice and TASO.

Staff Training and Development

This year, we had a variety of capacity building activities for both staff in Mbuya and Kasaala but also for clients as detailed in the table summary of internal trainings carried out:-

Staff and clients trainings 2010

Type of Training	Females	Males	Total	Sponsor
Internal	476	318	794	CDC and PACE
External	135	183	318	CDC, John Hopkins and US Peace Corps
Clients trained	39	182	221	CDC
Total	650	683	1333	



ROM trainees graduate, in green is the Executive Director.

Six (6) months Comprehensive Course

With support from Tullow Oil we were able to enroll 19 Nurses and clinical officers (11 females) for the six months comprehensive HIV/AIDS palliative care course last year. This year the trainees completed their training and all graduated. They also visited Hospice-Africa on 27/01/2010, Mild-may center on 28th/01/2009 and IDI on 28th/01/2009 as part of their practicum.

Adult Literacy

A total of 128 (61 females) learners were reached, out of whom 17 were clients. Adult Literacy has introduced Public speaking sessions including debates within the sessions



Adults during adult classes at Kinawataka site

FINANCE REPORT

Reach Out's Funds Inflow by Source Jan to Dec 10					
	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total(Ug shs)
Roses Shop Sale & Contract	52,237,860	16,971,550	4,771,000	8,320,500	82,300,910
Medical Mission International	40,343,200	39,222,300	41,583,000	45,290,000	166,438,500
CDC MILD MAY	1,254,714,915	1,298,308,200		1,117,956,400	3,670,979,515
Private Donors & Others	4,830,506	16,168,126	2,805,800	63,270,719	87,075,151
Spedag	240,000				240,000
Sidecole	35,042,364			52,335,741	87,378,105
PACE	1,275,000	150,000			1,425,000
BOL Loan Repayment	43,925,305	49,779,710	48,956,912	52,199,344	194,861,271
IDI	423,000		4,180,000		4,603,000
FORO	12,983,985				12,983,985
Rose	45,363,765				45,363,765
Insurance	1,609,292				1,609,292
Stephen Lewis	3,810,000		151,249,954		155,059,954
Barclays		26,304,000			26,304,000
AVSI	15,488,499	23,460,223	4,200,000		43,148,722
Care	9,052,500	9,452,500	12,922,500		31,427,500
KCC	5,973,776				5,973,776
Toolkits Refund		600,000	360,000	120,000	1,080,000
Talent Club		700,000	1,120,000	1,380,000	3,200,000
Donation Boxes		1,520,250	2,513,972	5,907,938	9,942,160
Australian Embassy	92,131,515				92,131,515
Uganda Bikers	15,000,000				
GRAND TOTAL UGX	1,634,445,482	1,482,636,859	274,663,138	1,346,780,642	4,723,526,121

Expenditure Inflow Summary

Total Expenditure (January to December)							
Category	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total (Ug Shs)	Total (US \$)	%
Capital Expenditure	119,326,390	58,895,072	50,867,100	46,003,768	275,092,330	133,441.22	4.89%
Cost Of IGA	17,075,300	16,762,500	19,814,650	29,474,900	83,127,350	38,987.07	1.48%
Administrative Costs	185,285,735	47,743,584	80,047,477	76,549,077	389,625,873	190,144.73	6.93%
Operational Costs	2,517,794,040	604,449,912	907,417,239	847,705,900	4,877,367,091	2,394,209.87	86.71%
Total	2,839,481,465	727,851,068	1,058,146,466	999,733,645	5,625,212,644	2,756,782.90	100%