

# NEWSLETTER



## Makerere University Joint AIDS Program (MJAP)

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**Dear Esteemed Reader,** Welcome to this edition of the MJAP newsletter! This time around, we're showcasing the heart and soul of our work – the stories behind our social corporate responsibility held with Mulago National Referral Hospital. You see our new joiners among others, but also navigating communication gaps across multilingual teams. Meanwhile, for the LPHS-EC project, we are giving a voice to healthcare heroes who are working daily to provide quality care to endmle beneficiaries in the Busoga region.

You will be pleased to note that in line with the MJAP's Mission "To strengthen health systems to optimally respond to HIV, TB, and other diseases of public health importance in Africa" we have continued to make significant contributions through the expansion of the targeted HIV testing, combination prevention approaches and employed evidence-based interventions to effectively treat and retain our clients in care.



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## MJAP Strengthens Corporate Social Responsibility (CSR) through donation of Medical Equipments to Mulago National Referral Hospital.

Through partnerships, capacity strengthening, and shared responsibility, MJAP strives to uphold its mission and commitment beyond profit-making motives. Corporate Social Responsibility (CSR) embodies a holistic approach that aims to address healthcare challenges, improve access, and enhance healthcare quality for communities globally.

The integration of CSR in healthcare often involves substantial investments in medical research and innovation. Companies allocate resources towards funding research projects, partnering with research institutions, or offering grants to scientists and healthcare professionals. These initiatives catalyse advancements in medical technology, pharmaceuticals, and treatment methodologies, leading to improved healthcare outcomes and a better quality of life for individuals worldwide.

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The management of MJAP as part of Corporate Social Responsibility handed over 16 conference chairs to the department at Makerere University College of Health Sciences at Mulago National Referral Hospital. This CSR is one of the ways that MJAP contributes to teaching, capacity building, research, patient care, and community engagement as part of the mandate of Makerere University.



*(Photo) College of Health Sciences team receiving the 16 chairs donated by MJAP*

## Snapshot of achievements

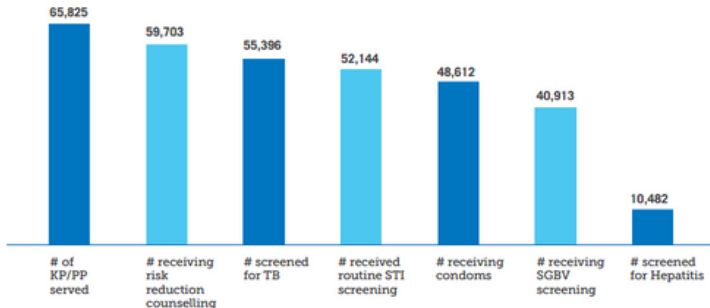


34,017

MALES WERE REACHED IN THE SUPPORTED REGIONS

425,082

HIV TESTS WERE CONDUCTED



In line with the MJAP’s Mission “To strengthen health systems to optimally respond to HIV, TB, and other diseases of public health importance in Africa” we have continued to make significant contributions through the expansion of the targeted HIV testing, combination prevention approaches and employed evidence-based interventions to effectively treat and retain our clients in care.

During the year, MJAP made a notable utilization of technological advancements such as the use of a Geographical Information System (GIS) to analyze population-specific data to inform targeted interventions in different thematic areas. Through the USAID LPHS-EC Activity, MJAP made a notable impact in the East Central region, of Uganda. “We have enhanced the capacity of districts’ health teams, public health facilities, and their catchment communities to increase the availability, accessibility, and utilization of quality integrated HIV and TB services in the 12 districts” noted the Executive Director-Dr. Fred Semitala.

The institution continued to support teaching and learning for undergraduate trainees at Makerere University, while supporting graduate students including PhD trainees with a conducive environment to conduct their research at our centre of excellence, the Mulago ISS clinic, and other project sites under the USAID LPHS-EC Activity.

With funding from the Strengthening Inter-Professional Education for HIV (STRIPE HIV) program at the University of California San Francisco (UCSF), Our Education for Interprofessional HIV Service Delivery in Uganda (EIPHIV-U) program. Successfully introduced interprofessional education and interprofessional practice in the delivery of comprehensive HIV services in the East Central region of Uganda.

The following are snapshots of key milestones from the report

As of 30th September 2023, we had a total of 437 full-time staff spread out in our different projects, 81% (356 staff) in the MJAP USAID Local partner project and 19% (81 staff) in the IDI CDC project.

In FY23, 182,882 attended antenatal care across MJAP-supported sites. Of these, 95.2% (174,026/182,882) knew their HIV status. Cumulatively, 5,308 HIV-positive women were identified and initiated on ART.

MJAP supported 133 ART sites to implement cervical cancer screening and management among eligible Women Living with HIV (WLHIV). In FY23, a total of 9746 women were screened for cervical cancer, 1029 women were found positive for pre-invasive cervical cancer (10.6% positivity), and 975 (94.7%) successfully linked to treatment.

9,233 HIV clients were initiated on ART during the period under review achieving a total of 89,933 PLHIV in care. Of these, 94% had a viral load done for monitoring HIV treatment outcomes and 97% had a suppressed viral load.



Picture: Community GBV dialogue at Malongo Sub-county Mayuge District

## Mentorship of MJAP Supported VMMC Site Teams on Processing and Sterilization of Reusable VMMC Instruments



*Participants taking part in drying and packaging of VMMC surgical instruments before sterilisation.*

In line with the Ministry of Health strategic direction towards efficiency and sustainability, USAID assigned MJAP/LPHS EC a VMMC target of 75% of its total circumcisions done using reusable kits. This, combined with the recent stock gap of disposable kits necessitated the scale-up of re-sable kits to achieve the assigned targets. Following this PEPFAR recommendation, MJAP is transitioning from the use of disposable to reusable instruments in its VMMC activities.

During Q2, MJAP supported the scale-up of reusable kits utilization across all 28 sites. Consequently, of the 7,787 surgically circumcised clients, 44.4% (3,460/7,787) (target is 75%) were circumcised using reusable instruments an improvement compared to the 26.7% (1,620/6,068) registered in Q1. Cumulatively, 36.7% (5,080/13,855) of the clients receiving surgical VMMC were served with re-usable kits.

***“The improvement in the use of re-usable kits is attributed to assigning targets to each facility conducting an outreach”*** Gerald Ahimbishibwe-VMMC Specialist

However, the region still lacked adequate re-usable sets and majority of health workers lacked practical skills in sterilization equipment leading to non-target achievement. It is against this background that MJAP worked with RHSP trainers and MOH VMMC mentors to mentor all the VMMC teams within the EC region on processing and sterilization of reusable instruments. Instrument processing and sterilization is key in ensuring the successful adaptation of reusable instruments because its poor execution can cause transmission of pathogens and disease to healthy men and boys in the VMMC program.

The activity was implemented in April 2024 and aimed at supporting the teams on the use of the biological indicator as a gold standard in the sterilization process, orienting the teams on the documentation and monitoring of the sterilization process using the sterilization log and productivity sheet that monitors the sterilization cycle and supporting VMMC teams with hands on skills on instrument handling and processing.

## Risk Management and Our day-to-day processes



The possibility that the occurrence of an event will adversely affect the achievement of the organization's/individual's objectives. Risk involves uncertainty about the effects/implications of an activity with respect to something that humans value such as health, well-being, wealth, property, or the environment, often focusing on negative, undesirable consequences.

### *The Risk Management Process*

All organizations or individuals are exposed to some type of risk every day, whether it's from driving, walking down the street, investing, capital planning, or something else. For example, A driver is approaching a yellow light and must choose to brake in order to stop in time for the light to turn red or to accelerate to make it through the light before it turns red. If the driver accelerates, he is risking going through the light which could result in an accident or a ticket.

***“Organizations and Individuals manage risk daily, knowingly, or unknowingly to maintain their health and safety, business interests, viability, compliance, and individual lifestyle”-Stella Namunapa, Audit and Compliance Officer.***

Risk management, therefore, comes in and it's the identification, evaluation, and prioritization of risks followed by coordinated and economical application of resources to minimize, monitor, and control the probability or impact of unfortunate events or to maximize the realization of opportunities.

Organizations and Individuals manage risk daily, knowingly, or unknowingly to maintain their health and safety, business interests, viability, compliance, and individual lifestyle. Simple things like crossing the road, driving to work, investing, lifestyle choices, and many more situations see us using risk management techniques to ensure our safety and well-being.

Risk being inherent in everything we do, as an organisation we have put in place mechanisms aimed at improving our risk management environment and these include but not limited to.

Having clear roles and responsibilities. Any gaps in responsibilities present an increased opportunity for risk thus by ensuring that everyone knows exactly what part of the organisation and which activities and tasks they are responsible for strengthens risk management.

Early risk identification. It's never too soon to start thinking about risk. The sooner you do this, the easier it will be to manage the risk. To achieve this, departmental or unit risk forums and risk champions were established to lead proactive risk identification.

Being positive. Not all risks are negatives, as an organisation we don't only focus on the downsides but also on the positives presenting opportunities and enabling us to take advantage of a given event or situation.

Estimate and prioritize risk. We use a risk matrix to assess and prioritize all known risks. We calculate the severity of risk by looking at both the probability (likelihood) and impact (severity) then attach the right level of priority and treatment remedies.

*Article by Stellah Namunapa- Audit and Compliance Officer to be continued in the next issue.....*

## The Power of Servant Leadership



Mr. David Mutesasira-Human Resources Manager-MJAP

“You can accomplish anything in life, provided that you do not mind who gets the credit.”- President Harry S. Truman. Based on the seminal work of Robert K. Greenleaf, a former AT&T executive who coined the term almost thirty years ago, servant-leadership emphasizes an emerging approach to leadership—putting serving others, including employees, customers, and community, first.

Servant leadership offers a refreshing alternative to traditional leadership styles focused solely on control and output. Conversely, Old-school leaders crave power and prioritize driving performance, often neglecting the development of their team members. In contrast, servant leaders see leadership as an opportunity to serve others. They share power, focus on growth and development, listen actively, and understand that leadership is about building up the team, not themselves.

The theory is that individuals who are respected, valued, and nurtured will be happier in their lives and their jobs. This, in turn, will make them more committed to the company and more productive, benefiting everyone.

Servant leadership is a powerful approach that flips the script, focusing on empowering teams and fostering growth. One effective strategy is servant leadership, which emphasizes team empowerment and growth. Recognize and relate to each member of your team on an individual basis, acknowledge and appreciate their accomplishments, and take down impediments to assist them in overcoming challenges.

**In the old school, leaders** often have the below characteristics;

- They crave power and use it to drive performance.
- Measure success by numbers, not by the development of their people.
- Talk more than they listen.
- Believe leadership is all about them.

*Article to be continued in the May Newsletter.....*

## What is Coming up?



### Safe Motherhood Conference:

The National Safe Motherhood Experts Committee, in collaboration with the Ministry of Health, is pleased to convene the 4th National Safe Motherhood Conference 2024. The conference is themed “Strengthening Community Engagement for Sustainable Maternal and Newborn Health”.



### Community CheckNow HIV-self-testing kit Launch.

Life Care Diagnostics will be launching the CheckNow kits. The third-generation CheckNow technology enables earlier detection of HIV infection and delivers accurate results within just 15-20 minutes using a simple finger stick.



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# MJAP JOINERS.....



*Ms. Iren Babirye Nassamula.  
Procurement Assistant*



*Ms. Stella Ssendawula  
IT Officer*



## Of the Month



### Editorial Team:



- **Mr. Joel Kasakaire** – Quality Improvement Officer
- **Ms. Priscilla Awori** – Executive Assistant to the ED
- **IT Officers**, Stella Ssendawula, Clement Ssengonzi & Ronnie Chemutai
- **Mr. Geoffrey Kasumba**– Knowledge Management and Communications Specialist
- **Mr. David Mutesasira** – Human Resource Manager

### Special Thanks:



- **Dr. Micheal Kiyingi** - Prevention Care and Treatment Advisor
- **Dr. Fred Semitala**—Executive Director- MJAP

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