Kasese District Youth Focus on AIDS

Vision: "A community free from impacts of poverty "

Mission : "To inform and support the communities of Kasese district with quality care and services through promotion of innovative solutions in skills development, HIV/AIDS prevention, care and support for orphans and other vulnerable children and Human rights advocacy".

HISTORY

KADYFA is an NGO based in Kasese district and was established in 2001 to respond to the HIV/AIDS pandemic, reproductive Health issues, environmental health, human rights abuse, child protection, and care and support for orphans and vulnerable children. It was started by a group of youth who reflected on their humble background, adolescent experiences and expectation amidst the challenges they encountered.

KADYFA is a member of KADDE-NET an umbrella network for CBOs and NGOs in Kasese district. It is also a member of UNASO a national HIV/AIDS networking organization. KADYFA currently has 3 volunteers who are responsible for implementing day to day program activities.

PROGRAMS

Youth Economic Empowerment - The lives of millions of Ugandan youth are marred by poverty, inadequate education and skills, inadequate work/employment, exploitation, disease, civil unrest and gender discrimination. The youth of 15-19 years constitute about 29% of the Uganda's population (2014 population census) Poverty, Unemployment and underemployment are the main problems affecting the youth. KADYFA's focus is on supporting the youth generate income after acquiring skills in shoe making, sewing, knitting, hair dressing, and business management, planning and entrepreneurship.

HIV prevention, care and support - According to Kasese district management improved plan (DMIP) 2012-2015, HIV prevalence in Kasese is at 11.2% (HMIS,2011), much higher than the national prevalence rate of 7.4% (Aids indicator survey 2011). Reasons given for the higher prevalence rate are: lack of HIV awareness, inadequate HIV services, and early marriages arising from school dropout, redundancy at fishing communities, increased commercial sex and HIV orphans who take up early parental care that have influenced the spread of HIV. The percentage of the population that knows ways of preventing the sexual transmission of HIV and is able to reject misconceptions about HIV transmission is

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at 28.4% (LQAS2011).This indicates low awareness about HIV services , 8% of the population knew two or more benefits of HCT, while PMTCT knowledge level declined from 53.7% to 27% in 2010 and 2011 respectively. KADYFA focuses on reducing HIV prevalence rate among the youth through promoting safe sexual practices and HIV Counseling and Testing accessibility.

Human Rights Promotion: From the implementation of various community projects and conducting several studies, KADYFA notes that there is lack of awareness on issues regarding human rights and the laws and policies related to this subject among the population and the local authorities. Most people don't know their entitlements and are ignorant about what to demand for and where to seek support when their rights are infringed on and this is a major cause of poverty which needs great interventions. KADYFA implements initiatives geared towards creating awareness on rights and the related policies, laws. It builds the capacity of local authorities to handle and refer cases of rights abuses. It empowers community members with advocacy skills so as to be able to demand for their entitlements.

CHALLENGES

There is high competition for funding between different organizations/firms with similar objectives as KADYFA. This limits KADYFA's' chances to get funding

There is fear that the global crisis might affect funding flow to Low Developed Countries where KADYFA's target is found.

Since it has no running funding, KADYFA does not have paid staff to support the volunteers to run the day to day activities of the organization. This affects out puts and impact.

ACHIEVMENTS

Provided clothing's, beddings and food to 143 Orphans and other vulnerable children (OVCs)

Provided micro finance training to 12 OVCs households

Provided Uniforms and scholastic materials to 57 OVCs in primary schools and 143 OVCs in secondary schools.

Facilitated legal consultation and aid to at least 18 OVCs in regard to succession planning ,property disputes, physical and sexual abuse

Provided counseling to 143 OVC households

Conducted IEC/BCC campaigns to ensure that care givers, community, religious leaders and teachers get familiar with fundamental principles of the rights of OVCs

Formed 20 out of school peer educators groups in the communities of Munkunyu, Kyarumba, Bugoye and Kitswamba to continue with discussion about HIV/AIDS.

Oriented 112 community Peer Educators in adolescent sexual reproductive health issues.

Oriented 28 health service providers in providing youth friendly services.

Conducted HCT/VCT outreaches and tested 20,000 youth for HIV and other STIs

Conducted 44 life choice and life skills video shows at parish level

Conducted 64 peer to peer interactive HIV prevention discussions at parish level

Conducted 1 day meeting to develop a referral strategy with 28 oriented health service providers and 30 trained peer educators.

Conducted 4 experience sharing meetings among 112 trained peer educators to help them share experiences and review their strategies to continuously access appropriate services among adolescent/young people.

Supported trained peer educators with 80 bicycles,112 record books and 100 T-shirts for easy coordination, good information recording and easy identification in referring adolescents/young people to health centers and community service provision outreaches to access services like STD care and management, HIV counseling and testing, free condoms supply and other reproductive health services.

Conducted 06 (six) joint drama and sports competitions with key messages on Adolescent Friendly Health services among in and out of school adolescents.

Trained 50 child mothers in tailoring skills

Trained 20 child mothers in hair dressing skills.

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