

## Condoms still contentious in Uganda's struggle over AIDS

Uganda's recall of several faulty loads of condoms last year seems to have set the country on a dangerous downward trend. Previously impressive drops in HIV infection rates are starting to be reversed, while the president is pushing to drop the "C" from ABC. Wairagala Wakabi reports.

Uganda's condom crisis seems to be reversing the country's fortunes in HIV infection rates. The national serostatus survey for 2004/05 shows the infection rate—which had declined from a high of 17% to 6%—is up again, and unlike in previous surveys, this time around middle-aged people are the most affected.

President Yoweri Museveni's government has recently been accused of discouraging condom use at the behest of American conservatives.

Kihumuro Apuuli, head of the Uganda AIDS Commission, says Uganda must put in "tremendous efforts" if it is to avoid losing ground in the war against HIV/AIDS. "The prevalence is very high among females and in urban centres, with Kampala registering 12% prevalence among women. It is unfortunate because we are not making any headway", Apuuli said earlier this year, while launching the national serostatus survey results.

He added: "We thought we were doing well in the fight against HIV/AIDS but instead [the virus] is getting on top of us."

The survey indicates that infection is shifting from the youth to adults aged between 30 and 40 years. Average national prevalence is 6.4%, slightly up from 6.2% just over a year ago. Prevalence rates have traditionally been higher among younger people, so the new trend has baffled health workers. There are at least 1.4 million Ugandans living with HIV.

"Infection is high among adults now and we must ask ourselves why", says Vice President Gilbert Bukenya, a medical professor. He says for starters the issue of condom use needs to be reviewed as the country seeks explanations for the rising prevalence rates. "The issue of condoms was

politicised. Much as the religious sector is against it, I feel there are people who can't be left out. The issue must be re-addressed", says Bukenya.

Two incidents have led to condoms being de-emphasised as the main weapon in the fight against HIV/AIDS. The first is a campaign spearheaded by President Yoweri Museveni and his wife Janet, which seeks to remove the "C" from the country's longstanding ABC (Abstain, Be faithful, use a Condom) strategy. Museveni argues that Ugandans should either abstain or be faithful, because, he claims, condoms promote promiscuity yet they do not guarantee safety from infection. This cue has been picked up by religious leaders and faith groups, many of whom have always opposed condom promotion, and have now stepped up their campaigns.

Second, a recall of some brands of condoms in 2004/05 due to concerns about their quality led to a national shortage. Several batches of condoms—of which Uganda uses 5 million a month—were found to be defective as they had a foul smell,

while others had tiny holes in them.

But although tests showed other batches to be okay, the government said public confidence in the "Engabu" brand, the cheapest and one of the most popular on the Ugandan market, had been dented so badly that even quality-assured sheaths would have to be destroyed.

Observers blame the lack of local condom testing facilities for long delays between placement of orders for condom imports and the time they reach Uganda—which confounded the effect of the condom shortage. But Martha Kibirige, coordinator of the condom unit at the health ministry, says there is no current condom shortage, and that a recently imported condom-testing machine has raised Ugandans' trust in the safety of condoms.

Uganda was the first country in Africa to reverse HIV prevalence rates, from a high of up to 30% in some areas, and averaging about 17% countrywide, in the early 1990s, to the current level of about 6.4%. The first HIV/AIDS case in Uganda was identified in 1982 along

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Wairagala Wakabi

Uganda's president wants to take the "C" for condom out of the ABC AIDS-prevention strategy

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The President's wife has been a prominent campaigner for abstinence in Uganda

the shores of Lake Victoria near the border with Tanzania.

In 1987, the country developed its "Multi-sectoral approach to the Control of AIDS" and in 1992 formed the Uganda AIDS Commission, under the Office of the President, to coordinate the fight against the disease. The strategy adopted by the Commission, which has been credited with delivering the dramatic fall in infection rates, was based on the ABC strategy.

Commission officials have warned that de-emphasising the importance of condoms will hurt their efforts, because, they say, most adult Ugandans cannot easily abstain. Uganda is a polygamous society so men often openly have sex with more than one partner. In view of this, some campaigns are increasingly targeting men.

Naker Dipak, director of Raising Voices, an organisation that works to prevent gender violence in Uganda, says their research has shown that

domestic violence is aggravated by HIV/AIDS and families that are HIV-free usually have more calm.

"Men should wake up from the era of denial and talk out their feelings. Once we have domestic harmony, we shall advance the campaign to stop the spread of HIV/AIDS", Dipak says. Men Living with HIV/AIDS Union, a non-governmental organisation, has been working with Raising Voices to increase male participation in the fight against the disease.

But while infection rates show a worrying trend, Uganda continues to make good progress in boosting access to antiretroviral (ARV) drugs. By last October, the country had outstripped its target of having 60 000 people on ARVs by the end of the year by 11%. Currently, nearly 100 000 people access ARVs in Uganda, and the target is to raise this figure to 120 000 by 2007, of which 15% should be children under 15 years of age. By contrast, in June, 2004, only 25 000 people in Uganda were receiving antiretroviral treatment.

Observers say Uganda's treatment figures remain the highest in Africa at the moment, despite the fact that more than half the people that require ARVs are not getting them.

Most African countries have failed to meet their targets under WHO Director General Lee Jong-wook's plans to put 3 million HIV-positive people on treatment by the end of 2005. But Uganda—with money from the Global Fund to fight HIV/AIDS, Tuberculosis, and Malaria, and the US Government's Presidential Emergency Plan for AIDS Relief—has managed to procure more drugs than was previously possible.

This help partly explains why Uganda exceeded its targets, but health officials also say that unlike other African countries, Uganda already had the necessary infrastructure for dispensing the ARVs, so roll out of access programmes was faster than most countries.

Drug price drops also helped boost supply. In early 2004, a month's supply

of the triple therapy generic drugs cost just over US\$30; now the cost is \$20. Branded drug prices have increased from \$81 to \$109 a month.

Sheila Gashishiri, a fellow with the US Centers for Disease Control and Prevention's AIDS programme, says while there have been gains from the increased use of ARVs, these improvements have been accompanied by a worrying increase in organisations claiming to have cured people of AIDS.

The Uganda-based Iranian professor Allahgholi Elahi is one such claimant. Elahi wants the Ugandan health authorities to recognise his product, and has even appealed to President Museveni to pitch for it. Gashishiri says such unfounded claims could cause Ugandans to underestimate the risk posed by the disease.

Worryingly, a 2005 study by researchers at the local Makerere University and the AIDS Information Centre shows Ugandans aged 19–25 years are more concerned about getting pregnant than catching HIV. The study also showed that when condoms were used by most Ugandans in this age group, they were primarily considered contraceptive tools rather than protection against infections.

These findings have added weight to calls from local and international health groups for President Museveni and his government to commit to promoting the ABC strategy properly, rather than trying to downplay the utility of condoms in HIV prevention. Meanwhile, however, activists are also campaigning for the government to offer free testing of viral load for people living with HIV/AIDS.

"We appreciate receiving ARVs but it is time people living with HIV/AIDS started getting free testing for the viral load", says Rubaramira Ruranga, a renowned Ugandan AIDS activist. "Testing the viral load is expensive yet it's what determines the person's status to start using ARVs."

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