

You too can defeat AIDS

How do you cope with HIV/AIDS if you were the patient, bereaved partner, or parent? JENNIFER BAKYAWA, a fellow from Makerere University's Institute of Public Health (IPH) attached to *The Monitor* has been speaking to people facing these very situations. They told her amazing personal testimonies of how to deal with HIV/AIDS - in your own life, and in the family:

My name is Richard Sserunkuma. I am 32.

I grew up with my sister in Kawempe, Kampala.

My sister did a lot to ensure that I went to school. Unfortunately she died in 1986.

My mother, a poor peasant, had several young children - my siblings to look after.

One day she told me: "Richard, now that you can speak English and write letters let me continue with the education of your brothers and sisters so that they can also get somewhere."

I was then in Senior Four at Kitante Hill School.

I left Kampala and joined my mother in Katuragga in Mpigi.

I lived like all villagers. I cut trees and burnt charcoal to earn a living. I tilled land, helped her pick coffee and pruned crops.

I was 17.

Everybody in the village was my friend. But there were four prominent friends - all boys. They had several girlfriends.

I was 17, but had never approached a girl. They were not happy with me! They thought I was not approaching girls because I did not have money. They gave me some money so that if I needed a girlfriend, I would have the money to give her.

I did not do what they wanted me to do.

Our friendship suffered. I felt lonely at home.

Later, I said to myself: "I am mature enough. What they are asking me to do is normal. Everyone does it. Why don't I do what they want me to do so that we become friends again."

When I met this girl, I told her I loved her.

She did not give me much trouble.

Unfortunately, some boys threatened that they would beat me up if I continued going out with 'their' girlfriend.

I did not want to fight and there were other girls.

The second girl I met was also not difficult to persuade.

But during this second relationship, I started getting health problems. That was 1989.

I got a skin rash, oral thrush. I used to sweat every night. I lost appetite and in the end weight.

I prayed hard, wishing: "Oh God, let this not be the be *Slim*." By then I did not know the difference between HIV and AIDS.

The medicine was not helping.

However, at one of the village drug shops, I came across a pamphlet by The Red Cross. I read it over and over again.

I learnt that there were some other diseases such as TB, cancer, typhoid, and dysentery that were similar to the symptoms of opportunistic infections due to AIDS.

Still I prayed, wishing I could suffer from any other disease but not *Slim*.

I was now living in Kasaawo, Kayunga but I went back to Katuragga to check on my two former partners.

I found my second girlfriend had died of AIDS.

Her partner had died earlier. I was so scared.

I thought that I was going to die very soon.

Later I heard of TASO.

I also thought of having a blood test.

In December 1990, I went to TASO's special clinic. Back then you had to wait for two weeks for HIV test results.

I waited and waited!

Finally the counsellor told me: "Richard, it is unfortunate your blood has been found to be carrying HIV, the virus that causes AIDS."

I was quiet!

I was useless. I was dying very soon.

I was angry with the four boys who had pressured me to have a sexual partner and the two girls, especially the second one for infecting me.

I asked the counsellor: "Madam, how long do you think I am going to live with HIV before I die?"

She said: "Richard, having HIV does not mean you are dying soon. You can live for some time. You can stay up to seven years."

She told me that if I joined TASO as a client I would get free medical services, ongoing support and counselling and food.

The first person I told about my HIV status was my mother.

It was not easy. But I love my mother and trusted her.

"Mother, I went for HIV test and I have HIV."

She kept quiet, then burst into tears.

I did not want to see her cry but I thought if I told her, she would support me.

I don't blame her. It is normal for people to cry when they hear bad news.

The second person I told was my father. He was then working with Iganga district administration. He was happy to see me because we had not seen each other for about ten years.

I broke the bad news to him. I can now say his reaction was neither discouraging nor encouraging.

He asked me: "Richard, how did



Richard Sserunkuma is no longer bitter or angry. He lives positively and helps others to live meaningful lives (Photo by Wossita Samuel).

you know that you have HIV?"

He added: "Not No! You are lying! You cannot be HIV positive."

There was a lot going on in my mind. I think that is why people used to commit suicide. They still do it now.

Though my father did not accept my status at the time, I knew he was in a state of denial.

Unfortunately, my father died in 1992.

I registered as a TASO client and got support.

A year later I felt okay. I had recovered. I think due to the counselling and support from the peer support group at the day care centre.

I was no longer feeling any pain. The headaches had gone! I had in fact added weight.

I asked myself: "Is it true the counsellor told me the truth?"

I decided to have another test, this time at a different place. I went to the sexually transmitted diseases clinic under the ministry of Health.

I got the same results!

Again I was not satisfied with the results.

Two years later in 1995 I took another test at the AIDS Information Centre.

It also turned positive.

I said: "I think it is high time I accepted that I have HIV."

I decided to live positively with HIV. I seek medical help whenever I feel sick.

If you don't accept your status, you may not seek medical treatment. You instead think about your work and 'numbered' days.

But due to extensive counselling I gathered courage and started coping with the problem. The counsellor told me that I could avoid certain things such as smoking, alcohol and unprotected sex.

After sharing experiences with fellow clients who had joined TASO earlier and had lived with HIV for several years, I learnt that some of them were already married at the time they got infected.

I knew I was going to stay longer and earn a living.

I needed somebody, especially a child.

I decided to get a partner. I discussed my need of dying after having a child. She too had no child. We agreed to have a child. That was 1995.

I used to hear that when a man dies without a child, his burial was not honoured. His body is taken through the hind door and the last funeral rites are not performed because he died before bringing forth a child.

In June 1996, we got our first child, a baby boy. The boy is now seven. I have not gathered the courage to test him. However, we separated with the mother.

Two years after the separation, I got another partner and we agreed

to have a child. She is a second child to both of us. We got a baby girl. She is now 15 months.

We heard learnt about Nevirapine, a drug given to HIV expectant mothers. We thought that we stood a chance to have an HIV free baby.

She went to a clinic in Old Mulago Hospital where Nevirapine is given to HIV positive mothers. During labour, she took a Nevirapine tablet.

She was not supposed to breastfeed. We had learnt that breast-milk carries some percentage of HIV.

In order to minimise the risk of passing HIV to the baby she did not breastfeed. She was always given infant formula.

After three months she was required to take back the baby for an HIV test.

I asked her not to tell me the results.

Fortunately she returned happy. The baby had tested negative. The baby is healthy. I am happy to have her.

My mother has now coped and I never see her tears anymore.

Maybe deep down she thinks about me being HIV positive but she is happy that I am well.

I am happy that I am working with TASO. I started working with TASO in 1996. I am now a day care centre supervisor at our branch in Mulago.

At the centre people who mostly are HIV positive, their caretakers and visitors convene.

Members are mobilised into a drama group to educate the public about HIV/AIDS.

This is not easy because we have to ensure what we take out is the right information.

We also encourage and train our clients' about making money through activities such as handicrafts and tailoring.

Not all of them are trained because we do not have enough money.

I am happy that I work with TASO. TASO understands people like me better than any other organisation.

I am also happy that in Uganda you no longer hear of people losing their jobs because they are HIV positive. We used to have those experiences, but when we intervened and discussed with the employers, we have got good results.

Whenever I am not fine, I see a doctor. If I have problem I see my counsellor.

I appeal to the public to love and support people who are HIV positive. People come to TASO for only a few hours but they spend almost 24 hours in the community.

In the past people used to say 'this is a TASO case, but TASO cannot succeed alone without the community's total support.'

Avoid behaviour that can lead you to getting the infection. Whether you are HIV positive or negative, we need each other.

•The writer is an IPH/CDC Fellow. (The series continue tomorrow).

'New, fast condom is lots of fun'

A new method of using condoms has been developed in South Africa to help the fight against HIV/AIDS.

An applicator has been developed to make the process of putting on the condom much faster and simpler.

Using it, a condom can be put on in just three seconds, compared to the standard 30-

40 seconds, the developers say.

Research shows that many people do not use condoms because they are fiddly and can be "passion killers".

This prompted South African life insurer Metropolitan to fund the search for an easier way to use condoms and so help reduce the

spread of HIV. Tyrel Murray from Metropolitan told the BBC's *Focus on Africa* programme.

"People couldn't put it on the dark," he said of a traditional condom - a problem he says the new applicator solves.

About 25% of sexually active South Africans are HIV

positive, according to the government.

The applicator was developed by Cape Town-based entrepreneur Willem van Rensburg but is not yet being marketed.

However it costs just one US cent more to produce than a traditional condom.

It is made of polyethylene

and comes inside the same package as a condom.

To use it, you bend the packet, which splits open. The condom then slides directly onto the penis and the applicator "pops" off the condom.

"The intention is to make more people use condoms more readily," Mr Murray

said. As a life insurer, Metropolitan has an interest in helping people live longer he said, explaining why he had agreed to fund the project.

And Mr Murray also gave it his personal seal of approval. "It was fun," he said. "I'm an old married man. I need the novelty" - BBC