

# He leads the HIV battle in a town that had lost hope

*New Vision (Kampala) - September 22, 2009*

THIS year, to commemorate the World AIDS Day, December 1, The New Vision, in conjunction with the parliamentary committee on HIV/AIDS, will award individuals who have played a remarkable role in the fight against HIV in their communities. Profiles of the nominees from which winners of awards will be selected will be published till November.



Ngarambe with some of the children who are beneficiaries of St Francis Health care Centre

## By Arthur Baguma

"I fell sick in 1989 and visited several hospitals without any improvement. I went for an HIV/AIDS test in 1996 and tested positive. My wife fled and left me for dead. I visited several medical facilities, but my condition never improved. I was selling all my belongings to afford medical care."

"During what I believe could have been my last days on earth, a friend dragged me to St Francis Health Service Centre in Njeru. The centre had just started operations in the area. It was within walking distance from my home. Within six months, after getting medical help and counselling, I was back on my feet.

"The centre has since become my home. I have acquired knowledge on how to live positively. I am a senior counsellor and I have attended several AIDS conferences which have given me wide exposure. The centre has also helped pay school fees for one of my seven children." That is the testimony of James Ibanda, 49, of Mbiko in Mukono.

His story is like all the other beneficiaries. Margaret Namugaya, 52, of Naminya, Bujowali in Wakisi sub-county tested positive in 1999. She was bedridden for 10 months. Her husband had chased her away from home. After receiving counselling and care, Namugaya regained strength. She was given money to develop her banana plantation and vegetable farm. She is a member of a drama group which moves from village to village performing and giving testimonies about HIV/AIDS.

St Francis Health Service Centre is located in the heart of Njeru town with the highest HIV prevalence rates in Uganda. Over 25,000 people have benefited from the centre.

About an hour's drive from Kampala on a smooth tarmac road, before Jinja town, lies a busy trading centre. At dusk, the trading centre is a hub of activity. The hotel and entertainment business is brisk. Women in skimpy dresses patrol bars in search of truck drivers willing to pay for commercial sex. Local leaders here say with this kind of lifestyle, the area has been hardest hit by the HIV/AIDS scourge, with the highest prevalence rates in Uganda, at 13%.

Ironically, a stone's throw away from the centre lies an HIV/AIDS centre. The compound is a mass of people. While some talk, others are quiet and worried. I later find out that those coming for the first time tend to be scared and speechless. But to those coming for their monthly dose of ARVs, life seems normal.

A tall man dressed in a green T-shirt emerges from one of the rooms. "I am sorry you have found me very busy," he says, before offering me a plastic chair to sit on. The man, in his early 50s, seems to be in deep thought.

Faustin Ngarambe is the brain behind the centre which is struggling to serve the area. He speaks softly, probably he has acquired after years of listening to chilling stories. Some patients have even died in his hands. And like many Ugandans, he has suffered the brunt of AIDS.

"I have lost many people to AIDS," he says, looking across the compound which hosts about 25,000 people. He then lowers his chin, looks at his watch and asks: "Arthur, is there anyone in Uganda who has not lost a loved one to AIDS?"

As if preparing me for a revelation, he grasps his hands and adds: "I have lost over 38 close relatives to AIDS. But even the people I have cared for have devastated my life," he says.

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In the early days, AIDS was treated with contempt and the sick as outcasts.

Ruth Nabirye, a counsellor at the centre recalls, with a chill, the first days when they visited a home where a sick man had been locked inside a house and left to die. The relatives would use sticks to throw food through a hole.

"The man was easing himself where he was sleeping. We removed the man, washed him and took him to hospital." This was the beginning of a campaign telling people that AIDS patients should not be shunned.

It all started in the 1980s when Ngarambe was in Nairobi working for a mission. A friend suffered from a strange disease whose symptoms could not be understood both medically and socially. "This guy gave up on life and resorted to alcohol. You would find all types of alcohol under his bed. He became so ill," Ngarambe narrates.

Using his own money, Ngarambe took his friend to a hospital in Nairobi. A diagnosis revealed that his friend had AIDS, a disease that was unknown to most people at the time. From the time he got the results, he was not allowed to see or visit the patient. After two days, he died.

"What shocked us was that the body was sealed in a black polythene bag. Nobody was allowed to view the body," Ngarambe reminisces.

This was Ngarambe's turning point. He came face to face with the reality of HIV/AIDS. "I immediately enrolled for a short course on HIV/AIDS awareness organised by the Melnor Fathers in Nairobi."

At the mission which was based in Dandora, Nairobi, Ngarambe was in charge of Hazina Yamasikini (the purse for the poor) funds, mainly Ugandan refugees.

Back to his roots

In 1992, Ngarambe travelled back to Uganda, where he met Sister Mary Ryan and Father Pikavet. The two had opened a clinic in Jinja for people with HIV/AIDS. He was invited to be the clinic's counselling coordinator. At the time, there were few people trained in HIV/AIDS counselling. Ngarambe's role was to visit communities and encourage people to go for HIV testing and counselling.

However, two years into the project, Sister Mary Ryan left Uganda, leaving the future of the clinic in balance. With little hope, Ngarambe soldiered on as a coordinator of mobile homecare services until 1998 when the service finally closed.

That year, in a rented small house in Mbiko town, he registered St. Francis Health Care Services. This was partly to cater for thousands of patients who had been left helpless after the closure of the mobile homecare services.

The centre started with only four staff. Ngarambe sold two vehicles to start off. Six months later, the centre got financial assistance of £8,000 (about sh24m) from a Good Samaritan. He used some of this money to buy a small motorcycle, the only means of transport at the centre. Most of the work was done on foot. The centre paying rent of sh130,000 per month. The number of people seeking services was overwhelming yet the resources to expand were limited.

Choking under the weight, in 2001, Ngarambe wrote a proposal to Elton John AIDS Foundation seeking support. The number of clients had grown to 2,000. With a support letter from UNAIDS and the Uganda AIDS Commission, he got £60,000 (about sh180m).

Using this money, he developed a comprehensive prevention strategy on HIV. He established sub-county AIDS coordinating committees which trickled down to the village level. At the village level, people were asked to select volunteers to train in HIV/AIDS prevention and counselling. Ten people were selected from each parish. They were trained in basic HIV information, counselling and homecare.

In 2001, construction of the centre's sh140m home commenced. The money was raised by board members, the community and friends. The centre has counselling rooms, a laboratory and has now been accredited as a health centre III by the Government.

About 20,000 people seek services from the centre.

Advice

Ngarambe believes it is everyone's responsibility to be involved in the AIDS struggle, not only organisations.

He also believes prevention should go hand-in-hand with care. "The Government and donors are putting in money for care but there is little money going into prevention. This trend might reverse the gains the country has so far achieved," Ngarambe says.

St Francis Health Care Centre has about 2,500 people on ARVs. About 7,000 are still taking septrin. The centre also looks after 25 children and pays their school fees up to P.7. Currently, there are about 350 children on ARVs, most of them picked from their grandparents. The centre supports 120 grandmothers. Some lost all their children to AIDS and have the burden of looking after their grandchildren.

This article can be found on-line at: <http://www.newvision.co.ug/D/8/25/695414>

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**Do you know anyone who has played an important role in the fight against HIV/AIDS in their communities? Nominate the person, indicating name, phone contact and what the person has done in his/her community. Also give your name and phone number. Write to: The Features Editor, New Vision, P.O. Box 9815, KLa or email: [features@newvision.co.ug](mailto:features@newvision.co.ug)**

## **NOMINEE FACT FILE**

**NAME:** Faustine Ngarambe

**AGE:** 52 years

**Place of birth:** Kahungye, Kamwenge district.

### **Education:**

*Attended Kahunge Primary School but dropped out in P.4 at the age of 13, following the death of his father.*

*Worked on tea plantation, 17 miles from his home.*

*In 1971, after making some savings, he went back to school and completed P.7.*

*Joined St. Edwards SS Bukumi for O'level but dropped out again before his final exams because of political upheavals in the country.*

*He went back in 1980 and completed.*

*Attended Kicwamba Technical Institute where he did agricultural engineering mechanics.*

*Taught at Rwimi SS before joining the Congregation of the Holy Cross.*

*Attended Jesuit School of Theology in Nairobi, where he got a diploma in religious studies.*

**Telephone:** 0772 409 727

**LOCATION:** Njeru Town Council, Mukono