

Networking to stop the spread of HIV

In western Kenya, they have a vision – to be a healthy and productive society free of HIV/Aids



But sadly, like many regions in sub-Saharan Africa, Kenya's Western Province and surrounding area is ravaged by the disease.

Most at risk are young girls, commercial sex workers and their clients, and migrant workers.

It is estimated that 1.3 million people are living with HIV throughout Kenya and only 550,000 are receiving life-saving antiretroviral treatment.

Western HIV/AIDS Network (WEHAK) encourages people to come together to fight the epidemic as a community.

Through its work as a capacity-building organisation, WEHAK pursues programmes to promote the prevention of HIV, as well as the treatment, care and support of those infected and affected. The aim is to empower the people most at risk.

Under executive director Dr Zahariah Muyokani, WEHAK covers Kenya's Western Province, and parts of neighbouring Nyanza and Rift Valley Provinces.

WEHAK's membership currently stands at more than 500 organisations.

"Our mission is promote collaboration and networking among organisations by creating a supportive and responsive environment for sharing resources, understanding and collectively addressing the negative social and economic impact of the HIV/Aids epidemic," says Dr Muyokani.

A middle-aged woman working with WEHAK in Kakamega tells how the organisation encourages local people to unite in the face of HIV.

"It's not a one-man or one-woman business, but affects everybody in the community," she says. "As a result of uniting, the community has reduced the number of people living with HIV."

WEHAK's achievements are many. New networks have been formed, and HIV/Aids education in schools, colleges and workplaces enhanced, resulting in the reduction of stigma and discrimination.

Young people at risk have been targeted through youth clubs and groups, as well as a local West FM radio campaign.

Support groups for those infected have been formed and peer counselors trained. Community Aids educators spread best practice and advice, including help for discordant couples.

WEHAK has lobbied Kenya's Ministry of Health and organised regional conferences to bring officials and key workers together.

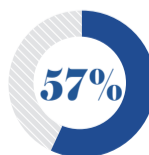
Research on HIV and Aids policies in workplaces has been conducted, notably among local water services staff. The Water Resources Management Authority – Lake Victoria North Catchment Area (WRMA-LVNCA) survey showed that 57 per cent of employees had accessed voluntary counselling and testing, and been tested for HIV. But no HIV-



500



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positive member of staff was willing to disclose their status in public.

Condom use was found to be at 97 per cent and more than 60 per cent of employees said they used them consistently with new or casual partners.

Challenges, not least fundraising, remain for WEHAK. Lack of funds is restricting core staff recruitment and there is a high drop-out rate among trainees. Information and communications technology must be developed, and a modern resource centre established.

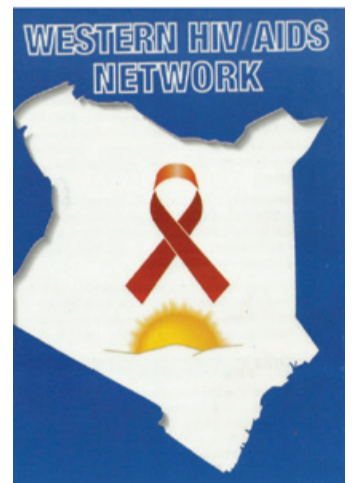
But valuable lessons have been learnt. Organisers have found a low level of understanding about HIV and Aids, even among Kenya's elite

and top business managers.

However, individuals are keen to know their HIV status, and there is high demand for HIV/Aids knowledge and education. Yet behaviour patterns are slow to change.

One way forward is to establish a permanent "cascade" structure to train community Aids educators. For example, if ten educators each trained ten recruits, the number of personnel with valuable skills soon multiplies to 100 and then 1,000 in the next round of training, and so on.

Dr Muyokani sums up the ethos of WEHAK: "Our values are solidarity with people living with HIV, participation and inclusion, justice and equity," he says.



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