



EAST AFRICAN COMMUNITY

11TH MEETING OF THE TECHNICAL WORKING GROUP ON HIV & AIDS, TB AND MALARIA

ENTEBBE, UGANDA

17TH TO 21ST FEBRUARY, 2014

REPORT OF THE MEETING

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February 2014

1.0 INTRODUCTION

1.1 Background

The East African Community (EAC) Secretariat is currently implementing the realigned EAC regional EAC HIV and AIDS Multisectoral Strategic Plan (2012 –2014), which was approved by the 8th Ordinary Meeting of the Sectoral Council of Ministers on Regional Cooperation on Health on 11th October 2012.

The EAC Secretariat convened the 11th meeting of Technical Working Group (TWG) on HIV and AIDS, STIs and TB to among other issues, review progress of the programme's implementation and plan next steps. The meeting's outputs will feed into the 18th Ordinary Meeting of the Sectoral Committee on Health scheduled for 11th to 14th March 2014 in Arusha, Tanzania, and subsequently, the 9th Sectoral Council on Regional Cooperation on Health to be held in April 2014.

1.2 Convening of the Meeting

The TWG meeting was convened in accordance with the EAC calendar of activities for the year 2013/2014 and was held from 17th to 21st February 2014, at Imperial Resort Beach Hotel in Entebbe, Uganda starting at 9.00am on each day.

The meeting was attended by Partner States experts from the Ministry of Health, Ministry of EAC Affairs, National AIDS Councils/Commissions, Development Partners including representatives from Civil Society (through EANNASO) and Great Lakes Initiative on AIDS (GLIA) and development partners including UNDP, UNICEF, UNAIDS and USAID/EA. The detailed list of participants is hereto attached as **Annex I**.

1.3 Constitution of the Bureau

In accordance with the EAC Rules of Procedure, the meeting was chaired by **Dr. Patrick Muriithi**, Head, Monitoring and Evaluation, National AIDS Control Council (NACC), the Republic of Kenya and the rapporteur was **Dr. Samwel Sumba James**, Epidemiologist Tanzania Commission for AIDS, United Republic of Tanzania, assisted by the EAC Secretariat.

1.4 Adoption of the Agenda

The agenda of the meeting was adopted unanimously and is hereto attached as **Annex II**.

1.5 Opening Remarks

Welcome Statement by the Chairperson

The Chairperson welcomed all participants to the meeting and thanked the Republic of Uganda for hosting the meeting. He then called upon the delegates to give maximum cooperation to facilitate the achievement of the meeting objectives

Remarks by the Head of Delegation, Republic of Burundi

Dr. Damien Nimpagaritse, the Head of Delegation Republic of Burundi, expressed his pleasure for being part of the meeting. He pointed out that the agenda of the meeting was heavy and urged the delegates to work hard to ensure it is well-covered. He ended his remarks by noting that the EAC's work in addressing HIV and AIDS complements the Partner States' response and wished the delegates a fruitful meeting.

Remarks by the Head of Delegation, Republic of Rwanda

Dr. Muhayimpundu Ribakare, the Head of Delegation, Republic of Rwanda, conveyed greetings from her country and thanked the Republic of Uganda for hosting the meeting. She noted that it is important for the EAC to harmonise health and HIV and AIDS guidelines and protocols, adding that even if the region has borders, HIV does not respect them. She urged the delegates to ensure harmonisation is a success so that the HIV and AIDS response in the regions is more successful and sustainable.

Remarks by the Head of Delegation, Republic of Uganda

Dr. Shaban Mugerwa, the head of delegation, Republic of Uganda, welcomed all delegates to the country and wished them a good stay. He informed the meeting that the Republic of Uganda has been experiencing an increase in new HIV infections in the last two years and that the country has redoubled its efforts to curb it. In addition, he said that the country has embarked on the establishment of a HIV and AIDS trust fund to facilitate a sustainable response to the epidemic in view of the dwindling finances from development partners.

He concluded his remarks by informing the delegates that the Republic of Uganda will provide all the necessary data to ensure that the draft EAC Annual Epidemic Report is finalised.

Remarks by the Head of Delegation, United Republic of Tanzania

Dr. Samwel Sumba James, Head of delegation United Republic of Tanzania, applauded the EAC Secretariat's efforts in harmonising HIV and AIDS guidelines and protocols and developing the first ever regional HIV and AIDS Epidemic Report. He noted that the report would set the basis for a regionally contextual response to the epidemic. He concluded his remarks by reiterating his delegation's commitment to ensuring the tasks of the meeting are complete.

Remarks by the Head of Delegation, Republic of Kenya

Dr. Ndongi Nicholas Titus, Head of Delegation, Republic of Kenya, thanked the Republic of Uganda for accepting to host the meeting. He noted that the destructive nature of the HIV and AIDS pandemic requires joint effort by the Partner States to combat it. He added that it is imperative for the EAC Partner States to create a special financial kitty to ensure a sustainable response to the threat posed by HIV and AIDS.

He concluded his remarks by recognising that many lives of people living with HIV and AIDS have been prolonged due to improved access of ART and urged the EAC to fast track the harmonisation process so that ARVs are available to all who need them irrespective of where they live or work.

Remarks by The Eastern Africa National Networks of AIDS Service Organizations (EANNASO)

Ms Jonniah William Mollel, the Technical Adviser and EAC Liaison Officer, EANNASO, said that she was privileged to be part of the meeting and praised the EAC Secretariat for being open to collaboration with the Civil Society. She noted that the region is facing the challenge of new HIV infections, adding that the Civil Society is committed to work with Partner States to address the HIV pandemic and other health issues.

Remarks by The Great Lakes Initiative on AIDS

Dr. Richard Alia, Programme Manager, Great Lakes Initiative on AIDS, opened his remarks by stating that the meeting was an opportunity for sharing experiences and information about the HIV and AIDS response in the respective Partner States.

He further informed the delegates that GLIA has been collaborating with the EAC to promote the harmonisation of HIV and AIDS prevention, care and treatment protocols and that the meeting was an opportunity to build on

those efforts. He concluded his remarks by wishing the delegates fruitful deliberations.

Remarks by USAID/EA

Dr. Peter Arimi, Senior Regional Health Specialist, USAID/EA, thanked EAC for convening the meeting and inviting him to the meeting. He noted that the meeting is timely to take ownership of some of the work on health and HIV and AIDS programming along transport corridors that has been spearheaded by donors and other stakeholders.

He further stated that USAID/EA will continue to support work on transport corridors. He concluded his remarks by assuring EAC that USAID/EA is keen to provide technical assistance to the EAC Secretariat, particularly with the Global Fund application and regional strategic plan on HIV and AIDS, TB and STIs.

Remarks by UNAIDS

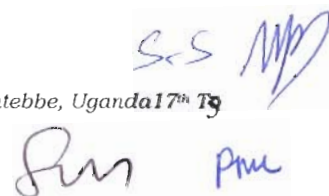
Dr. Henry Tabifor, Institutional Development Advisor, UNAIDS, on behalf of the UNAIDS Regional Deputy Director, applauded the collaboration between Partner States, Civil Society and other stakeholders in addressing HIV and AIDS challenges in the region. He further informed the delegates that the development partners, and particularly UNAIDS, are always ready to provide technical support to the EAC secretariat in its response to HIV and AIDS.

He noted that there is a lot of evidence on what programmes work in addressing HIV and AIDS and urged the EAC and Partner States to learn from it and focus on delivering results. He concluded his remarks by urging the EAC to focus on sustainable initiatives and reiterated UNAIDS support to EAC.

Remarks by UNICEF

Dr. Richard Oketch, HIV and AIDS Specialist, UNICEF Uganda Office, on behalf of the Regional HIV and AIDS advisor for UNICEF, expressed his pleasure for being part of the meeting. He noted that for a long time, more effort has been put in addressing the effect of HIV and AIDS among adults while ignoring adolescents and youth.

He expressed hope that the HIV and AIDS response by the Partner States and the EAC Secretariat will be more inclusive of adolescents and youth.



Remarks by UNDP

Mr. Mesfin Getahun, Policy Specialist-Governance of HIV Responses, UNDP, informed the meeting that UNDP partners with AU and RECs in a number of health areas including TRIPS flexibilities and Global Fund initiatives, being a Principal Recipient in several countries. Additionally, he told the meeting that UNDP is currently collaborating with the EAC to conduct a comprehensive analysis of EAC HIV and AIDS laws, policies and strategies.

He concluded his remarks by expressing his appreciation for being part of the meeting.

Official Opening Remarks by the EAC Secretariat

Dr. Michael Katende, the Principal HIV and AIDS Officer, welcomed the delegates to the meeting after which he introduced the meeting documents and presented the objectives of the meeting. These included:

- i. Review progress of the EAC Regional HIV and AIDS Programme
- ii. Review and endorse the proposed work plan for the HIV and AIDS project for the period 1st July 2014 to 30th June 2015.
- iii. Receive the update from LVBC on Sero-behavioural study in the Republic of Rwanda
- iv. Review and validate the 1st EAC HIV & AIDS Epidemic Report
- v. Review and validate the study report on Comprehensive Analysis of the HIV & AIDS legislation, bills, policies and strategies in East African Community
- vi. Review and input into the concept note to Global Fund on HIV, TB and malaria
- vii. Review and approve Terms of Reference for:
 - a. Conducting a midterm review of the EAC HIV and AIDS project
 - b. Conducting a size estimation study for key populations in the EAC
 - c. Developing the EAC HIV and AIDS Multisectoral Strategic plan 2015 – 2020

The TWG did not consider items (iii), (vi) (viib) for the following reasons.

- Item (iii) was not considered pending presentation of the final report by Lake Victoria Basin (LVBC), the institution that undertook the study, who was not present in the meeting.

- The TWG meeting decided to consider the concept note for a dialogue on alternative domestic financing for HIV&AIDS in EAC Region. This was deferred to that period after the dialogue.
- Item (viib) was not considered because the ToRs are not ready. The meeting agreed to consider this matter in the next TWG meeting.

2.0 Consideration of Various Agenda Items

2.1 Presentation on the Progress of the EAC Regional HIV and AIDS Programme

Alison Gichohi, the Capacity Building Officer, presented the progress report of the EAC regional HIV and AIDS programme for the period July to December 2013. She informed the delegates that most of the activities implemented during the period under review were those supported by collaborating and implementing partners. This was due to inadequate resources at the Secretariat due to delays in release of funds. The implemented activities included:

- i) Preparation of the regional EAC Annual Epidemic report supported by UNAIDS which was ready for presentation. The report highlights keys issued about the HIV epidemic in the regional context of the EAC;
- ii) Comprehensive analysis of the HIV & AIDS legislation, bills, policies and strategies of EAC Partner States. This piece of work was supported by UNDP and the second draft of the report was to be presented to the TWG for consideration;
- iii) Completion of the East Africa health cross-border study on provision of integrated health, HIV and AIDS and reproductive health services for cross-border communities. The study report had been validated and was due for sharing.
- iv) In close collaboration with LVBC, we had completed an HIV Sero behavioural study among university students, and plantation worker.
- v) Initiatives to promote integrated health and HIV and AIDS programming along transport corridors among others. The meeting was informed that a task force had been formed to spear head this initiative.

The full presentation is hereto attached as **Annex III**.

The meeting took note of the progress report.

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2.2 Presentation of the proposed work plan for the HIV and AIDS project for the period 1st July 2014 to 30th June 2015

Dr. Micheal Katende presented the proposed annual work plan for the period 1st July 2014 to 30th June 2015, highlighting the main activities to be undertaken during the period and the expected outputs.

He informed the meeting that the proposed work plan had been presented to the EAC for consideration in accordance with the set EAC planning cycle but needed input from the TWG for further improvement. He requested the experts to provide inputs into the plan that would then be incorporated before final approval.

The TWG on HIV and AIDS, TB and Malaria took note of the proposed work plan for the HIV and AIDS programme for the period 1st July 2014 to 30th June 2015 and made the following observations:

- i. Despite the mandate of the EAC HIV and AIDS Unit and the important relation between HIV and AIDS, TB and STIs; the programme work plan is silent on STIs, TB and Malaria which are implied core areas of implementation
- ii. The Annual Operational Plan (AOP) as presented had no clear linkage with key areas of focus in Partner States Strategic Plans, e.g. it does not show any activities on eMTCT which is a key priority at Partner State level.
- iii. In the outline and structure of the work plan, the outputs are not clearly spelt out in the entire plan.
- iv. key activities such as development of the strategic plan 2016 - 2020, the mapping exercise were missing in the work plan but were mentioned in the presentation
- v. The work plan mentioned leadership commitment and ownership in objective 1 of the AOP but did not have any interventions that focus on advocacy to rights based approaches for key populations.

The full presentation is hereto attached as **Annex IV**.

The TWG took note of the progress annual work plan.



The meeting of the TWG on HIV and AIDS, TB, and malaria recommended EAC to:

- i. Consider and include interventions specific on TB, STIs and Malaria in the next strategic plan**
- ii. Refer to the e-MTCT agenda of the Partner States to inform the inclusion of the same in the EAC work plan**
- iii. Have an abbreviations page**
- iv. Establish linkages with other SADC and other Regional Economic Communities (RECs) for purposes of information to avoid duplication of efforts by the RECs in countries with membership to more than one REC.**
- v. Revise the work plan accordingly**

2.3 Presentation of the 1st EAC Annual HIV and AIDS Epidemic Report

Dr. Larry Adupa, the consultant drafting the EAC 1st Annual HIV and AIDS Epidemic Report, presented the highlights of the zero draft report to the meeting. The presentation covered a summary of recent patterns and trends in the HIV epidemic; a summary of the current response to the epidemic, and an assessment of challenges and progress towards meeting the ten United Nations Political Declaration targets by 2015.

After the plenary discussions on the zero draft epidemic report, the TWG members sat in groups to review the epidemic report in detail.

The presentation on the epidemic report and the detailed Partner States' suggestions for review of the draft report are hereto attached as **Annex V**. The meeting made the following observations:

The report was well structured and represented some of the regional information but needed improvement.

- The report did not address community linkages in the Partners States e.g the use of Village Health Teams (VHT), peer mother etc;
- Coordination governance and leadership including section on progress in national and regional coordination structures is lacking;

- No clear methodology of how the report was created;
- Data presented was incomplete, some of the country specific data was missing;
- The sources of data were not included in the draft report;
- Capture of trends of HIV and AIDS did not include data for 2013 which is available

The TWG took note of the draft EAC regional HIV Epidemic report.

The TWG meeting recommends to:

I. the consultant to review the draft EAC regional HIV Epidemic report and :

- i. Highlight linkages with the MDGs**
- ii. Include a section describing EAC Secretariat response to HIV and AIDS**
- iii. Include information on eMTCT follow-up, its challenges and give recommendations**
- iv. Include recommendations on use of new technologies for health service provision in the Partner States**
- v. Include a summary box highlighting salient issues or findings for each chapter**
- vi. Include a section on coordination, governance and leadership;**
- vii. Include methodology, number tables and figure, an abbreviation page and limitations of the study;**
- viii. Highlight the different types of HIV in the region, specifically differences in the epidemic observed between Zanzibar and Tanzania mainland;**
- ix. Update data using the most current information from Partner States**
- x. Compare comparable data, collected using similar or comparable methodologies**
- xi. Request Partner States to submit missing data**

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xii. Include a chapter on key populations

II. The EAC Partner States to:

- i. Submit all relevant data to the consultant for incorporation into the draft epidemic report before 25th February 2014;**
- ii. Coordinate national consultation on the EAC regional Epidemic as per the programme set by the EAC secretariat and submit consolidated comments to the EAC Secretariat**

III. The EAC Secretariat to:

- i. Submit the improved EAC regional HIV Epidemic report to the members of the TWG by 5th March, 2014 for review and validation.**
- ii. Coordinate the incorporation of the comments and inputs into the report; and**
- iii. Submit the final draft report to the EAC Sectoral Committee on Health for consideration and onward transmission to the EAC sectoral Council of ministers for approval and adoption.**

2.4 Presentation of the draft study report of the Comprehensive Analysis of the HIV & AIDS legislation, bills, policies and strategies in East African Community

Ms. Christèle Diwouta, Law and Human Rights Consultant, UNDP-Regional Service Centre for Africa, made a presentation on the draft report. The presentation identified the similarities and the gaps in the Partner States' HIV policies and strategies and gave recommendations on the way forward in addressing the gaps identified.

After the presentation, the TWG noted the following;

- i. The concept of wife inheritance as used in the report should be clarified/defined**
- ii. The report should include guidance on parental consent for minors who might need HIV testing especially when parents are against their children being tested**
- iii. Key populations should be defined and include all target groups**

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- iv. The report should quote sources of data
- v. Finally, the report should be completed with table of contents, abbreviations list and executive summary

The meeting took note of the draft report on "A comprehensive analysis of the HIV and AIDS legislation, bills, policies and strategies in the EAC". The key observations were

- There was no clear definition for "comprehensive analysis" in the report.
- Some relevant laws and policies were not captured during the analysis

The TWG meeting recommends to:

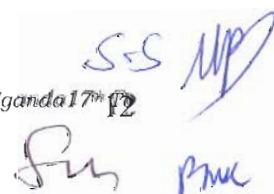
I. The EAC Partner States to:

- a. Avail the draft report to legal experts in their countries for review and submit all relevant laws and policies that were not covered in the analysis data to the consultant before 15th March 2014 for inclusion in the analysis incorporation into the draft report;
- b. Coordinate national consultation on the draft "comprehensive analysis report of the HIV and AIDS legislation, bills, policies and strategies in the EAC" as per the programme set by the EAC secretariat and submit consolidated comments to the EAC Secretariat

II. the consultant to review the draft EAC comprehensive analysis report of the HIV and AIDS legislation, bills, policies and strategies in the EAC and submit the second draft to the EAC by 28th February 2014;

III. The meeting recommend to the EAC Secretariat to:

- i. Submit the improved comprehensive analysis report of the HIV and AIDS legislation, bills, policies and strategies in the EAC to the members of the TWG by 5th March, 2014 for review and validation.
- ii. Coordinate the incorporation of the comments and inputs into the report; and



- iii. **Submit the final draft report to the EAC Sectoral Committee on Health for consideration and onward transmission to the EAC sectoral Council of ministers for approval and adoption.**
- iv. **EAC should submit draft reports for peer reviews before being considered by the TWG**

The consultant will submit a revised version by end of February 2014.

2.5 Country presentations on progress towards implementation of 2013 WHO HIV and AIDS protocols

Dr. Richard Alia, Programme Manager, Great Lakes Initiative on AIDS, made a presentation setting the background of the harmonisation process that was initiated by the EAC Secretariat in 2012. During the process, country consultations were made in all the Partner States and one of the findings was that Partner States were at different levels of implementing the 2010 WHO guidelines. Besides, GLIA had also initiated a similar harmonisation process earlier but no country finalized implementation of the harmonized protocols due to lack of resources to print, conduct trainings and dissemination and to conduct the STI drug sensitivity studies. In addition, the WHO released the 2010 guidelines, hence all the Partner States started implementing the new guidelines.

With the release of other guidelines in 2013, this session provided an opportunity to share experiences and updates on the status of implementation of the guidelines in the EAC Partner States. Each of the Partner States made a presentation on the progress towards implementing these guidelines. The presentations are hereto attached as **Annex VI a to e**.

The TWG noted that the countries are at different levels of implementation of the 2013 WHO guidelines and recommended the following to both the Partner States and the EAC Secretariat

After the presentation, the TWG observed that with the release of the 2013 treatment guidelines:

- i. The number patients on treatment programmes will increase. There is thus need to strengthen the retention strategies
- ii. With large numbers on ARVs there is need to focus on pharmacovigilance and monitoring of drug resistance

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Sun pmc

- iii. There will be need to strengthen the health systems
- iv. There is no platform for sharing best practices at the regional level for improved programming

The TWG recommends to the Sectoral Committee on Health to urge:

a. The Partner States to:

- i. **Fast track the adoption of the 2013 WHO guidelines so as to facilitate the EAC-led harmonisation of HIV and AIDS prevention, care and treatment protocols**
- ii. **Document best practices and success stories in the adoption and implementation of WHO HIV and AIDS prevention, care and treatment guidelines to share with fellow Partner States.**

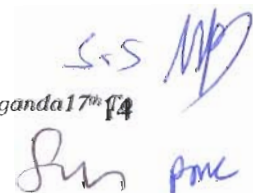
b. The EAC Secretariat to:

- i. **Compose a team of experts to provide oversight on the implementation of HIV and AIDS prevention, care and treatment guidelines and protocols**
- ii. **Organise regional meetings to discuss and give way forward and guide Partner States in the adoption and implementation of HIV and AIDS prevention, care and treatment guidelines as released by WHO**
- iii. **Fast track the harmonisation of the 2013 WHO guidelines and protocols by end of 2014**

2.6 Initiatives to scale up integrated health and HIV and AIDS programmes along transport corridors in East Africa

Dr. Michael Katende made a presentation on transport corridor initiatives that the EAC Secretariat has been involved in with partners i.e. IOM, USAID/EA and FHI 360. He informed the TWG that while there are multiple stakeholders implementing health and HIV and AIDS along the transport corridors, there is no standardized and harmonized package of health services including HIV prevention, care and treatment and challenges with sustainability of externally funded programmes.

The TWG noted the work being done by the EAC and urged the Secretariat to:

- i. Ensure the proposed strategy for transport corridors includes focus on waterways to cover Zanzibar
- ii. Follow up and ensure that the environmental impact assessments of any major road constructions in the region include health and HIV and AIDS.

The full presentation is hereto attached as **Annex VII**.

2.7 Review of various Terms of Reference

Dr. Michael Katende introduced the various ToR to the delegates who then broke into three groups to review them. The various groups reviewed the ToR and made following observations:

- i. ToR need to capture / provide room for a consultant with both English and French capabilities;
- ii. Role of the Task Force were overlapping with those of the TWG
- iii. The task force had been formed and the process was not clear and did not follow the EAC procedures;
- iv. The membership of the Task force did not have representation from Development Partners.

The TWG recommends to the EAC Secretariat to:

- i. **Applicants for the various assignments should demonstrate ability or capacity to work in both English and French.**
- v. **Harmonise the role of the TWG and those of the Task Force to clearly show the differences in the roles of the taskforce and the TWG**
- vi. **To submit the revised TORs for the Task Force on scale up of integrated Health HIV along transport corridors along major transport corridors in East Africa to the Sectoral Committee on health for consideration and onward transmission to the EAC Sectoral Council of Ministers of Health for approval.**

The TWG adopted the following Terms of Reference with amendments:

- i. ToR to develop the second EAC HIV and AIDS, TB and STIs multisectoral strategic plan and implementation framework (2015-2020)
- ii. ToR to conduct a mid-term review of the realigned EAC HIV and AIDS strategic plan (2012-14)

SRS MP
Jm pm

- iii. ToR to develop a regional strategy for scaling up integrated health, HIV and AIDS programming along transport corridors in East Africa
- iv. ToR for the EAC regional Task Force on integrated health, HIV and AIDS programming along transport corridors in East Africa
- v. ToR to conduct a mapping exercise for health and HIV and AIDS service providers and actors along the major transport corridors in East Africa

The ToRs for a development of resource mobilisation and financing strategy for health and HIV and AIDS and for developing a regional proposal on HIV, TB and Malaria for submission to the Global Fund were not discussed.

2.8 Brainstorming session on potential areas of focus for the EAC proposal to Global Fund

The EAC Secretariat has proposed developing a regional proposal for submission to the Global Fund. In addition information received during the meeting provided further clarity and guidance to the process of submitting a concept note to the Global Fund. The TWG therefore did not review a concept note but dwelt more on streamlining the process during the TWG discussions rather than reviewing the ToRs for the consultancy. It was recommended that the ToRs be updated accordingly.

In an effort to ensure that the proposal includes the priorities of the region without duplicating the Partner States efforts, the EAC requested the TWG to suggest the areas that the proposal should focus on.

After a plenary brainstorming session, the following areas were suggested:

- i. Rights based approaches and interventions for key populations including emerging key populations in the region;
- ii. Harmonization of prevention, Care and Treatment protocols, guidelines, standards etc for HIV and AIDS, TB and STI in the region;
- iii. Impact evaluation of the Global Fund support in the region coupled with implementation research to assess lessons learnt from implementing under the Global fund support;
- iv. Interventions Focusing on the mobile populations border posts due to conflict in the region, and those along transport corridors as result of economic activity; and

SSS MPJ
Jm pme

- v. Capacity to monitor transboundary disease transmission (laboratory, etc).

2.9 A.O.B

The meeting agreed that the next meeting should start by considering matters arising from the previous meeting.

There being no other business the meeting was adjourned at 3.00pm

Signed on this 21st day of February 2014



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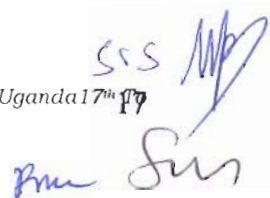
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**11TH EAC TECHNICAL WORKING GROUP MEETING ON HIV AND AIDS, TB
AND STI**

17TH TO 21ST FEBRUARY 2014

IMPERIAL BEACH RESORT HOTEL: ENTEBBE, UGANDA

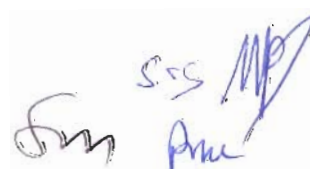
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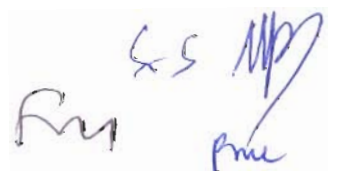
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