
FWA OCTOBER REPORT

EXECUTIVE SUMMARY

In October 2010, FWA provided support to a total of 320 people, in addition to the 18 beneficiaries participating in the micro-finance program. Of these people, 109 people sought medical consultations, 108 came for laboratory testing, 73 underwent HIV testing, and 30 HIV+ beneficiaries received regular home visits by FWA's psychosocial team. Overall, this is a 31% increase in the number of people receiving FWA support from the month of September.

The highlight of the month was that FWA received its official accreditation from the Ministry of Health as a Centre du Santé (CDS) on 15 October 2010. This accreditation will allow FWA to provide additional services to our patients, as well as receive materials and medications from the Ministry of Health. We are hopeful that receiving this accreditation will increase our patient caseload, and in combination with quality service and monitoring and evaluation, will improve our performance and donor confidence.

The sections below summarize the work done by each of FWA's core teams (Administrative, Medical, Psychosocial, and Monitoring and Evaluation).

ADMINISTRATIVE TEAM

ACCREDITATION

FWA received its official accreditation from the Ministry of Health as a Centre du Santé (CDS) on 15 October 2010. This accreditation permits FWA to provide all primary care services (preventative and curative) to our patients, as well as receive materials and medications from the Ministry of Health; the staff is also excited about this accreditation as it will aid in reducing the stigma FWA patients face by visiting our clinic, as often we are perceived as only being an HIV testing center.

With this accreditation, FWA will continue to expand its services on the basis of the laboratory and medical equipment we are able to procure. In addition, the FWA Administrative Team is brainstorming how we can

STAFF

FWA's Accountant and General Manager fell ill on October 10; she was given 10 days medical leave. At the same time, FWA's Medical and Executive Director fell ill with typhoid fever. She returned to work on Friday, 15 October 2010, but was hospitalized on Wednesday, 20 October 2010, after being diagnosed with diabetes and was not able to return to work for the rest of the month. Therefore, the activities of October were largely overseen by FWA's Program Manager.

GRANTS

CAPI Kamenge AIDS Action Project: FWA received a site visit from Bridget Butt, the regional coordinator of CAPI, in preparation for the 17 November 2010 visit from members of the CAPI Board of Directors. This was CAPI's first visit to the FWA clinic. Overall, Bridget seemed impressed by the work being carried out by the FWA staff members supported by CAPI funds.

BINUB: The equipment purchased with BINUB small grant funds arrived at the end of October; however, we are still waiting for the gynecological table to be assembled. Once installed, this equipment will allow FWA to provide

the following services to our patients: pelvic exams, STI screening and testing, Pre- and Perinatal exams, and infant and child vaccinations. Over the next year, this equipment will also aid FWA in advancing to the provision of skilled attendants at delivery and prevention of mother-to-child transmission (PTME) of HIV.

ElectricAID: The spectrophotometer purchased with ElectricAID funds has been delivered to the FWA clinic; however, we are still waiting for the vortex and laboratory distiller to arrive from Belgium. The spectrophotometer will be installed as soon as FWA is able to purchase a grounder/surge protector and back-up battery to protect the apparatus from damage due to power surges or to prevent patients needing to re-give blood samples if the power cuts mid-analysis.

NYYM: FWA continues to await NYYM funding (\$1810) to continue construction on the FWA clinic. This funding will primarily be used to strengthen the outer wall of the clinic, which is becoming an increasingly important project as FWA purchases more expensive biomedical equipment.

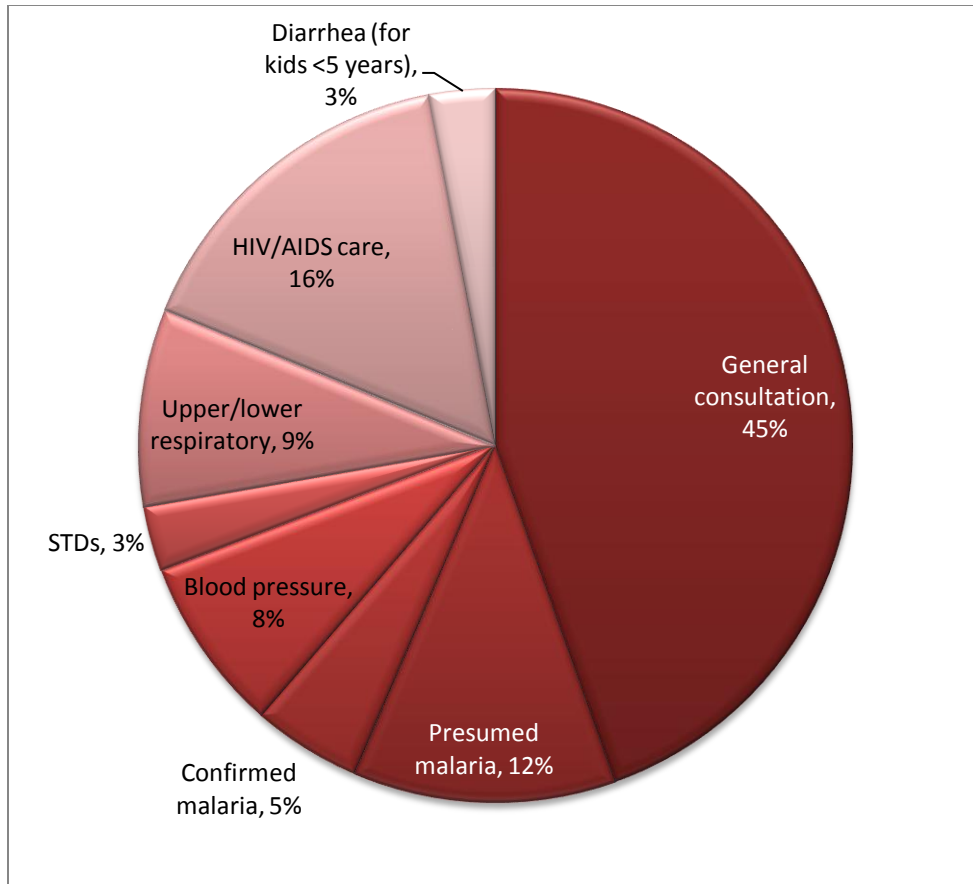
AFSC Capacity Building Grant: In the month of September, FWA and AFSC were meant to undertake the second stage of the capacity building program, the strategic retreat. However, as AFSC's Capacity Building Officer was on leave, the remaining AFSC staff was not prepared to proceed with programming. This project is on hold pending the return of AFSC's program staff.

AFSC Trauma Healing Grant: AFSC delayed in submitting the AusAid Women's Peace and Recovery Project Proposal; final submission did not take place until the second week of September. AFSC also decided to not grant FWA AFSC funds before a final decision is made by the AusAid review committee. Thus, the continuation of the trauma healing program has been pushed back indefinitely from the original 20 September start date, pending the AusAid response.

MEDICAL TEAM

CONSULTATIONS

In the month of October, FWA provided medical consultation and care to 109 people, 55% of whom were women. The largest percentage of people (45%) came for general consultation and care, followed by 16% of patients who sought HIV/AIDS care. A breakdown is provided in the chart below.



Three more cases were observed at the clinic:

- Danger of amenorrhea; the patient needed to be examined by an obstetrician and was referred to other facilities.
- Two boys, 5 months and 7 years old, presenting skin eruptions

HIV TESTING

FWA tested 73 people in October, which is the same number of people as September. The total seropositivity was quite high at 12% and the number of people HIV+ was 9. 4% of women tested HIV positive.

Total Number of People Tested:	73
Total Number of Women Tested:	45
% of People Tested Who Are Women:	62%
Average Age:	31
Median Age:	27
Total HIV+ :	9
Total HIV- :	64
Number of Women HIV+ :	2
Total % Seropositivity:	12%
% of Women Tested Who Are HIV+:	4%

LABORATORY

In the month of October, the lab technician performed a total of 108 tests for a variety of conditions.

	Tests Completed	Positive	Negative
G.E.	55	17	38
Ex. Selles	29	16	13
Pregnancy	2	0	2
Sero-widal	8	5	3
Glycemie	14	4	10
108 patients tested			

PHARMACY

In the month of October, FWA distributed medications free of charge to its beneficiaries. A list of the medications distributed free of charge is below:

- Bactrim
- Paracetamol cis 500 mg
- Gelusil
- Amoxicilline gel
- Nystatin ovule
- Nystatin sp
- Brufen 200 mg
- Asconil sp
- Erythromycin 500 mg
- Tetracycline pomade ophthalmique
- Vitamin B complex cis
- Paracetamol sp

PSYCHOSOCIAL TEAM

MICROCREDIT PROGRAM

The social worker continues to manage the small microcredit program. There are still 18 beneficiaries, 2 male, 16 female. So far, 3 women have repaid just their first loan and 9 beneficiaries (1 of them male) have paid back their first and second loans. The four people who have not paid their second loan are justified and were given another appointment for payment. Three people will reimburse in one block payment. Three other people were given other appointments in vain. In summary, there have only been 15 beneficiaries who have been active over the last two months in the microcredit program.

Some feedback from beneficiaries is that they hope the microcredit program will continue and that they would like to participate in projects that would allow them to cover both primary and secondary needs.

PRE AND POST TEST COUNSELING

FWA's psychological counselor provided pre and post test counseling to all 73 persons tested for HIV at the FWA clinic in October.

HOME VISITS

The psychological counselor and the social worker made home visits to 30 HIV positive beneficiaries, 26 of them women. The issues they came across in their visits include people who want to be retested before finding out their CD4 count, one HIV+ man who returned to his home upcountry, one woman who was very sick and was asked to visit the FWA clinic for help, and many beneficiaries who were at work at the time of their visit. One positive note is that the people participating in the microcredit program are very grateful to FWA for the program.

MONITORING AND EVALUATION TEAM

ELECTRONIC MEDICAL RECORDS SYSTEM

After problems understanding and configuring OpenMRS, the M&E team looked at other options for how to implement a viable EMR system for FWA. The version of OpenMRS currently installed is basically a bare bones version of what the system should do. There is a long list of pre-made modules to choose from, but it is disorderly and the descriptions are poor. Additionally, there is very poor documentation for implementers and future administrators. OpenMRS seems to be more of an epidemiological information system than a comprehensive and intuitive medical record. For FWA's needs, being a small clinic, there are too many hassles with OpenMRS that were unclear from the outset to really move forward on quickly.

The other options they have looked at are GNUmed and PatientOS, with the latter being the most promising. PatientOS has a lot of features that make it easy to customize the system with minimal technical knowledge and IT support. Both of these are important for after the GHC fellows leave the system to the staff. The most appealing features of PatientOS are that it does not use a web-based client, has an intuitive user interface, data collection is 100% customizable through the form creation feature, and it is possible to put every aspect of the user interface and database into different languages including French and Kirundi.

M&E OF TRAUMA HEALING WORKSHOPS

As FWA awaits the grant funding to start the next round of basic trauma healing workshops and begin the advanced workshops, the monitoring and evaluation team has continued its work on developing culturally appropriate indicators. The plan is to have a focus group to test out the baseline survey and then create the 3-month and 12-month assessments based off of the tested baseline survey.

OTHER WORK

In addition to the work on the EMR and the trauma healing workshops, the M&E team assisted the program manager in updating the website and brainstorming ideas for the newsletter. They also entered consultation, laboratory, and home visits data in preparation for the upcoming annual report.