"The Global Fund helped to save my life"

This text is based on an interview that we conducted in the run-up to the virtual conference “Global Health Champion Germany? From HIV to SARS-CoV-2. What have we (not) learned?” If you want to learn more about the impact of COVID-19 on the HIV, TB and malaria programs of the GFATM and on communities: please register to the virtual conference that will take place Dec 1, 2021

Article written by Axel Schock, Fotos: Joyce Ouma

When Joyce Ouma received her HIV diagnosis shortly before graduating from school, she had to experience how friends and even relatives turned their backs on her. The 24-year-old wants to protect other young women in particular from such experiences and is therefore involved in various committees of the Global Fund.
What motivates her to get involved? Joyce Ouma answers this question succinctly and without thinking too long: "My passion and my experiences". And the 24-year-old has indeed been working for several years with enormous energy and enthusiasm on a wide variety of levels to improve the situation for people with malaria, tuberculosis and especially HIV in her home country of Kenya - both medically and socially. She works for the National Empowerment Network of People Living with HIV and AIDS in Kenya (NEPHAK), is a member of the Global Fund Advocates Networks Speakers Bureau, the Global Fund Board and the Global Fund Youth Council. She is also active in the Women 4 Global Fund’s Strategy Working Group.

"HIV is a reality that affects us all, the virus does not make us different. This is one of the messages I want to take to society," says Joyce Ouma. Part of her very personal mission, however, is to help ensure that young women living with HIV not only get treatment, but "basically get the highest quality of health care that the community and the government can give them."

The importance of support and of networks

Joyce knows from her own experience how important that support is, and how vital it is to survival. And also how difficult the situation still is, especially for girls and young women. "Due to the climate, Kenya has one of the highest incidences of malaria in the world," explains Joyce Ouma. In addition, the East African country still has one of the highest HIV infection rates. And young women are particularly at risk.

Joyce was still a schoolgirl, just finishing secondary school at a boarding school, when she received her HIV diagnosis. Reactions ranged from pity to exclusion. Even some relatives broke off contact with her. It took several years before Joyce was able to free herself from this emotional low and regain control of her life.

In the meantime, she has built up an environment of people for whom the HIV infection is not a problem, but simply part of Ouma's life. And even more important for her: They are people who support her in her commitment. Joyce Ouma had resolved to do her part to improve the situation for other women in a similar situation. For example, as a member of the Global Fund Advocates Network (GFAN), she uses access to advocates and platforms to advance her own NEPHAK agenda, as well as to raise funds for the Global Fund.

Even simple tools like insect nets protect against malaria

Joyce Ouma says she owes a lot to the Global Fund, not least on a very personal level. "Through it, I, like so many other people living with HIV around the world, receive the HIV medications that are essential for life. And since I've been in therapy, I haven't had to go without it for a single day. It's probably saved my life."

As for malaria control, one of the things the Global Fund has made possible is very simple but effective aid - namely, mosquito nets. "Today, no family has to sleep without this insect protection," explains Joyce Ouma. For the treatment of tuberculosis, extensive investments were also made in medicines and hospital equipment.

For Ouma, however, what is of particular importance is the efforts that the Global Fund has made in Kenya to improve the living situation of people living with HIV or to reduce the HIV infection rate. About 1.7 million people with HIV live in Kenya, and nearly 80 percent of them are on treatment (as of 2020). "The number of AIDS deaths has dropped significantly worldwide, and our country has played a visible part in this success," says Joyce Ouma. "The Global Fund has made life a crucial bit better for us."

Transparency and trust

For Joyce Ouma, this meant receiving HIV medication and being able to take advantage of psychosocial services in Global Fund-financed projects. In the meantime, she has switched sides, so
Joyce Ouma

"Above all, I'm also very happy that young women in particular are the focus of the Global Fund's attention."
The fact that initiatives by and for young people are now being specifically supported in so many sub-Saharan countries, and that so much trust is placed in them, is something she finds simply "sensational." "There is probably no organization that can implement projects at such a pace."
But for Joyce Ouma, it's time to rethink the structures. "We all have a common mission, which is to eliminate HIV, malaria, tuberculosis and now Covid-19. Until now, this mainly meant that financial support only went to governments and civil society was left out," the activist explains. But now, she says, it's time to do things a little differently. "Because in the meantime, forces and capacities have developed in civil society that enable the communities to take things into their own hands as well," she is certain.
Oumo emphasizes that the communities have long been doing "not insignificant and complementary work" to the assistance and services offered by the government. "The communities bear responsibility, they have the skills, the expertise - and we know from our own experience what it's all about," Joyce Ouma underlines her claim: "We know exactly what works and why."
Young people's networks in particular, she says, offer ideal conditions for implementing and realizing suitable programs, thus complementing existing programs, such as those for HIV prevention.
The two-track financing as practiced by the Global Fund sounds perfect, but only on paper, criticizes Joyce Ouma. "But when it comes down to the country level, such as application and funding processes, and finally the distribution of funds, the government always comes first and receives the largest share of funding."

The impact of Covid-19 on communities and the need for direct funding

The Covid-19 pandemic has put more pressure on many of the community projects, and Joyce Ouma fears that Covid-19 will shift priorities worldwide - to the detriment of the other epidemics. "We have to be very careful that we don't miss the targets set in the fight against malaria, tuberculosis and HIV."

Covid-19 has also hit the poorest and already disadvantaged in Kenya particularly hard. As a result of the pandemic, many people, particularly in the capital Nairobi, have lost their jobs and had to return to their home villages. There, however, they can rarely continue their HIV or tuberculosis treatments. Others, because of their unemployment, cannot afford the fare to visit the clinic even within Nairobi. Joyce Ouma reports that, due to the pandemic, group services such as those specifically for young people living with HIV have had to be suspended because Covid-19 regulations currently prevent such meetings. She cites another little-noticed consequence of the pandemic: whereas patients* used to have almost unlimited time for counseling at care facilities, clinics have become so busy due to Covid-19 that medical appointments are tightly scheduled and no longer possible on a spontaneous basis. "As a result, there is hardly any time left for a detailed conversation," Joyce Ouma regrets. "This is especially problematic in the case of mental illnesses, which we often see in young people with HIV."

Covid-19, she says, caught Kenya completely off guard. Because of a lack of hospital beds, patients had to be cared for in tents. "This crisis has made it abundantly clear how poorly equipped our hospitals are and how necessary a resilient healthcare system is," he said. However, Kenya, a country in transition, cannot meet this challenge financially on its own.

That is why Joyce Ouma will continue to work to improve this situation. Because, as she emphasizes, it's a matter of basic human rights. "Everyone has a basic right to access essential health services, and that would naturally include HIV treatment and all aspects of sexual and reproductive health."

Thanks to our writer Axel Schock and to Joyce Ouma for sharing her story with us!

Register for the conference “Global Health Champion Germany?! From HIV to SARS-CoV-2 - What have we (not) learned?” here

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