

Inappropriate HIV/AIDS services

HIV/AIDS organisations and interventions are few. Outreach services never or seldom visit the study communities, hence communities lack of knowledge of their existence.

High levels of AIDS related illness

Fifty-five percent of deaths in the communities over the last year were reported to be as a result of AIDS. The impact of ill-health, death, funeral attendance and caring for orphans is substantial:

'Respondents said they had lost their entire immediate family members. Almost every week there is a burial of an HIV/AIDS related case.' (Field work report, Lake George).

'Every home has an orphan. Some homes have between 5 and 10 orphans.' (Field report, Lake Edward)

Summary

Diminishing fish stocks may in the short time have greater economic consequences for Uganda than the loss of an apparently easily replaceable generally unskilled labour force.

However, the long-term direct and hidden costs of continuing high levels of HIV/AIDS in fishing communities will also carry a substantial cost for the Ugandan economy through:

- Loss of skilled labour
- Loss of women's productive time through caring for the ill
- Increased illegal fishing practices
- The cost of providing health care

What is happening as a result of the study?

Because no single organization can tackle the difficulties faced by fishing communities a National Strategy was produced which will involve a wide range of Government ministries.

- Local NGOs and civil society organizations are being encouraged to work with fishing communities to set up 'beach banks', and provide practical support e.g training permanent members of communities to advise on how to get treatment and care.
- BMUs are being encouraged to spend some of the money they receive from taxes and licence fees on improving services and implementing activities within parish development plans, e.g. maintaining boreholes, building pit latrines.
- Fishers, BMUs and women who process and sell fish can help their own communities. On lakes George and Edward BMUs, Boat Owners Associations and Associations of *Barias* are already helping their communities. One group is supporting 57 orphans through school by giving up the price of one fish per boat per catch. Other groups are giving sick *barias* food, paying for health care, or forming 'social friendship bonds'.



Situation Analysis Summary

The Impact of HIV/AIDS on Fishing Communities in Uganda



Lakes George & Edward

Ministry of Agriculture, Animal Industry and Fishing



Background

The Department of Fisheries Resources (DFR) is concerned that there are higher rates of HIV and AIDS in fishing communities than in nearby agricultural areas.

In 2004 teams of field-workers worked with women and men in 21 fishing communities around lakes Victoria, Kyoga, Albert, George and Edward, and the Albert Nile to find out how HIV and AIDS were affecting people's lives and livelihoods.

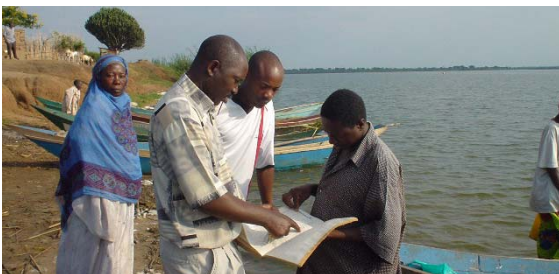
The aims of the study were to review existing knowledge and understanding of HIV/AIDS in fishing communities, to assess the situation within fishing communities and to use the information to inform the formulation of a national strategic response.

The study on Lakes George & Edward

The landing sites visited during the study included:

- Kasenyi
- Katwe
- Katunguru

There were 19 individuals and 9 key informants interviewed including both women and men. There were also a number of focus groups held at the community, sub-county and district level.



Key Findings

Impact of HIV/AIDS

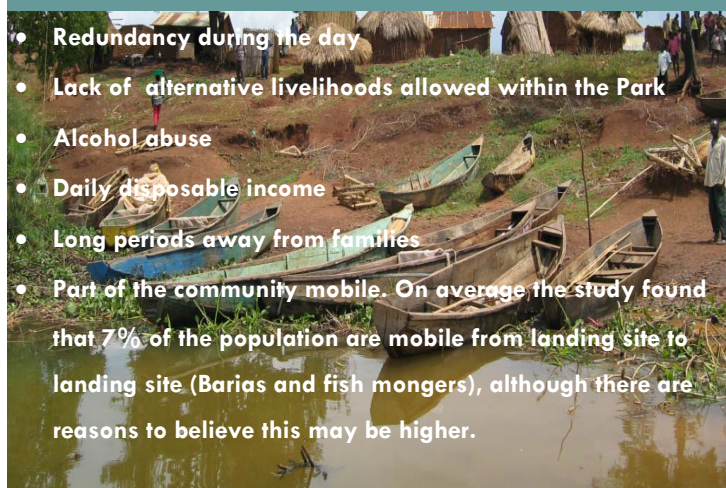
Evidence suggests HIV/AIDS prevalence is three times higher in fishing communities than surrounding agricultural communities. The four key areas of impact of AIDS on fishing communities are:

- Loss of skills
- Reduced time spent fishing due to ill health
- Reduction in the quantity of fish caught due to reduced fishing
- Reduction of fisher's ability to invest in gear.

Impacts of HIV/AIDS on fishing activities were also found. As a coping strategy those suffering from HIV/AIDS increase their use of illegal fishing with undersized nets and fishing close to the shore. This is also common amongst orphans.

In total, 96% of the respondents on Lake George said HIV/AIDS has changed fishing practices; due to loss of skills (29%), reduced time spent fishing due to ill-health (22%), reduced investment in fishing

Risk Factors



Inability to cope

Fishing communities find it hard to cope with AIDS:

- Reduced household incomes linked to reduced catches
- Reduced household food security
- Increasing poverty due to a lack of savings culture
- Limited alternative livelihood opportunities, for example the regulations covering landing sites within the Queen Elizabeth Park do not allow farming or other resource gathering activities
- Increased levels of dependency: 67% of the households visited have 1-10 orphans to care for.

Lack of Health Care

Access to health services is very poor in most communities.

- Only 18%-35% of the communities visited on lakes George and Edward had government health centres at the time of the study: these were under-staffed and often ran out of drugs
- Patients have to walk long distances to get to a Hospital: E.g. Kasenyi 40 Km, Katwe 36 Km, Katunguru 50 Km
- Communities are unable to pay for private health care services

Lack of Clean Water

- None of the communities visited on lakes George and Edward had access to safe drinking water, although the national average is 55% in rural areas
- There is limited access to improved sanitation, while the national average is 79%