

MAKERERE



UNIVERSITY

COLLEGE OF BUSINESS AND MANAGEMENT SCIENCES

FEMALE RETENTION IN HIV/AIDS CARE; THE ROLE OF SACCOS IN KAMPALA

By

LYNDA NAMUKWAYA

REG NUMBER 2016/HD06/1003U

**A RESEARCH REPORT SUBMITTED TO THE COLLEGE OF BUSINESS AND
MANAGEMENT SCIENCES IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE AWARD OF A MASTER OF ARTS DEGREE IN ECONOMIC POLICY AND
PLANNING OF MAKERERE UNIVERSITY**

JANUARY 2019

ABSTRACT

Retention in HIV care is key in achieving longevity among HIV positive patients as it guarantees desirable clinical outcomes like suppression of the HIV virus in the body. However, HIV disproportionately affects women and adolescent girls because of vulnerabilities created by unequal cultural, social and economic status especially in resource limited settings in a patriarchal African setting in Sub-Saharan Africa.

This study investigated the impact of Savings and Credit Cooperative Organizations (SACCOs) on retention in HIV care among women accessing HIV care services. A cross-sectional study was conducted among 257 adult women accessing HIV Care in 6 health facilities in Kampala, Uganda. Questionnaires were applied only to HIV positive females aged 18 years and above. The data was first analyzed through pie charts, bar graphs and cross tabulation then secondly, empirically using a logit regression model.

The study findings revealed that members of a SACCO were 3 times more likely to be retained in HIV care (with p value=0.063) compared to non-SACCO members. Relatedly, majority of the women (17.5%) attributed lack of transport to the facility as their major reason for missing clinic appointments. Surprisingly, the study also revealed that unemployed women were more likely to be retained in HIV care than their employed counterparts and this was statistically significant at a 5% confidence level with a p value of 0.072. This could be attributed to the fact that majority of the employed participants were self-employed which in its nature, usually requires a lot of time investment by the owner hence easily missing clinic appointments as opposed to their counterparts.

Using the above findings, HIV/AIDS care programs through the Ministry of Health, especially Non-Government Organizations (NGOs), should integrate financial education and empower women to establish small savings groups whose goal is geared towards socio-economic transformation for health care access.

HIV/AIDS care programs should also strengthen the differentiated service delivery models at all health facilities offering HIV care. This will greatly benefit among others, the self-employed, because part of this entails the patients being represented by their trusted caretakers to pick the drugs on their behalf whenever not able to keep their appointments. This can help to ensure the patients remain with access to their treatment at all times hence retained in HIV care.