



Hope and Beyond (HaB)



Hope and Beyond (HaB)

Centre of Excellence for Addiction services



**2020 - 2022
REPORT**

**Celebrating
a Decade of
SERVING HUMANITY**

**Supported by:
IOGT/FORUT Germany**

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clients and safety precautions. Today, every new client is expected to undergo a mandatory COVID-19 test.

Other challenges faced range from limited recovery resources and addiction professionals yet our clients have complex needs that vary from addiction to other co-occurring disorders. HaB does not have a funder for its residential treatment services and therefore, clients in long-term rehabilitation contribute financial resources to sustain their treatment. Although this is good for HaB's sustainability, some people miss the opportunity for residential treatment due to inability to meet the fees. To counter this challenge, HaB offers free treatment camps and subsidies on residential treatment fees and for those coming from low social economic backgrounds.

Hope and Beyond, Bulwa Zone, Wakalinga (at the junction of Sekabaka and Pokino roads), P.O.Box ... Kampala (Uganda), www.Hopeandbeyondug.org.



— Abbreviations —

AUD-Alcohol Use Disorders

COH- Children of Hope

HaB- Hope and Beyond

MoH-Ministry of Health

UAPA-Uganda Alcohol Policy Alliance

WHO-World Health Organisation



"... step by step and miraculously possibilities and opportunities came our way. Many people who we did not know were even aware of the project have supported us. Not only with their money but also with their time and energy to spread the information and convince others ..." **Ulrike Klan (Vice President of FORUT) at the Official Opening of HaB Health Centre.**

It is 12 months now since my admission at Hope and Beyond and by God's grace still sober. My life has completely changed as I am back to my family

and even engaged in meaningful employment. I have initiated several income-generating prospects and regained my responsibility as a father to support my family. " **Dr**

Kintu Fredrick, former client and now medical staff at HaB



"As an intern in Hope and Beyond I learned a lot and had the most wonderful time. I felt most welcome in the team and felt a lot of appreciation from the clients. I learned the importance of spirituality in the recovery of clients. In the ICAP session, I learned a lot about the theory of addiction and how to deal with it as a therapist.

I will truly never forget this experience and still think about it a lot. I'm so thankful for the whole Hope and Beyond family and hope to see them again one day." **Hannah Verwilt, Intern Social Worker From HoGhent University College, Belgium**



our treatment and prevention operations. Many face to face and hands-on therapies were suspended and clients would no longer be allowed to receive visitors. Services considered being of high risk especially those involving interacting with people in the communities such as free camp treatment for the needy populations, home visits and continuing care for discharged clients were all halted. These COVID-19 preventive measures ultimately denied our clients the much needed Psycho-social healing resources.

Financial burdens: Our finances were considerably reduced with the exit of many clients yet the few who remained at the center could not meet their dues citing loss of income. On the other hand, our operational costs increased as supply of deliveries became a problem while prices of food and medicine escalated yet the new processes introduced to prevent the spread of COVID among client and staff needed money.

Huge staff changes: Due to the lockdown, only 9 staff out of 25 could continue with regular service. The few staff remaining on duty were locked inside the center and were not allowed to interact with their families during the lockdown. This increased the risk of staff burnout as they were overworked and created a feeling of abandonment from their families.

Uncertainty of the future: Planning and resource mobilization for construction of the new Addiction Centre of excellence started on a good note in 2020. The architectural plans were approved by the government authorities and by the lockdown time we were planning to start the ground levelling work. Unfortunately, we are not sure whether it shall be possible to still move on schedule with this program.

We are however, grateful to FORUT which stood with us during the pandemic times. For instance, we received financial support of 2,000 Euros that helped us to run our quarantine campaign where we kept clients for 14 days before admission into the main facility.

Opportunities and lessons learnt

The pandemic presented some opportunities to venture into areas out of our comfort zone, so we are carried one day at a time. Some opportunities such as embracing of online methods, increasing networking between organizations and improved standards of care were realised as a result of the pandemic.

The above challenges compelled us to look for new ways of continuing care for our clients. We have therefore, been trying new concepts such as Telephone/Internet counselling which helps us to reach our clients beyond geographical barriers. COVID introduced networking opportunities as we now work closely with nearby medical facilities that served as our quarantine centres during the lockdown period and has challenged us to increase

Hope and Beyond in the COVID-19 pandemic times

In 2019, the world witnessed an outbreak of the Novel Corona Virus (COVID-19), a pandemic which caused death and massive disruption of various social economic activities. The global COVID-19 epidemic was confirmed to have reached Uganda in March 2020. However, weeks before the virus was announced, the government commissioned several measures to delay the infection from entering Uganda. Measures ranged from Total lock down (A time where no movement was allowed except for essential workers and all non-essential services suspended). In the text below we highlight the impact of COVID-19 on our services and the remedies/lessons learnt that helped us to remain in service and even gave us opportunity for improved service delivery.

The COVID pandemic affected Uganda in many threatening and highly alarming ways. Uganda had two peak infections ... and ... For 24 months, the country was under COVID-19 restrictions. At the peak of the infections, the government made new announcements twice every week which made our operations even more uncertain. The height of the COVID-19 pandemic in Uganda was marked by dwindling space for mental health treatment in spite of the increasing need for facilities to take care of people's emotional wellbeing. Declining public services called for the increasing role of the private sector in complimenting government services which nevertheless came with many challenges such as interruption in services, reducing financial and human resources and a general feeling of uncertainty.

Although Corona Virus naturally raised people's vulnerability to psychological and mental illnesses and increased likelihood for alcohol and drug abuse, most public mental health facilities in Uganda were closed down and turned into quarantine centers for potential cases. At the height of COVID-19, the only specialized government Alcohol and drug treatment services was closed to new admissions as a general recommendation to decongest health facilities and reduce the risks of the deadly viral infection among the staff and patients. Closure of government treatment facilities to people with alcohol and drug dependencies left the private sector as the major alternative source of addiction rehabilitation services but this too was not devoid of serious challenges. Hope and Beyond is a registered private health facility and therefore, continued with key services but with numerous hardships.

Disruption in treatment and rehabilitation programs: The initial response to the pandemic was panic and our resident clients reduced very fast as many feared for the worst and to use their words 'wanted to die with their loved ones'. In a bid to ensure social distance within the clients/staff and with the community, we had to make drastic adjustments in

EXECUTIVE DIRECTOR'S REMARKS: GREAT STRIDES AMIDST UNPRECEDENTED CHALLENGES

I am excited to present to you a report of yet another eventful period (2020 – 2022); A time marked by unprecedented challenges caused by the COVID-19 and yet of great strides towards our vision.

In this reporting period, vision 2030 comes within a touching distance as we were able to successfully construct the first block and launched the only Health centre to the people of Nakabiso, Village in Mpigi District. It is a period that marked expansion of our services as we celebrated our 10 years of existence! In 2021 alone, we registered 564 patients – the highest number of beneficiaries registered in one year! As I write this report, I am happy to note that our mental and general health services have directly reached 1,380 individuals and their families since 2012. We had times of despair too... for instance the onset of COVID-19 greatly delayed construction works on Vision 2030 and the related restrictions almost made it impossible to proceed with our ministry. Yet with the unwavering support of FORUT, our main benefactors, and the resilience of the staff, we came out of the crucial pandemic period stronger!

In 2023, we aim at doubling the numbers of our current beneficiaries with continued focus on increasing the service uptake among the less privileged societal members. In August 2022, we shall commence the construction of the state of art recovery dormitory for our clients. The dormitory, the first of its kind in Uganda shall accommodate interests of the low and upper income categories.

On behalf of the directors and management, I would like to express our sincere appreciation to FORUT and IOGT Germany, our development partners, staff, clients and well-wishers. To achieve the priorities above and more, we need hard work and support from all stake holders and look forward to your contributions in kind and monetary form. For a Vibrant life

Dr. David Kalema



HOPE AND BEYOND:

Celebrating a Decade of services for restoration of Hope

HaB was founded in January 2012 to instil or restore unlimited hope and resilience among those discouraged by the challenges of life especially that of addiction. Our vision is: “a happy and productive society that is free from substance misuse”. For ten years now, HaB has continuously offered services for holistic care to individuals and families suffering from substance use”. Not even COVID-19 stopped us! HaB extends her services beyond any form of social, political or economic divide. The main treatment goal of HaB is to help clients achieve abstinence and attain better quality of life

Core Values

HaB fundamental principles are summarised in the acronym HOPE:

Honesty: Rigorous honesty is key to recovery from substance abuse. At HaB, we strive to be true to ourselves and to others in our day-to-day business and we prioritize accountability in our works.

Openness: We encourage transparency in discussing issues and challenges in order to establish and address their root causes.

Patience: HaB acknowledges that changing is a gradual and life long process. We promote patience and tolerance to give our clients time to recover.

Empathy: We serve all humanity without any bias and Central to HaB’s operations is a strong desire to place ourselves in the shoes of our clients in order to appreciate and help them address their challenges.

Partners:

Our major partner in the attainment of Vision 2030 is FORUT- Germany. Other partners who cooperate with HaB include:

- Guttemplers (Germany)
- Movendi International
- Uganda Counselors Association
- Uganda Alcohol Policy Alliance



Dr. David Kalema addressing the National Assembly for the Guttemplers in Germany and below is one of the presentations in a Guttemplers meeting in Berlin (June 2022)



building is planned to house at least 60 clients who may need residential addiction treatment at any one time. The dormitory is expected to meet varying needs of the people: VIP apartments to allow those who would like the support of their loved ones around them to be present with them but shall also subsidise the treatment costs for those who cannot afford full treatment fees. Some key features include:

- Accommodate 60 Residents
- Five wards for general patients for 34 residents
- 8 Self-contained 'family' rooms for 24 residents
- Separate Men and women wing



Hope and Beyond Dormitory Block to house 60 patients

Fundraising:

The total cost of the foundation only shall be Eur 46,250. In June 2022, Dr. Kalema, on invitation of FORUT, visited several places in Germany and addressed the Guttempler National meeting and others in Dusseldorf and Berlin to give an update about the construction project and appeal for support. We continue to appeal for support from everybody so as to help us to achieve our mission. Contributions can be sent on **Mobile Money number: +256772481003 or On Account 3100023832 of Centenary Bank.**

Key Services:

Treatment and rehabilitation:

Treatment is organized in three major forms, i.e. residential, treatment camps, and continuing care. Intensive residential rehabilitation services are meant for clients with severe addictive disorders. HaB's treatment and rehabilitation program is holistic covering, among others, detoxification and other medication, psychosocial therapies, livelihood skilling and spiritual nourishment. Treatment duration ranges from 30 days to 180 days depending on the client's condition.

HaB conducts free Brief intervention in form of 7-14 days' treatment camps to benefit the needy populations who otherwise cannot afford regular treatment. Camp treatment can be provided in any location. Please contact us if you need to support or organize a camp treatment in your area.

Finally, to prevent relapse and promote long term recovery, HaB offers psychosocial support to discharged clients through ongoing counseling, home visits and mentorship.

Detoxification: Hope and Beyond is an accredited health facility by Ministry of Health and has a medical protocol to facilitate safe elimination of the harmful substances that alcohol and drugs bring into the body. We have a medical staff on duty for 24 hours to supervise safe detoxification process and attend to other presenting medical and psychiatric co-occurrences.

Psycho Therapy: This involves a range of individual and group (Cognitive Behavior Therapy, and Motivational approaches), Livelihood and skills building (e.g. tailoring and entrepreneurship), Psycho education and Spiritual renewal programs. These therapies are delivered in numerous interactive sessions (e.g. meditation and prayers, life skills, alcoholic and narcotics anonymous fellowships, experiential therapy, family and group therapies).



Edutainment for and by the clients is a regular therapeutic program at HaB.

Vocational and Occupational skilling: HaB offers training in basic business management and occupational skills that can enable a person to sustain him/herself economically. Examples include training in Art and Crafts, Baking and Catering, making of soap, detergent and candles.

Spiritual Support: Hope and Beyond admits people from various spiritual backgrounds and work with their spiritual leaders to provide necessary guidance for their recovery.

Continuing care and Community Reintegration: Home visits of discharged clients to support their integration was suspended due to the COVID Standard Operating Procedures but we continue close contact with our clients through phone calls and other digital platforms for at 3-6 months following their discharge

Station, treatment ward and attached washrooms. With this in place, we launched our outpatient services which have were well justified by the treatment camp that we concluded in previous days.



Appreciation

We are grateful to FORUT-Germany whose generous donation contributed to about 80% of the entire construction costs. One by one makes a bundle. Through local contributions we managed to mobilize the 20%. We are grateful to our local donors who have included Eng. Kizito Emmanuel, M/s. Margaret Nassanga and HaB Clients/Sponsors and directors. Special appreciation to others who have contributed toward the growth of the project including the unsung heroes who have contributed prayers, advice and labor including the HaB Directors and staff, building professionals including the Architect, Engineers, Construction workers and Material supplier. Finally we thank the leaders and residents of Nakabiso for embracing us whole heartedly.

Next Step: Building the Residential treatment ward

The plan for the dormitory and revised site lay out and architectural of the proposed is finished and approved by theMpigi District Local Administration. We are currently looking for money to construct the second phase (Rehabilitation accommodation facility). The accommodation

Vision 2030: Specialized Addiction Treatment and General Health Care

Project goal:

Vision 2030 was conceived to provide general health services to the locals in Nakabiso and quality addiction recovery services to the general population in order for them to live a fully productive life. It is expected that the entire project consisting of the administrative block, reception, clinical, and accommodation centers shall be built on three acres of land and will be made in different phases. On completion of the entire project, we estimate to serve at least 50 patients daily on an outpatient's basis, a total of about 18,000 every year.

Besides primary health and addiction treatment services, the proposed centre shall focus on related services to improve community welfare. Our clients shall be trained in skills and will be empowered with knowledge not only to support their recovery but to be able to start and sustain economic ventures. More specifically, special programs will be designed for providing social empowerment of the girl child and the woman in general. Programs shall be extended to include life/livelihood skills which are essential for survival and realization of one's potential. Activities such as handcrafts, carpentry, agriculture, animal husbandry and poultry will be embodied in the program for economic empowerment of the beneficiaries.

Products from the livelihood activities such as agriculture, animal husbandry and poultry shall be used to feed the clients while the excess shall be sold off to supplement the maintenance costs. Although there shall be discounted rates for those that cannot afford the services, users shall be required to pay for the services so as to promote economic sustainability of the facility. Proceeds from the fees shall be used for maintenance and repair, personnel costs and other operational expenses.

The center shall also provide research and training opportunities for professionals that are interested in management of SUDs.

Finally, this project will provide safe water to the people within a reasonable walking distance (a radius of 1.5km from the project site).

Progress:

On 6th November 2021, HaB celebrated the completion of the first block that has a pharmacy, staffroom, a doctor's room, theatre, nurse

Outreaches and institutional capacity building:

HaB uses various platforms to promote awareness and motivate those suffering from addiction to seek treatment. HaB equally offers opportunities for professional mentorship in Substance Use Disorder treatment (SUD) to individuals and groups of people.

Research and Education:

Our ground-breaking research offers opportunity for culturally adapted effective treatment for substance use in Uganda.

Advocacy:

HaB offers leadership to Uganda Alcohol Policy Alliance (UAPA); the only civil society umbrella for policy to control alcohol harm in Uganda. As the Chair of alcohol control advocates in Uganda, HaB co-sponsors Bi-annual Uganda Alcohol Policy Conference and effectively lobbies for Alcohol Control Policies.

General Medical and mental Services:

In November 2021, HaB commissioned a Health Centre, the first one in the area of Nakabiso. The Health Centre is part of a wide HaB mission (Vision 2030) to transform the well-being of the people in Mpigi District.

Meet the winning team!

HaB boasts of a youthful multi-disciplinary and dedicated team of 16 staff; 14 full-time and 2 part-time. Some professionals are also in recovery and use their stories to inspire change among the clients. The Executive Director is a Ph.D. holder in Addiction studies and an International Certified Addiction Professional (ICAP2). He supervises the administrative and clinical teams. The therapists' team is composed of 5 professional Counsellors and is headed by Namazzi Christine, a Clinical Psychologist who is also an ICAP1 with 12 years of experience in addiction management. Other counsellors include: Nantongo Josephine (Masters in Clinical Psychology), and counsellors, Sr Catherine Mukuba, Charles Senabulya, Gibson Kibuuka and Alexander Nuwamanya. Daily medical services are managed by Justine Nabukenya a Clinical Officer with over 20 years in medical practice. She works together, with Dr. Wakabi Moses (over 20 years in Psychiatry), Dr Kintu Fredrick, Nurse Achileo Semanya and Nurse Sandra Kobusigye to provide fulltime medical and Psychiatric and medical services to our patients. HaB regularly hosts student

interns in Social works, Counselling and Psychology departments from Ghent, Uganda Christian University and Kyambogo Universities for mentorship.



Internship experiences form some of our international students:
“As an intern in Hope and Beyond I learned a lot and had the most wonderful time. I felt most welcome in the team and felt a lot of appreciation from the clients. I learned the importance of spirituality in the recovery of clients. In the ICAP session I learned a lot about the theory of addiction and how to deal with it as a therapist. I will truly never forget this experience and still think about it a lot. I’m so thankful for the whole Hope and Beyond family and hope to see them again one day.”
Hannah – Repetition....see page 6...you may delete the post on page 6



Services currently offered at the Health Centre
(Brochure)

money but while we were still planning and before we even could put any of it into action, the worldwide covid-19 pandemic came with all its restrictions and therefore, new challenges. Again I was in doubt about whether we could succeed.

But step by step and miraculously, possibilities and opportunities came our way. Many people who we did not know were even aware of the project have supported us. Not only with their money but also with their time and energy to spread the information and convince others. This I put down to the fact that you, David, really reached and won people's hearts back then when you visited Germany to talk to us about Ugandan alcohol problems and your vision for solutions.

You yourself set everything in motion in your home country and were able to move people and win them over to your Vision. But here in Uganda too, the pandemic delayed many things or made them impossible. Solutions had to be found and were found. Solutions that were even beneficial to others like for example your idea to, instead of hiring a company from Kampala, involve the people of Nakabiso in the building process and thus offer them work and income opportunities along with lowering the building costs.

At this time, I would like to thank the local leaders and the entire village of Nakabiso from the bottom of my heart. Thank you for agreeing to this project and supporting it. You did not know what was coming to your village when we sat together in 2020 and talked to each other. But just like our people in Germany, you also trusted us. Trusted that we would keep our word. Trusted that your village would benefit, trusted that everything would be alright. You people too were in my thoughts during my sleepless nights in fear of letting you down.

And now, today the day has come.

We are here in front of this beautiful building in front of a great new beginning I can hardly believe it: Vision 2030 becomes visible for the first time. It is no longer a vision, it is reality. With this health center which is not only for benefit the people of this area but the beginning of something even bigger. The beginning of the new HaB center of excellence in addiction treatment.

I wish that this place can be a place where people like to come, not only when they need medical treatment but also a place to gather, to talk, to learn, to exchange experiences, to pass on knowledge.

A true place of rehabilitation, recreation and empowerment. A place of Hope.

Thank you. Webale nnyo

Ulrike Klahn

Vice President - FORUT

"I was working as an intern at Hope and Beyond for 3 months. In these months, I learned so much. Professionally, I learned a lot around counselling. The group sessions and the individual sessions were very interesting. I also learned a lot about substance abuse and how it's connected to mental health. On a personal level, it has been very enriching to my life as well. Hope and Beyond is something I carry in my heart". Emma



Emma (Left) and Hannah(Right)

SECTION TWO: MAKING A DIFFERENCE:

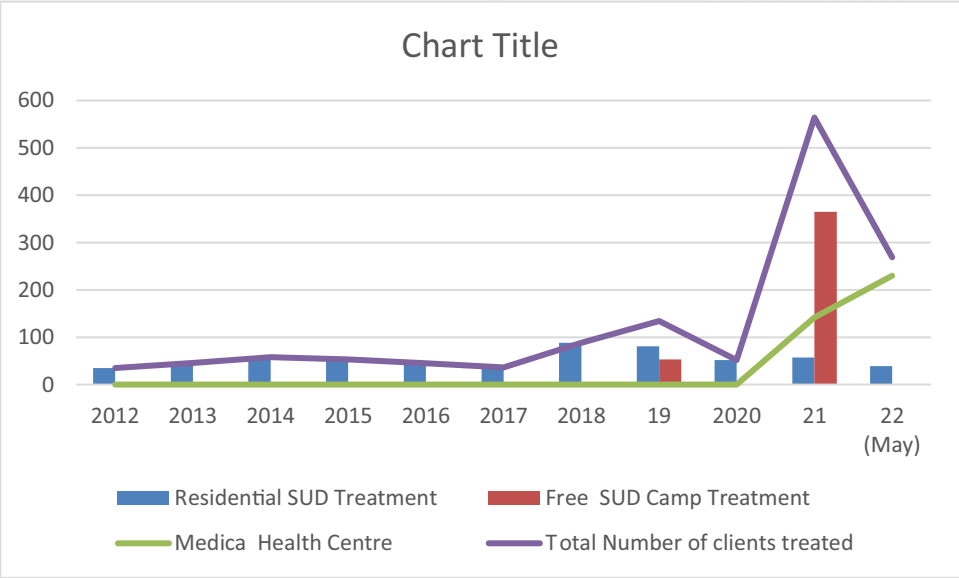
Report on HaB Interventions

Despite the unprecedented setbacks, HaB maintained an upward trend among those receiving her programs where 1,380 people directly benefitted from the combined treatment services by May 2020. Please see details in the table and graphs below. In spite of the COVID-19 and other serious challenges, 2021 and 2022 saw the highest number of service beneficiaries at HaB. The spike in the service use is attributable to opening HaB Health Centre in Nakabiso, Mpigi that offers both mental and medical services to the population around.

Table and line graph one showing Trends of service uptake at HaB over the last 10 years

	2012	2013	2014	2015	2016	2017	2018	19	2020	21	22 (May)	Total
Residential SUD Treatment	35	46	58	53	45	36	88	81	52	57	39	590
Free SUD Camp Treatment	0	0	0	0	0	0	0	53	0	365	0	418
Medica Health Centre	0	0	0	0	0	0	0	0	0	142	230	372
Total Number of clients treated	35	46	58	53	45	36	88	134	52	564	269	1,380

Line and bar graph showing Trends of service uptake at HaB over the last 10 years



HaB Health Centre was officially opened on 6th November 2021. The day was marked by Mass led by Fr. Richard Sebinyansi and the Centre was dedicated to St Monica, the patron saint of people with addictive challenges. The official opening was attended by the Vice President and the Treasurer of FORUT, Mpigi District Medical Officer, Local Council Executives, among others.

The new block cost a total of UGX203,806,019 (Eur 49,708.79) of which UGX 166,359,750 (EUR 39,485) was directly donated by FORUT. Local contributions from HaB directors, clients and well-wishers included UGX37,446,269 (Eur 91,333) and land valued at UGX102,200,000 (Eur 24,878)...(I think we need to explain that HaB bought the land, for clarity. At the same function, HaB appreciated several individuals who had made a significant impact in its work.

Speech from FORUT on the launch of HaB Health Centre

Good afternoon everyone, dear chief guest ... , Dear David

Today is a Day full of Joy, pride and confidence.

Today is a day that marks a new beginning.

The beginning of something that you, David, have been dreaming of long before we met.

Something that over the time has become our shared dream.

Something that we have worked tirelessly for over the last two years – Vision 2030

And when I say “we”, I want to point out that it is not only just HaB and FORUT, but all the people who are here with us celebrating this wonderful day and even many more. It is the entire HaB staff who, during the whole process kept your back free to take care of all the necessary duties, it is the architect, the constructor, the builders who created and built this beautiful building, it is your family, your wife Christine, your Kids Eugene, Wonder, Trinity and Spero, who have been always at your side and supported you and last but not least it is the people in Germany who trusted you and your vision so much, that they were willing to give their money for it.

And now we are about to reap the fruits of our collective efforts.

When you, David, first told us about your dream to build a rehab center out here in the village of Nakabiso, we were immediately electrified and it did not take us a second to agree on supporting your idea. As long as we were here with you in Uganda, it just sounded awesome to us.

Back home in Germany I experienced the very first sleepless nights of my life in fear of failing. I asked myself: How would we ever manage to raise the money for such a big project? Would we possibly disappoint you and let you down with your vision? We, the board members of FORUT then came up with ideas on how to mobilize

radio station which helped in our mobilisation efforts. The heroes of this camp are the team members who in spite of being few, diligently served the masses.

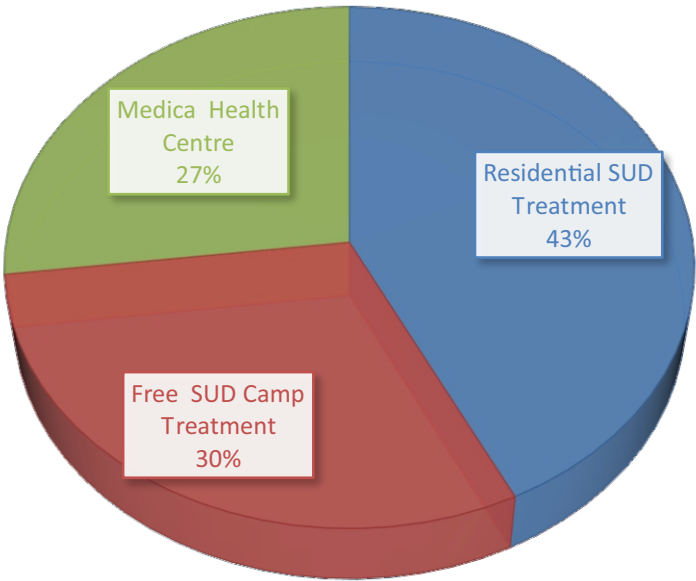


Official opening of Hope and Beyond Health Centre

Balancing attainment of the original mission with responding to emerging community needs

The Pie chart below shows how HaB has remained true to her original vision of offering professional Substance Use Disorder (SUD) recovery services as Intensive residential treatment for drug use contributes the biggest percentage (593 clients) followed by brief interventions combining addiction treatment and other mental health and general health conditions (373 patients). Also notable in our services is that 30% of the HaB beneficiaries were considered as coming from economically deprived backgrounds and received free services. In order to be relevant to the needs of the surrounding community HaB now operates a Health Centre that offers various mental and medical services.

PIE CHART SHOWING DISTRIBUTION OF HAB BENEFICIARIES BY SERVICE BETWEEN 2012 AND 2022

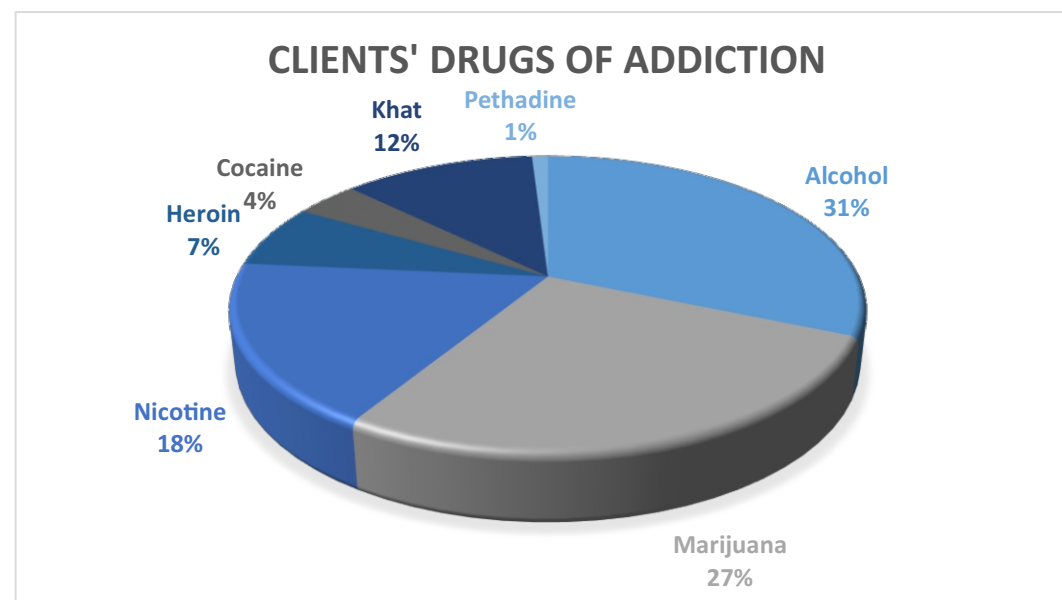


Treatment and Rehabilitation for People with Alcohol and Substance Use Disorders (A/SUD)

Management of A/SUD continues to be the backbone of HaB services. Despite COVID-19 that greatly reduced our uptake, we managed to treat 148 clients in the reporting period. We are also glad to note that the percentage number of female clients has doubled from 10% in 2019 to 20% in the reporting period, although females still remain underrepresented among the service users.

As noted in the challenges section, COVID-19 affected our services and because of that, the number of residential treatment clients for the SUD in 2020 and 2021 declined to 52 and 57, respectively as compared to 88 in 2018 and 81 in 2019. The majority of the clients are Ugandans and a few others are from South Sudan, Kenya, Rwanda, and the Democratic Republic of Congo.

Alcohol is the leading patients' drug of choice followed by Marijuana and Nicotine. Other treated drugs in the said period include Heroin, Cocaine, Khat, and Pethidine (See Pie chart 1).



Comorbidities: Mental disorders such as Bi-polar, Schizophrenia and Psychosis - mainly substance induced are the leading co-occurring illnesses treated. Other presenting Co-occurring conditions are dental illnesses, Hypertension, Diabetes, and opportunistic infections. Depression, anxiety, insomnia are the commonest psychological comorbidities reported by our clients.

SECTION THREE: CELEBRATING A DECADE OF SERVICE: Expanding Services to reach out to the underserved and Underprivileged Populations

Alcoholism, drug use, gambling, and other addictive behaviours such as pornography and technology addiction are on the rise in Uganda. The negative impact of alcoholism and drug use is worsening the already difficult social-economic condition of our people. In this COVID-19 era where many have been frustrated due to the loss of loved ones, economic opportunities, and children not going to school ... we are observing an increasing number of people with substance use disorders and other mental-related challenges. Our patients come from all sorts of backgrounds yet many health facilities lack adequate expertise to manage addiction.

In November 2011, HaB launched her Tin anniversary commemoration by Commissioning a health Centre and offering free medical services to 365 people from financially deprived backgrounds.

Free medical and mental Health Camp

In November 2021, HaB conducted a free medical/mental health treatment camp that initially targeted 100 beneficiaries but ended up attracting 365 patients. In this camp, we profiled service users to gain insight into their social-economic wellbeing and priorities in life. This will help us to be even more relevant to their needs. We saw different types of people with the majority being children, followed by women, the elderly, and the males. We note that the common illnesses are ulcers, hypertension, and Diabetes. The majority of young people and adults also informed us that they use alcohol. A few use drugs and many passed the drug screening tests. This is therefore, clear that we make our priorities in those areas.

We are grateful to the partners who supported the Treatment camp. These include: FORUT, Fast Fasthealth pharmacy, Uganda Alcohol Policy Alliance, Medlinks, Springs Pharmacy and to individuals including Kiyaga Sulaiman, Dr. and Mr. Kabeega who provided financial and material support towards this camp. We also thank Presenter Anne Sebunya for the mobilization announcements made on CBS



Other scientific studies include:
 Alcohol use and drug comorbidities
 patients receiving residential treatment
 for Substance Use Disorders in Uganda

Testimonies of former clients

How I was helped by HaB to break away from the bondage of Pethidine (Kintu Mutale)

"I was normally going about with my life until all of a sudden got involved in a nasty car accident which left me with a fractured limb amidst other serious injuries. Pethidine was prescribed to me to relieve the extreme pain that I was undergoing but little did I know that I would eventually discover from it the 'feel-good effect' that kept me going back to it and eventually resulted in an addiction.

According to my experience, the life of intoxication is very hard to manage and later on to maintain. Virtually everything in life falls wayward. It reduces a person to a destitute, a nuisance, etc. During the time of my active use, I encountered a number of challenges including loss of jobs and poor social interactions resulting into unending financial constraints and family breakups. (Its important to note how communication was a challenge)

For four years I struggled to overcome my addiction and made futile attempts including joining some rehabs in Kampala. On ... June 2021, my friends took me to HaB. At HaB I was introduced to several recovery options and I steadily regained my autonomy and drug free life. I was also supported to improve my communication skills including making direct, open and timely communication.

It is 12 months now since my admission at HaB and by God's grace still sober. My life has completely changed as I am back to my family and even engaged in meaningful employment. I have initiated several income-generating prospects and regained my responsibility as a father to support my family.

I would advise those who have not yet started not to risk and those who are already there to strive, get support and get out of that self-dug grave.

Woman:





Research and Dissemination of Evidence-Based Practices

In the said period, we commissioned a study on the causes of alcohol Use disorder. In the study, we supplement existing evidence on causes of alcohol abuse with the information collected from 72 inpatients that were attending treatment for AUD at Hope and Beyond. Protective factors against addiction are also explored towards the end of the article. This study was presented at the Uganda Mental Health Conference 26th – 28th May 2022 and at the KBS Scientific Conference in Poland between 30th May and 3rd July 2022.

Factors responsible for initiation and continuation of alcohol use among attendants of treatment for Alcohol Use Disorders in Kampala, Uganda

Introduction: About 11,000,000 people are estimated to use alcohol in Uganda of which four million are considered as high-end users and in need of treatment for Alcohol Use Disorder. This study aims at providing health service providers and policymakers with

insight into the predisposing factors of alcohol addiction so as to aid prevention and treatment programming.

Methodology: Structured interviews and Focus Group Discussions on reasons for initiation of alcohol use and on separate reasons for continuation for use were administered among 54 and 18 selected inpatients, respectively. Respondents were attending treatment for Alcohol Use Disorder between 1st January 2020 and 31st December 2021 at Hope and Beyond. Both the qualitative and quantitative surveys focused on factors for initiation of alcohol use and on separate reasons for continuation of use in spite of the associated negative consequences.

Findings: To a large extent, Peer Pressure ($f=41(76\%)$) and to a lesser extent, affordability ($f=3(6\%)$) and drinking for Leisure ($f=3(6\%)$), accounted for both initiation and continuation of alcohol use. While familial factors were less pronounced in initiation ($f=7(13\%)$) than sustained alcohol use ($f=14(26\%)$), drinking to feel better $f=27(50\%)$, and affordability $f=13(24\%)$ were the other reasons for continued use. Qualitative findings were strongly backed by the results of the Focus Group Discussions.

Conclusion/Recommendations: Peer influence and familial factors continue to play an essential role in starting and continuation of alcohol use while drinking to feel better is crucial for sustaining the habit. The role of social interactions in initiation and continuation of alcohol use should be mitigated by alcohol regulation at various levels. Prevention and treatment interventions should explore promotion of life and social skills (good friendship formation and peer resistance) while familial interventions can help to prevent early exposure and support those in recovery. Clients in recovery should be helped to identify alternative means of leisure and enjoyment to replace the pivotal role of alcohol.