

# **MEDICALLY ASSISTED THERAPY (MAT)**

---

**THE JOURNEY OF  
MEDICALLY ASSISTED  
THERAPY IN UGANDA**



With funding from PEPFAR, through CDC, Uganda's MOH in collaboration with IDI, Butabika Hospital and other stakeholders embarked on setting up a MAT treatment center at Butabika Hospital, Kampala between August 2019 to September 2020..

### PRE-IMPLEMENTATION

In August 2019, a learning visit was conducted to Tanzania, by a team with representation from Ministry of Health, Butabika National Mental Hospital, CDC- Uganda, UHRN, MAUL, Uganda Police (Anti- Narcotics Department), and IDI (Figure 1)

The experiences from the learning visit were critical in informing the consequent set-up of the program in Uganda.



**Figure 1:** MAT Partners in Tanzania and Ugandan delegation

**A MAT taskforce was formed with representation from MOH, Butabika NMH, CDC-Uganda, UNAIDS, UHRN, MAUL, Uganda Police (Anti- Narcotics Department), MJAP and IDI**

- With IDI support, a consultant was contracted to guide the set-up of the MAT program (Figure 2).
- **PWID Hotspot Mapping** was then conducted (with support from Population Council and UHRN).
- **Hot Spot Validation** conducted for size and location; GIS maps developed; 312 hotspots identified; PSE - 5818 PWIDs (2019)



**Figure 2:** MAT task force meeting with consultant

Dialogue meetings were conducted with the PWIDs to understand their perspectives regarding their drug use and further inform harm reduction program revealed key findings:

- Heroin, amphetamines, cocaine, pethidine are the common drugs
- Needle sharing is rampant



### **Findings informed PWID programming to result into the following:**

- ➔ UHRN Lobbied & received NSEP funding from the Open Society Initiative for Eastern Africa (OSIEA)
- ➔ UHRN included NSP & MAT in the Global Fund 2020/23 cycle

IDI and UHRN developed the **“Hub and Spoke”** model of MAT services delivery with Butabika as the hub and spokes at proposed health facilities within the community (e.g., Kisenyi HC IV, Kisugu HC III, and Mulago ISS clinic)

Communication & Advocacy strategy has been developed

PWIDs line-listed through UHRN



**Figure 3**

**Left:** Refurbished MAT Centre

**Right:** Methameasure equipment (automated methadone dispensing equipment)

## **INFRASTRUCTURE, EQUIPMENT AND MAT LOGISTICS FOR MAT CENTRE AT BUTABIKA HOSPITAL**

With consensus from the MAT taskforce to enhance service integration, Butabika Hospital, the Alcohol and Drugs Unit, was selected as the preferred site for the MAT centre given that it was already offering other treatment for substance use disorders.

Refurbishment of a structure on a space provided by the hospital, and procurement of methameasure, clinic supplies, furniture, methameasure (automated methadone dispensing equipment), other clinic supplies and furniture followed.

Despite the challenges, COVID 19 pandemic, the procurement of MAT drugs (Methadone & Buprenorphine) and other related supplies, led by Medical Access Uganda Limited (MAUL) was completed by June 2020.

Key documents (Advocacy strategy, MAT SOP, data capture tools) were developed to guide implementation.

## **HUMAN RESOURCE AND CAPACITY BUILDING FOR MAT**

With IDI support, critical staff (8) were recruited to support MAT services as part of the Butabika hospital Alcohol and Drug Unit (ADU) team.

### **These included:**

- Pharmacist,
- Medical officer
- Psychiatric Clinical Officer
- Clinical Psychologist.
- Nurse
- Social Worker and;
- Records Officer

From 17th - 28th August 2020, the Ministry of Health and Butabika Hospital in collaboration with IDI conducted a 10-day training of staff (Training of Trainers) on MAT services delivery (using a combination of virtual and face-to-face approaches - 42 staff (health workers, CSO staff, and program staff) trained





**Figure 4:** MAT training of staff on MAT services delivery



**Figure 5:**

**Left:** PWID community members at a MAT Community empowerment meeting.

**Right:** A counsellor conducting a MAT health education session at the UHRN DIC

## COMMUNITY ENGAGEMENT

### Led by Uganda Harm Reduction Network - UHRN

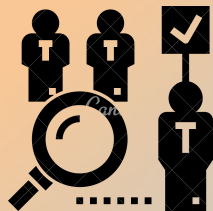
Community sensitization was done through community empowerment meetings and mobilization.

Orientation meetings for key stakeholders (health workers, police, legal aid service providers, community paralegals, PWID community representatives and some partner CSOs) were conducted to enhance collaborative support and improve providers' awareness of the MAT programme and other PWID service need

Following the training, the MAT taskforce visited to the UHRN drop in centre to review and discuss UHRN's preparation and readiness in regard to the clients' preparation for MAT initiation



**Figure 6:** MAT Taskforce Support Visit to the UHRN Drop in Centre



Screening of clients for MAT eligibility of and psychosocial preparation of eligible clients for MAT is done at the UHRN DIC.

These clients are then referred to Butabika Hospital for enrolment on MAT

## ENROLMENT OF ELIGIBLE CLIENTS ON MAT SERVICES AT BUTABIKA HOSPITAL

At Butabika Hospital, referred clients are reassessed & eligible clients initiated on MAT (since mid-September 2020)

Over 75 clients (PWUD & PWID) are enrolled on MAT to date and report to the centre for their daily refills

## MAT PROGRAM PRE-LAUNCH AT BUTABIKA HOSPITAL

In September 2020, the CDC Country Director, Dr. Lisa Nelson visited Butabika hospital in a pre-launch of the MAT program

This occasion was attended by Senior Management Teams from CDC, MOH, IDI, and UHRN



## Acknowledgements

The MAT program has been set up with support, guidance and collaboration of;

- PEPFAR/CDC
- Ministry of Health (and the MAT task force – Uganda Police, MAUL, Population Council, Uganda Police, UNAIDS, UNODC etc)
- Butabika National Referral Hospital leadership and staff.
- UHRN and the Community of People who inject drugs (PWID)



**Figure 7:** CDC Country Director and teams from CDC, MOH, IDI & UHRN on a MAT clinic tour, at the pre-launch visit at, Butabika hospital