

# SOROTI LAB

Photos: Joe Rosenbloom



*Charles Obonyo on a motorcycle provided by AIM.*

*Charles Obonyo Erongu supervises the Soroti District HIV-test labs with portable quality control equipment and the assistance of three technicians.*

**“I perform the tests from the start to the end. Then they do a demonstration for me so I can see that they have got it.”**

**—CHARLES OBONYO ERONGU**

Uganda’s emphasis in recent years has been on testing more people for HIV, and the number of medical laboratories in Uganda that are performing HIV tests has increased dramatically. But the districts labs’ standards have not always kept pace. When AIM was launched, district laboratories featured few qualified staff, and most laboratories at health centers III and IV were run down with poorly maintained equipment and no regular supply systems.

A decade ago, for example, only one lab in the Soroti district of eastern Uganda had the capacity to test for the presence of the AIDS virus using rapid serological tests. Today, 48 labs in Soroti district offer the test, 10 located in healthcare centers, and the remaining 38 operated as mobile facilities.

The accessibility of test sites to rural residents is critical to the HIV-test strategy in Soroti. As in most of Uganda, the district’s population of 400,000 consists predominantly of subsistence farmers who live in remote villages and lack transportation except on foot or, at best, by bicycle.

Charles Obonyo Erongu, the principal laboratory technologist at the Soroti Referral Hospital, supervises and monitors the workings of the district’s HIV-test labs in addition to a host of other laboratory tests. His home base is a tidy lab inside the hospital’s sprawling complex of white-stucco buildings and orange-tiled roofs. Erongu spends much of his time at the hospital, supervising its laboratory staff.



*The laboratory at the Soroti Hospital where Charles Obonyo Erongu works has been remodeled and provided with basic equipment by AIM.*

But several days a month he and three other technicians are on the road, visiting the district's scattered labs to evaluate their operations and promote their proficiency. Soroti Hospital laboratory, like some other labs in the country, was a recipient of the AIM laboratory capacity strengthening package. With the African Medical and Research Foundation, Erongu received training materials and refresher training on rapid HIV testing. He also benefited from regular monitoring and supportive supervision training. Today, with a new motorcycle and portable quality-control equipment funded by AIM, Erongu goes on his rounds to the peripheral district's labs.

A lab's analysis of a blood sample for HIV, which once involved a single Elisa test, now requires three, the latter two for cross-checking the initial screening. When Erongu visits a lab, he scrutinizes how well its technicians are conducting the three tests. "When I find deficiencies,

I demonstrate how a test should be done," he says. "I perform the tests from start to end. Then they do a demonstration for me so I can see that they've got it."

As a result of the introduction of the multiple-test safeguard and the quality-control initiatives, the accuracy of the district labs' HIV testing proficiency has risen to nearly 100 percent, according to Erongu. "Before, we had a problem with supervision," he says. "But the lab-improvement program has had a very positive impact."

Erongu says the new, spacious laboratory facility, which was remodeled with AIM's support and furnished with up-to-date diagnostic equipment, is a hugely important asset. The result, he says, has been an increase in the number of functional laboratories, improved teamwork between clinicians and laboratory staff, and a higher utilization of laboratory services. ■