

Implants do not protect women from HIV, health ministry clarifies

By Annabel Oyera

The Ministry of Health has expressed concern at a growing misconception among Ugandan women and girls that contraceptive implants protect them from HIV and other sexually transmitted infections (STIs).

The concern was raised by Dr Richard Mugahi, the commissioner for reproductive and child health at the ministry, during a community health extension workers (CHEWs) pilot project dissemination meeting at Hotel Africana in Kampala on Tuesday.

"We must keep reminding people that an implant does not prevent HIV or STIs. It only prevents pregnancy. We do not want to reduce pregnancies and at the same time increase HIV infections. That would be catastrophic," Dr Mugahi said.

He said the fear of pregnancy among girls, especially those who are not in stable relationships, has misled some to believe that long-term contraceptives provide full protection against STIs.

Dr Mugahi appealed to health workers to amplify the clarification clearly in policy briefs, community messaging and counselling by CHEWs to avoid creating a new public health pandemic.

The warning comes as Uganda rapidly expands community-based family planning services through CHEWs. According to ministry data, 20,363 community health workers, including CHEWs and village health teams, have been digitised under the national community health programme, with another 20,000 expected to be enrolled by March.

Under the CHEWs pilot project, the ministry recently provided community-level family planning implants for girls and women in Kyotera, Namutumba and Lira districts.

The director general of health services at the Ministry of Health, Dr Charles Olaro, who was the chief guest, said the CHEWs programme has the potential to significantly reduce unmet need for family planning services across the country.



Dr Charles Olaro

He added that if the planned 21,000 extension workers under CHEWs were fully trained, Uganda could achieve over one million implant insertions annually at the community level, providing girls with long-term protection against unintended pregnancies.

However, he cautioned that family planning remains a sensitive intervention that requires strict adherence to quality standards.

"Any small error in family planning

can be magnified. That is why we must maintain quality, proper supervision and continuous training," he said.

The ministry plans to equip facilities with implant removal kits and train health workers to ensure safe referral and service continuity.

"Fear of removal can undermine a very good programme. Women must know that when they want the implant removed, the service is available," Dr Olaro said.

Dr Mugahi framed family planning as a broad development issue, emphasising its impact on poverty reduction, education and household stability.

"Family planning helps couples plan better, educate their children and improve their overall wellbeing," Dr Mugahi said.

Miriam Nancy Alech, a CHEW attached to Anyangatir Health Centre III in Lira city, said most women accessing services are aged 24 to 40, with many choosing the three-year implant.

However, she cited low male

involvement, persistent myths and long distances as key challenges.

The CHEWs programme is implemented in partnership with Makerere University School of Public Health and Programme for Appropriate Technology in Health.

Health officials say strengthening parish- and village-level family planning services is critical as Uganda works toward achieving a 50% modern contraceptive uptake by 2030.

ABOUT CHEWS

The Ministry of Health formally began conceptualising and developing policy for the CHEWs project in 2017, following a national assessment that deemed the previous volunteer-based village health team strategy unsustainable.

While the policy was finalised in 2019, active piloting and deployment of the first batches began accelerating in 2024 and 2025 in various districts. More than 20,000 have been deployed and many have received bicycles, uniforms and training.