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Leading HIV Provider Organizations Express Concern about HIV Stigma and Human Rights for a Nurse Imprisoned in Uganda

We, as organizations made up of health care professionals caring for people living with HIV, recognize that human rights are universal and are a key contributing factor to quality health outcomes and health equity for individuals and populations. We are deeply concerned about the serious human rights violations of an HIV positive nurse in Uganda and the subsequent outcome that this event is having not only on her life, but may have on the global fight against HIV/AIDS. We support our colleague Rosemary Namubiru, 64, a nurse with 35 years of experience, charged in Uganda with a series of criminal offenses as a result of a workplace needlestick accident.

On January 7, 2014, while working at the Victoria Medical Centre in Kampala, Uganda, Ms. Namubiru was attempting to give an injection to an ill 2-year-old patient. With the child struggling, the needle accidentally pricked the nurse's finger; she stopped what she was doing, washed and bandaged her pricked finger, and returned to the child and administered the injection. Investigation into the incident revealed that Namubiru is HIV positive and on anti-HIV medications. She was subsequently arrested in front of assembled media , thrown in jail and charged with attempted murder. The child has been tested, and is not HIV positive¹. Charges were later downgraded, but Namubiru remains in prison. In addition to the unwarranted charges, her rights to appropriate representation, confidentiality and the presumption of innocence have been violated in a very public and damaging way. A firestorm of inflammatory and sensational news media has vilified Ms. Namubiru and by extension, any HIV positive healthcare worker and all people living with HIV.

Needlestick accidents occur on a regular basis in clinical settings; the World Health Organization estimates that at least 2 million occur annually around the world². According to the Centers for Disease Control and Prevention (CDC), 99.7% of needlestick exposures to HIV-contaminated blood do not lead to infection³ and the rate may be even better when the HIV-infected person is on HIV medication. Approximately 2 people among 25 in Uganda are living with HIV⁴, including health care workers such as nurses and physicians. While procedures and equipment must be improved to better prevent needlestick accidents, singling out and unfairly punishing individual nurses or other clinicians does not constitute an improvement and does not advance patient safety or the public health at large. Arresting and imprisoning Ms. Namubiru for an accident that unfortunately regularly occurs in clinical settings actually enhances stigma and represents a significant setback in the fight for universal human rights and against HIV/AIDS.

Our concerns are for Rosemary Namubiru as an individual and a colleague, and we stand in solidarity with her. We also fear that this case could set a dangerous precedent, in terms of both the criminalization of HIV exposure and the treatment of people living with HIV and AIDS. Human rights violations and abuses directed toward HIV positive people and subsequent stigma and discrimination are fueling the epidemic and are some of the principal barriers to achieving an AIDS free world. Separate laws or workplace policies for people living with HIV are unjust and unwarranted. Fear of disclosure and recriminations will keep people from getting tested for HIV and, subsequently, from accessing the effective treatments that will save their lives and prevent them from transmitting to others.