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BY YAHUDUKITUNZI

Once promoted as safe spaces for relaxation, detoxification and wellness, saunas and steam rooms across Uganda are increasingly drawing concern from public health experts, who warn that some of these facilities have quietly become hotspots for HIV and other sexually transmitted infections (STIs).

Investigations and testimonies from health workers, users and local authorities indicate that in a number of poorly regulated saunas, people who do not know each other meet and engage in close physical contact.

In some cases, this interaction reportedly escalates into sexual encounters within the steam rooms themselves or in nearby bathrooms—often without protection and outside any form of health oversight. Medical experts caution that such environments, characterised by anonymity, limited supervision and high humidity, create conditions that can accelerate the spread of infections, posing risks not only to individuals involved but also to the wider community.

Mr Robert Wandwasi, the HIV coordinator for Mbale District, raises concern over saunas and steam baths, describing them as emerging hotspots for HIV infections in the country. "In saunas, there is no distinction between someone's wife or husband. People go there to relax, but some end up developing relationships and engaging in sex without protection." He noted that the biggest worry is young girls who frequent these places in search of wealthy men. "This cross-generational sex is one of the major drivers of new HIV infections among adults and young people."

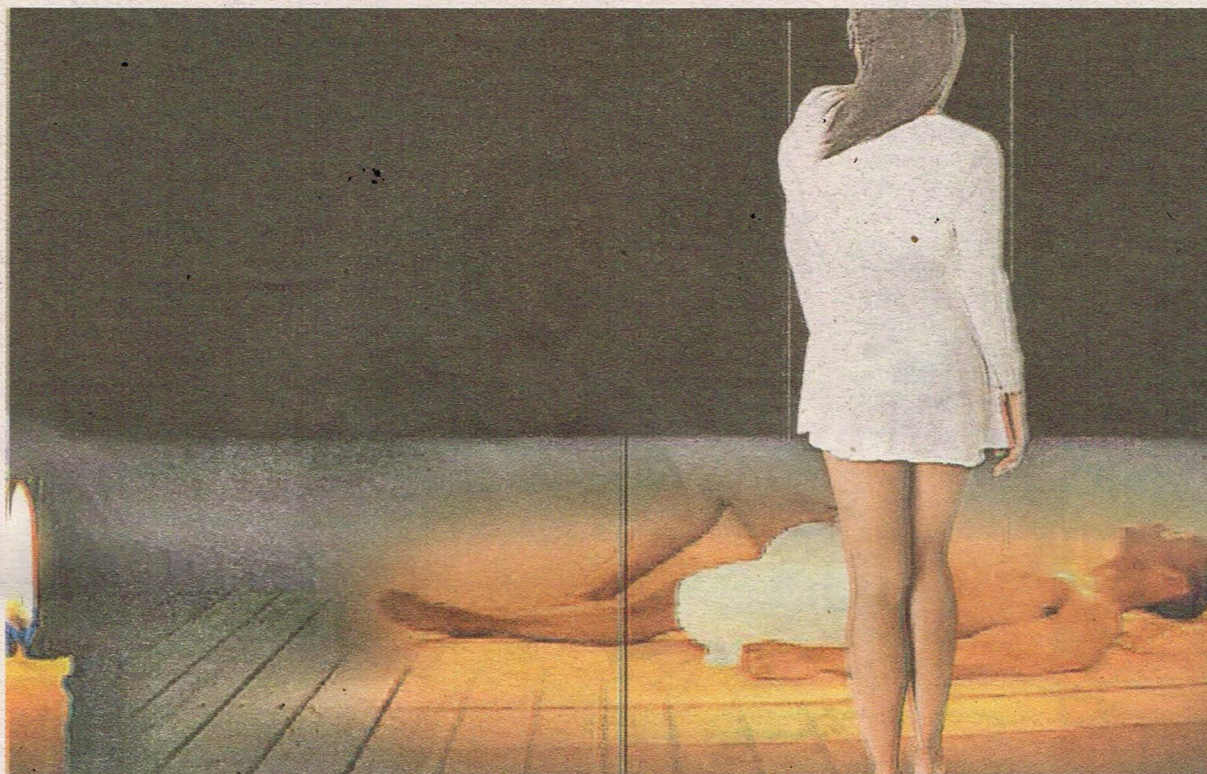
According to records from Uganda Aids Commission (UAC), HIV prevalence in Uganda varies significantly across cities. Fort Portal City records the highest rate at 14 percent, followed by Soroti City at 12 percent. Several urban centres, including Mbarara, Masaka, and Gulu, each stand at 10 percent, while Lira reports 9.0 percent. Hoima City shows a prevalence of 8.0 percent, Jinja City 7.0 percent, Mbale City 5.0 percent, and Arua City the lowest among the listed cities at 4.0 percent.

HIV prevalence rates

Across Uganda's sub-regions, HIV prevalence shows notable variation. In Acholi, the prevalence stands at 7.0 percent, with 1,950 new infections and approximately 86,800 people living with HIV. South Buganda records the highest prevalence at 7.5 percent, with 6,660 new infections and 324,600 people living with HIV.

Lango reports a prevalence of 5.8 percent, with 2,080 new infections and 96,200 people living with HIV, while North Buganda also stands at 5.8 percent, with 4,100 new infections and 187,300 people living with HIV. Kampala registers 5.6 percent, with 1,840 new

Fears grow as saunas turn into hotspots for HIV, STIs



Sources familiar with these environments describe scenarios where strangers engage in body scrubbing and prolonged physical contact, which in certain cases escalates into sexual activity. PHOTO/FILE

infections and 73,600 people living with HIV. Ankole shows a prevalence of 6.3 percent, with 2,800 new infections and 141,600 people living with HIV.

Other regions report slightly lower rates. Tooro stands at 4.9 percent, with 2,300 new infections and 110,700 people living with HIV, while Kigezi also records 4.9 percent, with 940 new infections and 49,200 people living with HIV.

Bunyoro follows closely at 4.7 percent, with 2,180 new infections and 90,400 people living with HIV. Bukedi and Elgon both stand at 3.0 percent, with 1,040 and 1,180 new infections respectively, and populations of 47,000 and 43,900 people living with HIV.

Teso records 3.3 percent, with 1,110 new infections and 52,600 people living with HIV, while Busoga stands at 3.2 percent, with 2,270 new infections and 91,800 people living with HIV.

The regions with the lowest prevalence include: West Nile, which records 2.3 percent, with 1,160 new infections and 49,200 people living with HIV, and Karamoja, which has the lowest rate at 1.4 percent, with 290 new infections and 11,600 people living with HIV.

"Any setting that enables anonymous sexual contact without safeguards becomes a public-health concern," says Ms Stella Ainembabazi, a sexual and reproductive health specialist. "Saunas were never designed for this purpose, yet the lack of regulation has allowed some to evolve into risky spaces."

She said the concern is compounded by the fact that people who meet in saunas often have no prior relationship, making discussions about health status or protection unlikely. As a result, infections acquired in these settings are difficult to trace, undermining public health surveillance and prevention efforts.

Health risks galore

Uganda continues to grapple with HIV and STI transmission, particularly in urban centres and high-risk social spaces. While attention has traditionally focused

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on bars, lodges and fishing communities, health experts now warn that saunas and steam rooms are emerging as overlooked transmission points.

The health experts said saunas and steam rooms have multiplied rapidly in cities such as Kampala, Jinja, and Mbarara, among others, driven by a growing wellness industry and demand for affordable relaxation spaces.

While many operate professionally, attached to gyms, hotels and health clubs, investigations reveal that some facilities operate with minimal oversight. Sources familiar with these environments describe scenarios where strangers engage in body scrubbing and prolonged physical contact, which in certain cases escalates into sexual activity.

The physical design of steam rooms—low lighting, dense steam and shared seating—reduces visibility and accountability. Once inside, clients are largely unsupervised, creating opportunities for misuse.

"Steam rooms create a sense of anonymity," explains a Kampala-based public health practitioner. "People feel unseen, which lowers inhibitions and increases risky decision-making."

While HIV and STIs are the most alarming risks, medical professionals warn that the dangers extend further. Saunas

are high-humidity environments that can facilitate the spread of fungal infections, skin diseases and respiratory conditions, particularly when hygiene standards are poor.

Dr Peter Wakooba, who heads Monitoring and Evaluation at UAC, said massage parlours have joined places such as landing sites and truck parking areas on the list of HIV hotspots.

Dr Stephen Watiti, a renowned HIV activist, concurs, noting that some end up engaging in casual relationships and sexual activity at massage parlours.

"A hug becomes something else, a scrub turns into something else," Dr Watiti observed.

Dr Muhamed Mulongo, a public health specialist, noted that the risk in saunas is particularly high because of the nature of the environment. People are often naked, exposing themselves to individuals who are not their partners, and many visit saunas late at night.

Change of tack?

Some experts also propose integrating saunas into HIV and STI prevention strategies, particularly in urban areas where anonymous encounters are more common.

"We must also embrace new HIV prevention technologies. These include Pre-Exposure Prophylaxis (PrEP) to prevent infection before exposure, Post-Exposure Prophylaxis (PEP) for emergencies after possible exposure, and HIV self-testing kits that empower individuals to know their status privately. Alongside these, male and female condoms remain one of the most effective and accessible tools," Ms Flavia Kyomukama, the Executive Director of the National Forum of People Living with HIV/Aids Networks in Uganda (NAFOPHANU), said.

She said practical protection means avoiding risky sexual practices such as unprotected "live sex," stocking condoms in public places like schools, health centres, bars, and saunas, and encouraging regular HIV testing with open conversa-

tions about sexual health.

"Together, through education, innovation, and responsibility, we can reduce new infections and build a healthier, safer Uganda," she added.

Experts highlighted that in neighbouring countries such as Kenya, the government has introduced measures to regulate wellness centres.

These include enforcing mandatory condom availability and conducting regular health inspections. While Kenya's overall HIV prevalence is around 4.3 percent, urban areas continue to face challenges in managing transmission risks.

In South Africa, saunas and massage parlours have been linked to informal sex work, which has worsened infection rates. To address this, the government has expanded access to HIV testing and treatment in high-risk areas.

Uganda, it is believed, can learn from countries such as Kenya and Thailand, where governments have enforced stricter regulations on wellness centres, ensured condom accessibility, and implemented public health campaigns to educate both patrons and workers about the risks of unprotected sex.

Mr Patrick Ahumuza, a retired sauna operator, warned that unsanitary saunas can easily transmit infections through shared surfaces and direct skin contact.

"When people share benches, towels or engage in close physical contact, infections such as scabies, fungal rashes and bacterial skin diseases can spread easily," he explains.

Challenges

As Uganda's wellness industry continues to expand, authorities face a critical test: whether to proactively regulate these spaces or allow them to operate unchecked. For now, behind the rising steam and promises of relaxation, a hidden health risk continues to grow—one that demands attention before it becomes a full-blown public-health crisis.

Ms Agnes Awori, a health counsellor, noted that one of the most troubling aspects of this trend is silence. Individuals who contract infections in saunas are often reluctant to disclose the setting due to shame or fear of stigma. This silence makes it difficult for health authorities to identify patterns or intervene effectively.

Saunas and steam rooms are licensed under general business or hospitality frameworks, with no specific national standards governing their operation. Inspections are often irregular, and what happens inside steam rooms remains largely invisible to authorities.

A city health inspector in eastern Uganda, who requested anonymity, admitted the challenge: "We inspect for cleanliness, but behaviour inside steam rooms is hard to monitor unless there is a complaint. There are no clear guidelines specific to saunas."

This gap allows some operators to ignore inappropriate behaviour, prioritising profits over safety. Not all sauna operators, however, accept that their facilities are part of the problem. Several insist they run legitimate wellness centres and blame a few rogue operators for tarnishing the industry's image.

"A sauna is meant for health, not sexual activity," said a gym owner in Kampala. "We have clear rules and staff oversight."