



2016

## Assessment of Community Health Needs

Every third quarter of the year, ARH takes on what is considered by the organization to be a major health needs assessment for the communities being served by the organization. The assessment is done to determine the most urgent need and to make plans to address the issue. In 2014, among other services that were offered that year to Nyabushenyi Health Center II, the organization conducted an assessment which indicated a need for electricity and a counselor to better improve maternal services in the community. Some fund-raising was done, and in 2015 the organization successfully hired a counselor and lit the center with a solar panel.

After consultations with community members, it was agreed that the next project should be a laboratory and a motorcycle ambulance. In response, the year 2016 was mainly dedicated to finding partners, fund-raising for the laboratory and searching for a laboratory technician. However, a series of other activities took place.

Activities the organization undertook:

- Evaluation of the ongoing work
- Meetings with prospective partners
- Working with Ministry of Health to organize a national fistula conference
- Donation of single solar lights for primary seven girls
- Fund-raising walk for a laboratory in Nyabushenyi
- Maternal health cluster meetings at MOH
- Educational activities including talks, discussions, and a play on male involvement performed by ARH artists and community members
- Radio talk show on the role of a husband/ partner, District health office, ARH and community in improving maternal and child health

### Evaluation of Ongoing Work

The evaluation uncovered more women now coming to the center for antenatal and delivery services than previous years. Men are also now more involved and come with their wives for deliveries, although they remain inconsistent in escorting them for the antenatal visits. Concern arose due to the low number of mothers returning for post-natal services given the increase in deliveries.

The solar lighting system and the equipment donated to the center were still working well. Having a counselor in the center has also benefited the mothers who come with psycho-social issues rather than physical issues.

Members of ARH in the medical profession joined the midwife of Nyabushenyi Health Center II in health educating and providing antenatal care to the mothers. They also investigated the service provision from the mothers' perspective and what they wanted to see in place that would help them be better served.

Mothers had positive things to say about the midwife and counselor but complained about water and road structure being a hindrance to better services. They had a concern because they believe the midwife is alone and overwhelmed. They were also looking forward to the laboratory services.

## **Re-organizing and Building ARH Base**

To make the organization more effective, a series of meetings took place among the leadership and the board members. Part of the agreement was to recruit more staffs and bring in volunteers, and as a result, the three staff and two volunteers were recruited. A process to bring in peace corps to volunteer was also put in place.

## **National Fistula Conference**

Fistula is one of the most devastating disabilities resulting from childbirth and not only affects the mother but the entire family. It is one of the conditions everyone involved in maternal health wants eradicated. To end it, the Ministry of Health, working with other organizations in maternal and child health business came together to organize a conference geared toward creating awareness and advocating for fistula prevention. ARH was one of the biggest participants and contributors to the event. The conference was important to ARH because our focus is mainly on reducing maternal mortality and morbidity of which fistula is a part.

## **Meetings**

ARH staff are continuing to hold meetings at the Ministry of Health every end of the month where members engage in evaluating maternal health conditions, share research, learn from each other and discuss ways to improve services. ARH members have also been meeting with potential partners and continue the dialogue with them and others to discuss how to work together to improve maternal health conditions. Those met with include Ministry of Health members such as Ms. Doreen Tukashaba in the reproductive health department, Dr. Paul Kagwa, in communication and Prof. Anthony Mbonye, among others.

Among the politicians met were The Prime Minister of the Republic of Uganda, Dr. Ruhakana Rugunda, the Ntungomo Women representative in the parliament, Mrs. Beatrice Rwakimari, Member of Parliament for Kajara, Mr. Tindimuzigu, Ntungamo District Administrators, Ntungamo Mayor and other local leaders. ARH members also met some of the religious members like the Bishop of South Ankole Diocese and other church leaders from different denominations.

The organizations met were Uganda Health Marketing Group (UHMG), Uganda Performing Art Foundation, BESO Foundation, WalkAid Foundation, Finn Church Aid, and ACODEV, among others.

## **Promoting and Creating Awareness on Male Involvement in Maternal Health**

Radio talk shows were held by the ARH Executive Director, Assistant District Health Officer and Chief Administrative Officer to promote health and create awareness of male involvement. Part of the

discussion was about domestic violence awareness. Flyers were distributed to educate communities about what women can expect when pregnant, and men's role in promoting maternal health and communication. Discussions were held and a play staged under the direction of ARH artists and performed by the community members themselves.

## **Promoting Education for Girl Child**

To avoid teenage pregnancy, ARH has taken on empowering the youth about sexual and reproductive health, focusing on girls staying in school, so they are not married off at a young age. Part of what causes girls to drop out of school is a failure to get good grades, due to the chores that these girls do after school. By the time their chores are complete, it's too dark and they have difficulty reading.

To support these girls, ARH donated single solar lights to help them read after dark. Forty-one lights were donated to select kids from different schools. Ten girls and one boy were chosen from Rwentanga Primary School to receive the lights. The other children were from different schools and were selected by the Ntungamo education office.

## **Laboratory Fund-raising Event**

The fund-raising event included a walk and a conversation with the local and District leadership to plan how to move ahead with the constructions.

Overall, the community members from Nyabushenyi and some members in the district leadership contributed the equivalent of US \$79. Brig. Richard Karemire, the spokesperson for UPDF, and his wife provided gas for transportation of ARH members to the walk in Ntungamo. J.B. and Rukundo Kauzya contributed US \$300 to buy water and snacks for the children who participated in the walk and the group which staged a play on male involvement awareness. Mr. Kabanda Obed contributed the equivalent of US \$85 and Rotary Club of Woodbridge/Perth Amboy contributed \$500. A total of the equivalent of US \$664 was donated.

In addition to the contributions noted above, Prime Minister Hon. Ruhakana Rugunda, Hon. Timuzigu, the member of parliament for Kajara where Nyabushenyi Health Center is located, and Dr. John Tumwesigye all pledged their financial support for this new laboratory.

During the conversation, issues of water and road improvement were emphasized. While ARH does not focus on these issues, adequate health care services cannot be met without water and improved roads. Therefore, ARH seeks partnerships with other sectors offering services that make the organization's activities possible.

ARH is currently seeking \$5,000 to furnish a temporary room in the maternity ward which will provide laboratory services.

## **Way Forward**

The Organization will:

- Continue fund-raising and lobbying the government for the laboratory until it is in place
- Continue to support, educate, and encourage mothers to attend post-natal clinic and to utilize family planning services

- Continue lobbying the government for water as well as road and transport services for the area
- Continue lobbying for another midwife