



IDEAS For Uganda: Medical Clinic Proposal

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Project Introduction:

Malnutrition, maternal mortality and child mortality is increasing tremendously in Uganda. By the end of 2017 Uganda Medical Monitoring Reports says, successful childbirth in the district are only at 55%, slightly below the national rate of 56%. Most mothers and infants are at risk because the distance to the hospital is long, blood or medicine is not available, inadequate staffing, delay in seeking medical care, refusal of treatment associated to witchcraft beliefs, lack of medical equipment in hospitals, trusting in traditional healers.

In 2018, a partnership between Mase Medical Foundation and IDEAS For Us formed to support a mobile clinic that created a high demand for attention and proved to be an effective health service delivery strategy. In response to the above health challenges and many others, IDEAS For Uganda and the Mase Medical Foundation plan to organize one mobile clinic per month in Eastern and Western Uganda, benefiting between 500-1000 people per clinic. Funding for this Mobile Clinic will benefit a range of Ugandans with health care treatments and health education. In order to see a rise in activity and economic development, Uganda needs a healthy population. As of now, many villagers do not actively seek out modern, advanced health care for a multitude of reasons. A mobile clinic run by IDEAS For Uganda would eliminate issues arising from transportation and lack of awareness. This project will be run for five(5) years, and for every month, one outreach(4 days) will be organized..

Measurable Objectives:

- Malnutrition accounts for about 35% of deaths among children under five years old. We'd like to see this number reduced in direct relation to the Mobile Clinics actions.



- In Uganda, iron-deficiency anaemia affects three-quarters of children, aged 59 months to six years, and a half of women who are of reproductive age. Thus, we'd like to prescribe and distribute iron to at least 750 patients in need, each month.
- To reduce the maternal mortality rate, we plan to seek out pregnant women in the areas, the mobile clinic stop; administer a check up and prenatal vitamins, along with education and assurance from medical staff about the safety of delivering at the hospital.
- Mobilize local community members to appreciate the necessity of embracing modern medical services in two districts of Western and Eastern Uganda. We hope to see the number of patients rise in response over time.
- Every four months, we hope to identify between 500 to 1000 malnourished children in every region and enroll them for further specialized health service provision.
- Based on our research we estimate around 50 expectant mothers in every district will be unable to deliver at a hospital. So the clinic will provide outreach service and offer transportation to hospitals for specialized maternal treatment.
- For every clinic, specialized flyers will be passed out to over 500 locals by a professional health worker about primary health care
- During every clinic, we shall treat and refer for specialized treatment at least 500 patients from hard to reach communities

Budget Breakdown

Item description	Quantity	Unit cost in USD	Total Cost in USD
Ambulance/Van	1	16,750	16,750
Reception Equipment			
Reception Tents	4	150	600
Reception Chairs	200	7	1,400
Patient Examination Tent	4	50	200
Generator	1	695	695
Gas Cans	2	15	30
Mobile Electronic Records System	4	220	880
Hygienic Supplies			
Waste Bins	6	40	240
Bio-Waste Bins	4	30	120
Hand Washing Station & Supplies	4	400	1,600
Examination Gloves (100 count box)	Lumpsom	9	4000
Medical Equipment			
Weighing Scales	4	40	160
Infant Weighing Scales	4	30	120
Blood Pressure Machine (manual)	6	18	108
Blood Pressure Machine (digital)	4	25	100
Infant Blood Pressure Monitor	4	50	200
Emergency Trolley	2	550	1,100
Basic Medicine Trolley	4	170	680
Fetoscope	4	6	24
Oxygen Cylinder	2	560	1,120

Laboratory Supplies (i.e rapid antimalarial testing kits, hepatitis testing kits, syphilis testing kits, mobile microscope, centrifuge)	Lumpsom		
Haemoglobin Digital Machine	2	300	600
Glucometer	2	25	50
Human Medicine (Per Outreach-5 Years)			
Antibiotics	60	811	48,660
Analgesics	60	405	24,300
Antimalarials	60	946	56,760
Antihypertensive	60	550	33,000
Intravenous Drugs	60	270	16,200
Antidiabetics	60	270	16,200
Intravenous drugs	60	837	50,220
Miscellaneous			
Office Supplies	Lumpsom		200
Digital Camera	1	750	750
Projector	1	840	840
Fuel for 60 outreaches	60	172	10,320
Staff(per 1 day in an outreach-5 Years)			
Driver (1)	240	23	5,520
Doctors (2)	240	86	20,640
Nurses (6)	240	174	41,760
Midwives (2)	240	58	13,920
Laboratory Technician (2)	240	58	13,920
Medical Clinic Officer (2)	240	69	16,560
Health Educator (2)	240	58	13,920
Records Attendant (2)	240	58	13,920
Reporting(Narrative and Financial)-Quarterly	15	143	2,145
Total budget			\$426,532

Desired Outcomes

- Increased activeness by local people in disease prevention that will finally result into more healthy people in a sustainable way, in the targeted districts.
- Tremendous reduction of child and maternal mortality in Western and Eastern Uganda, and especially in the targeted districts, evidenced in the annual Government medical monitoring reports
- Decreased levels of malnutrition in the targeted districts as per government annual reports that will finally lead to increased active school going children.
- Increased number of people especially Women accessing modern health services from specialized medical workers in Western and Eastern Uganda. This will finally reduce disease persistence in the targeted communities

Sources

<https://doi-org.ezproxy.net.ucf.edu/10.1186/s12887-018-1226-4>
<https://doi-org.ezproxy.net.ucf.edu/10.1186/s12884-017-1289-5>
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