



OFFICE OF THE PRIME MINISTER
DEPARTMENT OF REFUGEES
Partner's Mapping and Achievement Updates
January to September 2016

PARTNER'S NAME: Real Medicine Foundation

Name of Region: Kiryandongo Refugee Settlement **District:** Kiryandongo

Total Population per Settlement: Refugees 67,245 *(as of 1st Nov 2016)* and Host Community 20,173 *(30% of the refugee population)*

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Short Introduction (about partner):

Real Medicine Foundation is a humanitarian organization that supports people living in disaster and poverty-stricken areas, focusing on the person as a whole by providing medical/physical, emotional, economic, and social support. RMF aligns with local governments, partnering with and empowering local populations to create long-term solutions that are self-sustainable. RMF's initiatives are based on its ethic of "Friends Helping Friends Helping Friends," treating every person with dignity and respect.

In July 2014, RMF signed a tripartite agreement with the UNHCR and the Government of Uganda to implement a health project aimed at addressing emergency operations and care of refugees and asylum seekers in Kiryandongo Refugee Settlement through the delivery of quality healthcare services.

As UNHCR's Health Implementing Partner in Kiryandongo Refugee Settlement, RMF continues to implement comprehensive health programs through the established health centers, namely Panyadoli Health Centre III, Panyadoli Hills Health Centre II, the Reception Centre Clinic, and Nyakadot Health Centre II. These are enhanced by outreach programs for communities with limited access to the existing health units or located over 5 km from the

health facility as per the Ministry of Health access standard.

Sector Component(s) the Partner Implements:

Achievement of Results (List the major results below, and add more rows if necessary.)	Planned	Actual	Name(s) of Refugee Zones	Name(s) of Refugee Settlement
<p>1. Contributes to improvement of the health status of the population through delivery of quality healthcare services:</p> <p>1.1 Providing/supporting access to primary health care</p>	<p>45 health workers recruited</p>	<p>63 contracted staff form our dedicated implementation team</p>	<p>Panyadoli Health Centre III Panyadoli Hills Health Centre II Nyakadot Health Centre II Reception Centre Clinic</p>	<p>Kiryandongo Refugee Settlement</p>
<p>1.2 Providing community based preventive services</p>	<p>144 integrated outreaches 30 VHTs supported 100% VHTs trained on disease surveillance and outbreak</p>	<p>54 integrated outreaches held 44 VHTs supported 100% VHTs trained on cholera activity facilitated by UNHCR</p>		
<p>1.3 Delivering health services to children under 5</p>	<p>100% children under 5 years access health services</p>	<p>19,834 children have accessed health services at both outreach posts and</p>		

		facilities		
1.4 Establishing referral mechanisms	150 patients and/or caretakers supported 2 referral nurses provided top-up allowance for 12 months each 120 patients supported for specialized investigations, CT scan, x-rays, ultrasound scans, endoscopy	403 patients/caretakers supported 2 focal nurses paid top-up allowance 194 patients supported with x-ray services		
1.5 Providing access to essential drugs	80 patients supported with supplementary medicines 100% of all supplies procured	104 patients supported with supplementary medicines 90% of required supplies procured		
1.6 Improving quality of laboratory services	100% laboratory reagents and supplies 1 gas cylinder 4 times gas cylinder refilled in a year	Procured HemoCue cuvettes, RPR strips, automatic pipettes, gas slides, and Bunsen burner 2 gas cylinders procured in the previous quarter and refilled		
2. Persons of concern have	12,614 women of child	10,446 women of child		

<p>access to comprehensive reproductive health and HIV/AIDS services:</p>	<p>bearing age targeted for reproductive health services</p>	<p>bearing age accessed reproductive services in the reporting period 50,458 community members will be reached with HIV/AIDS messages</p>		
<p>2.1 Supporting safe motherhood services</p>	<p>60 children followed up and necessary support provided 4 dialogues carried out</p>	<p>21 babies followed up and accorded appropriate support No community dialogues on safe motherhood were conducted</p>		
<p>2.2 Providing preventive reproductive health and HIV services</p>	<p>2 post-test clubs supported 60% of World Aids Day activities supported 100% of all supplies procured 300 clients traced</p>	<p>1 post-test club supported with uniforms Planned for the 1st of December All relevant test kits and buffers procured 122 clients traced through telephone calls and home visits</p>		
<p>2.3 Providing care and treatment for persons of concern living with HIV and AIDS</p>	<p>127 (only refugees) persons of concern will benefit from ART services 30 clients 144 outreaches</p>	<p>2,546 clients enrolled in ART since the program began 234 persons of concern receiving HIV care</p>		

		81 outreaches held		
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Brief Description of Achievements:

Healthcare services were in critical condition when Real Medicine Foundation signed the tripartite agreement with the UNHCR and the Office of the Prime Minister, since this was a time when the influx of South Sudanese refugees was still at the climax. Challenges ranging from inadequate staffing, shortage of drugs, a poor referral system characterized by both lack of an ambulance and community structures, poor infrastructure, low demand for health services by the population, and the absence of a coherent disease surveillance strategy. Additional support from RMF assisted in addressing these highlighted gaps.

Generally, the healthcare service indicators were far below standard. Hence, in alignment with the three objectives as implemented by RMF, all of the indicators have either been improved or maintained. However, with the ever-increasing population, it is evident that pressure is being exerted on existing health services. In order to sustain results, RMF continues to conduct needs assessments to ascertain the arising needs in order to inform its planning and continue effective improvement of health service delivery.

Persistent Challenges and Possible Recommendations:

1. **Timely access to health care:** Time spent waiting, waiting between identifying a need for specific tests and treatments and actually receiving the expected services is long due to the high population. Actual and perceived difficulties or delays decrease patient satisfaction and increase the number of patients who leave before being seen. ***Address the laboratory capacity to diagnose a wide range of diseases.***

2. **Cultural influences:** These account for the high percentage of teenagers who begin childbearing early among the persons of concern. The health of the mother is closely linked to the health and survival of the child. In addition, the socioeconomic level of the mother and the maternal health status (HIV/AIDS, malaria, nutrition) has an impact on the survival of the child. ***Design strategy of intervention and delivery of services across the continuum of care. Need to integrate youth-friendly services in the health facilities and advocate for behavior change.***

3. **Inadequate capacity of health facilities:** In terms of available space in the wards, laboratory waiting area, antenatal, and EPI departments. ***Expand the wards and expand the waiting areas of the EPI department, standardize the laboratory working area to meet recommended biosafety standards, and expand the antenatal health education and waiting areas to cater to the high number of patients.***

4. **Stock-out of drugs:** Due to an ever-increasing number of patients, stocked drugs easily run out. ***There is need to procure higher amounts than***

the usual stock of drugs.

Lessons Learned (if any):

While the estimated number of refugees is currently known to be 67,245, it is challenging to estimate the additional 30% of our target population that comes from the host community, especially regarding their access to health care at the health facilities. As a result, this especially impacts the stock of drugs, leading to drug stock-outs. Continuous needs assessment is important to ascertain the arising needs in order to inform planning for improved health service delivery.

New Ideas:

- i. Organize mobile clinics/outreaches to reduce congestion at the health center.
- ii. Introduce internal and external quality control/assurance of malaria investigations with cross examination to ascertain the quality of malaria results.

Comments from OPM Settlement Commandant (done after partners submission)

Comments from OPM RDO (done after partners submission)