MIFUMI and Faculty of Medicine/COBES Collaboration - 10/26/07 draft4

OBJECTIVES

The Mifumi-COBES collaboration provides a research opportunity to measure the effectiveness of MedlinePlus African tutorials in Mifumi village (27 km from Tororo) through dialog with the community and use of several media. In the process, the collaboration can: strengthen the health services and early research initiatives of Mifumi Project in their efforts to combat domestic violence and poverty; and expand reach of COBES Program by onsite training of medical students in Mifumi.

This collaboration is a pilot for potential involvement of COBES with Mifumi Project's network of 20 organizations in 5 districts in Eastern Uganda.

PARTNERS

Faculty of Medicine, Makerere University, COBES Program; Mifumi Project and collaborating agencies and organizations, including level four health center with medical officer and nurse/midwife, youth center, women's center, schools, research labs; Walter Reed AIDS vaccine project (advisory capacity); US National Library of Medicine (advisory capacity)); Tororo District Director of Health Services (advisory capacity); medical informatics at Ministry of Health (place holder for Simon['s work - want to capture real time data at Mifumi and set up an electronic monitoring and evaluation system.)

SITE VISIT

Initial visit by medical students – long weekend – October 18 – leave Thursday and return on Saturday. Obtain demographics of Mifumi, history, population, economic activities

RESIDENCY

Dates: First COBES residency – from 29 October for one month.

Facilities: 8 flats (4 two bedroom and 4 three bedroom) behind health center. Health center has water and electricity. Only minor operations are performed there; operating theatre is not used – plans for surgical camps. The tutor is medical officer of the health center – Dr. Tom Ochar. Another doctor who has been involved with COBES is also nearby. Health information room in health center; computers in health center (Internet connection?) Capacity building

Languages

in this area include: English, Luganda, Luo, Swahili, and Jap, with English and Luganda dominant. Interpreters can be made available by Mifumi if necessary.

Media for tutorials

Posters in health center;

Tutorials in booklet form for use by health workers and students in their work with the community;

Radio spots - Buy small radios for 25,000 shillings and distribute to women.

Mifumi has arrangement with local radio Rock Mambo and are on air weekly – radio also allows spots to reach other target communities;

Electronic version of tutorial on computers in health center;

Objectification of health message in model house.

Arts – collaboration of Ken Nek (artist, illustrator) and John Mary (artist, animator)

COBES Activities:

Work in health center –

Mifumi will develop work plan, taking into account extra manpower – then assess what works and what doesn't

Facilitate patient flow, performing activities according to skills of students as assigned by tutor run daily activities, immunizations, VCT, health education, observe in theatre

Students can also help with youth, schools, and health workers in alleviation of DV

Research in culturally acceptable health information interventions

Design and pre-test survey tool

Obtain baseline regarding knowledge of malaria and diarrhea.

Test tutorial in variety of media

Make editions and changes based on community feedback and perceptions

Train community in creation and communication of message

Survey re knowledge of malaria/diarrhea and interventions followed

Use available records at health center – see how much has been achieved Quarterly updates

Mifumi has baseline data for 2002 (?) for hygiene and common illnesses Use this but do another one as there have been activities going on Village level -140 households -60% in sample Can feed information to the Ministry

Need to incorporate affordable solutions (for example, the water pot which is featured in the tutorial on diarrhea is affordable.)

Nets have been accepted, though they are often sold or used for other things – Mifumi distributes them at 3,000 shillings (subsidized) – what are they doing with them? Mifumi has list of people receiving nets. Who in family actually uses nets?

This research will be developed as a paper for publication and presentation at an international conference.

Other points of discussion:

Economics – Women's Guild

Poverty reduction – capital to put fish ponds at points of water collection, bee farming, natural farming, training on secretarial work, sewing

Can poverty reduction be factored into all preventative interventions

Understanding behavior and behavior change

Youth as target – sports – we bring a few soccer balls and volleyball

AIDS, mother to child transmission

Role of traditional healers – shrine and caves

Number of Participants – 8 students including 2 supervisors

Duration of Residency – 5 weeks

BUDGET:

Faculty of Medicine provides funds for the students – 180,000 shillings each.

Transport:

Between Kampala and Mifumi – Mifumi Project van can be made available.

Transport within Mifumi – Mifumi Project can do this, possibly thru deployment of a car to health center for outreach programs. Also bikes can be made available.

Accommodation:

Mifumi provides at the health center.

Additional accommodation is also available nearby.

Students bring their own sheets, linens, and bedding – mattresses and blankets are provided

Meals:

Local cooks can provide meals according to student needs – Mifumi Project can facilitate and students pay with FoM funds.

Equipment:

Tape recorders – NLM funds Sony 170,000 (analog), 340,000 (digital) Uchumi

Radios – 3,000 shillings each – distributed by Mifumi

Printing for posters and booklets - US\$5,000 – NLM funds

Stationary-flip chart and markers –FoM

Facilitation:

Tutor – arrangement with FoM

Nurse/sister and local leader facilitation – arrangement with Mifumi

Artists – NLM and Mifumi

Question – What is the Internet access like in Mifumi?

Might there be a connection with the NADS project?

MIFUMI HEALTH CENTER: PREPARATION FOR COBES - Dr. Anthony Okoth

On the 18th

of October the Mifumi health Center was visited by makerere medical students Niyonzima Nixon and Nelson Igaba, both fourth yea students.

They visited the health facility itself and discussed with the facility staff. They also visited the domestic violence survivors' office, the staff quarters (anticipated students residence) and the primary school.

They met theLC1 chairman, the LC1 defense secretary and youth secretaries. In the deliberations that ensued the following were noted as areas to be addressed in preparation for the COBES activities.

- 1. Two screens are needed to partition the large consultation room in the health center to make three extra consultation rooms.
- 2. The laboratory needs a coulter counter to run complete blood counts.
- 3. Extra theater instruments need to be purchased to make the surgical sets complete.
- 4. Arrangements will have to made later for a visiting anesthetist when major surgery is contemplated.
- 5. A lawn tennis net and tennis racquets are needed in order to rehabilitate the tennis court to facilitate recreation for the students.
- 6. New computers that are compatible with contemporary software are needed.
- 7. An internet connection is needed.
- 8. The village health team needs to be expeditiously created. The Director of District Health Services Tororo needs to be consulted on this.
- 9. A motor vehicle to transport referred patients to Tororo is necessary.
- 10. The following staff will be required.
 - A registered midwife
 - A counselor
 - An enrolled nurse
 - A resident doctor
 - A laboratory assistant.

I propose that the stake holders Mifumi, Fom and NIH/NLM meet and decide who will be best placed to handle a particular need.