

UGANDA HEALTH CARE SYSTEM

Community and Home based Rehabilitation Course

Julius Kamwesiga

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Objectives

1. Define a Health System
2. Describe how Ugandan Health care System is organized
3. Outline facts and figures of health care in Uganda
4. Describe the major health sector reforms
5. Outline major roles of rehabilitative health care in Uganda.
6. Describe the role of Government in CBR
7. List Uganda's achievements in CBR
8. List the challenges

Location of Uganda in Africa

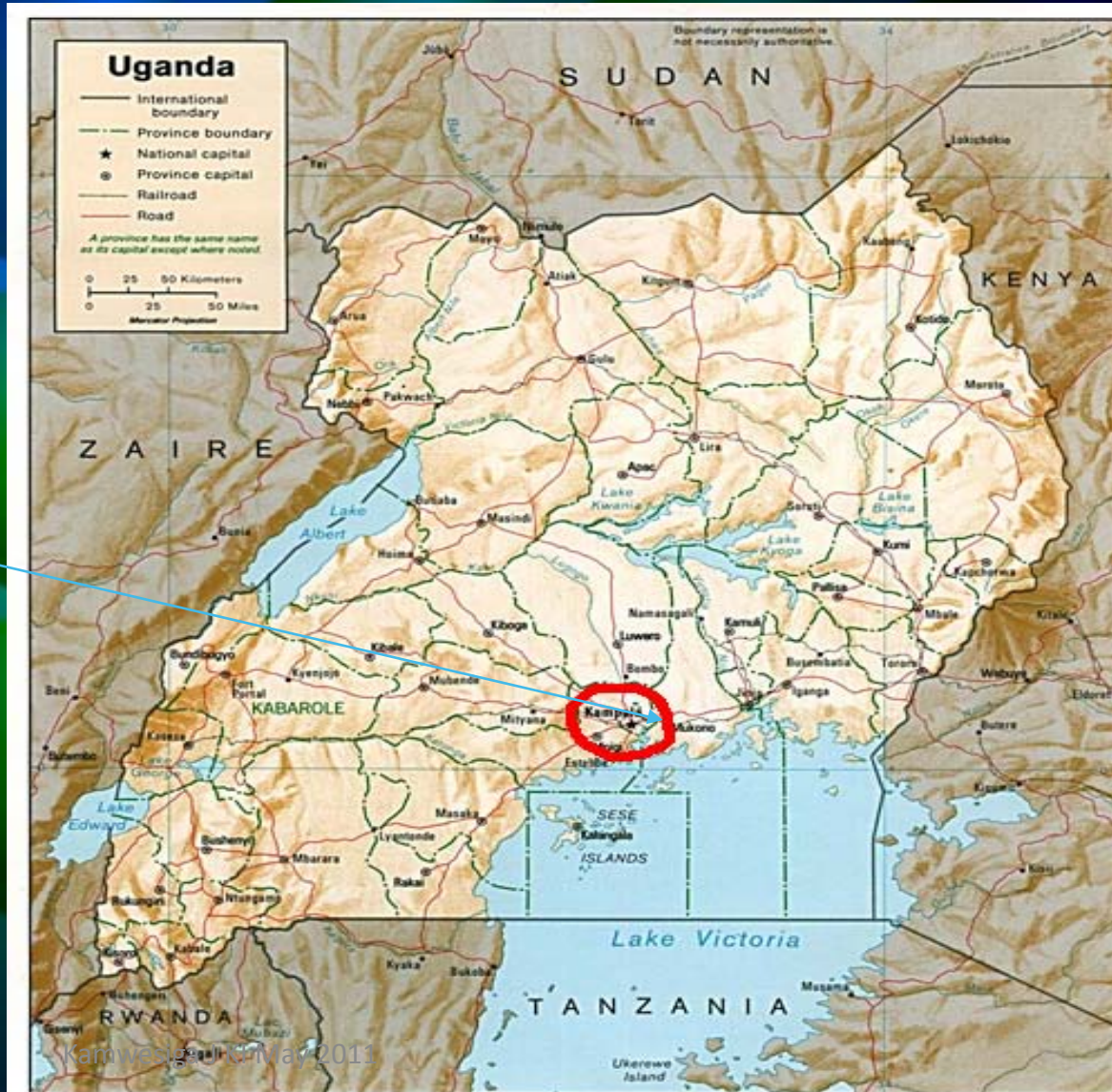
Uganda

AFRICA



Location of Kampala City

KAMPALA



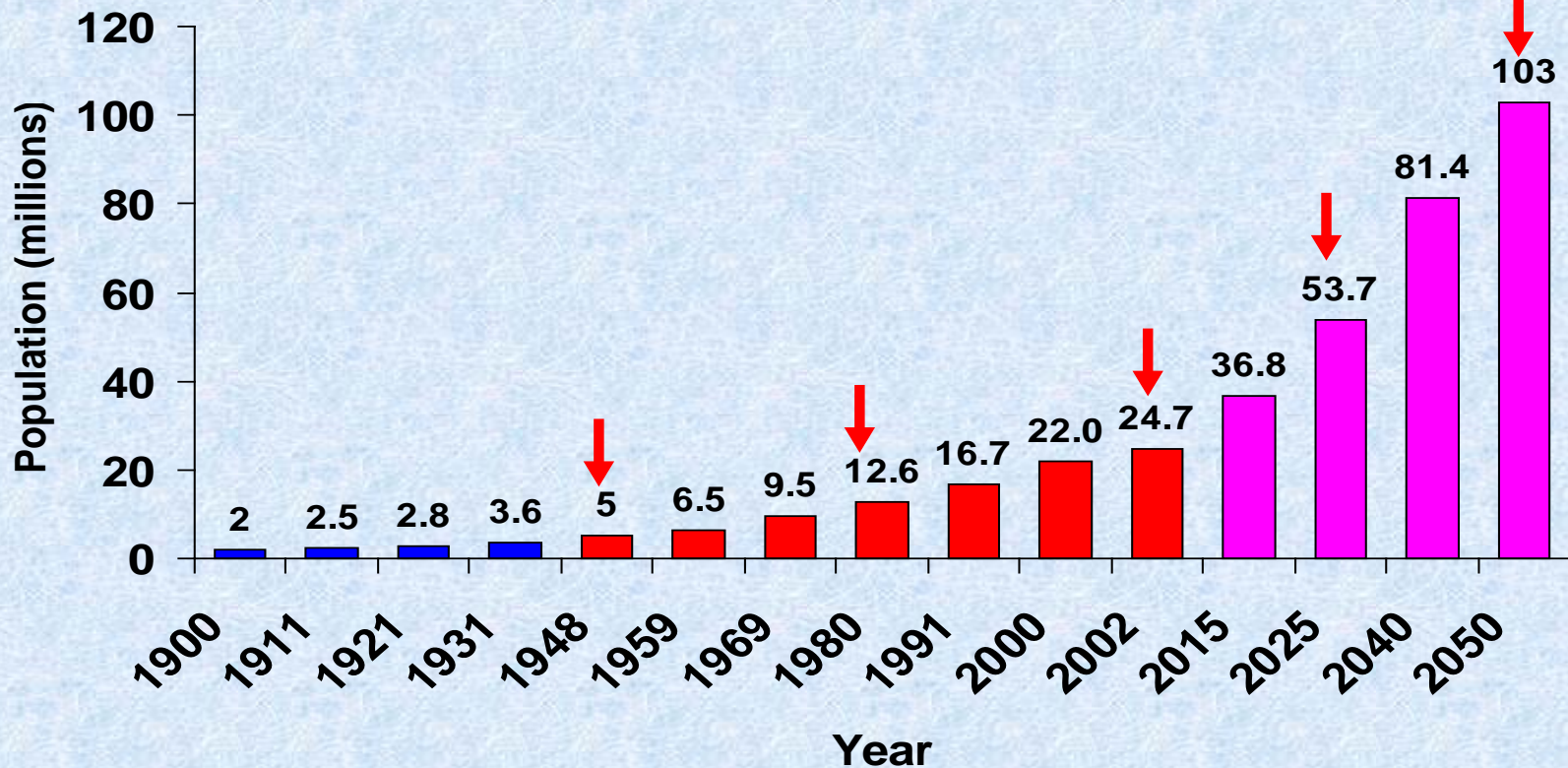
A section of Kampala City



Demographic and Social economic Statistics

- Population 32 Million
- Total Fertility rate (children per woman) 7.1
- Adult literacy rate 68.9%
- National per capita income (US \$) 1520
- Population living below poverty line 84.9

Uganda's population continues to grow rapidly...



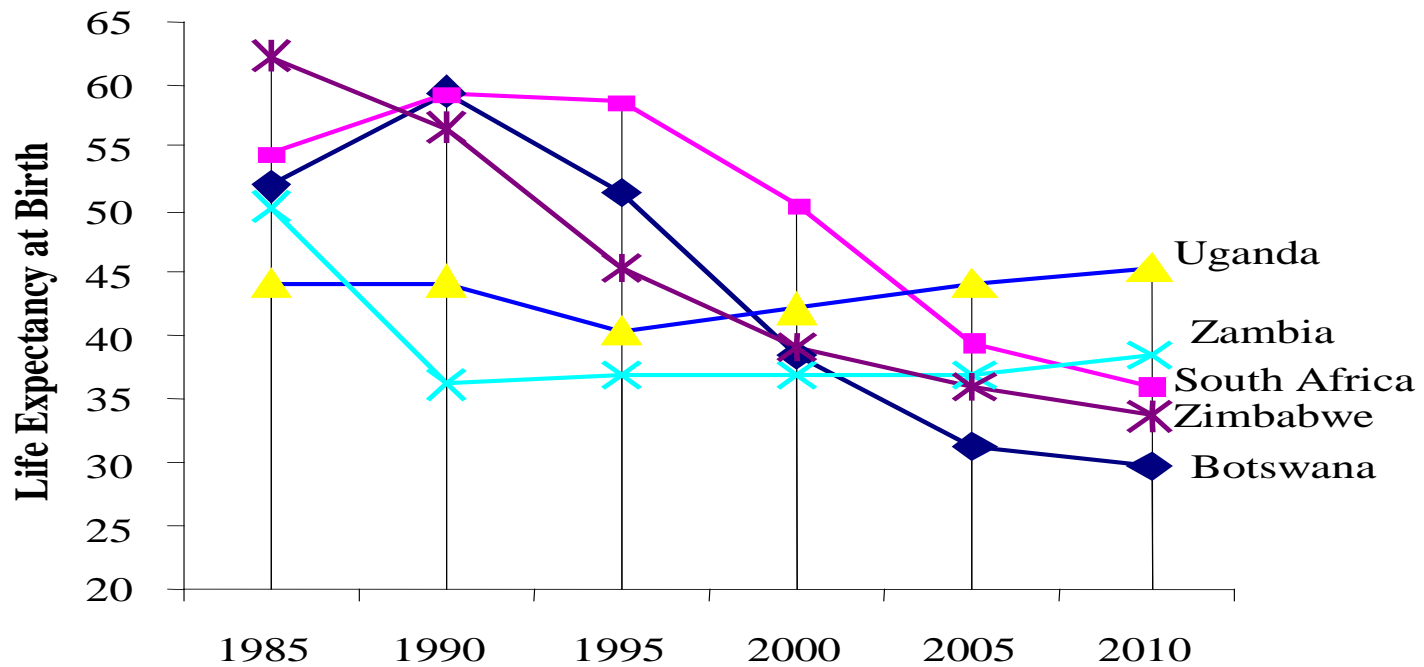
Great Lakes Region Population Trends (2005-2050)

Country	Population in Millions		
	2005	2025	2050
Congo D.R	61.8	106.0	181.9
Sudan	40.2	61.3	84.9
Tanzania	37.9	59.8	88.3
Kenya	34.0	52.9	76.6
Uganda	27.6	54.8	103.2
Rwanda	8.1	13.1	23.7
Burundi	7.4	12.4	20.2
Total	217.0	360.3	587.8

Life expectancy in selected African countries(1985-2010)

(Source; US Census Bureau, May 2000)

Figure 2: Life Expectancy in Selected African Countries(1985-2010)

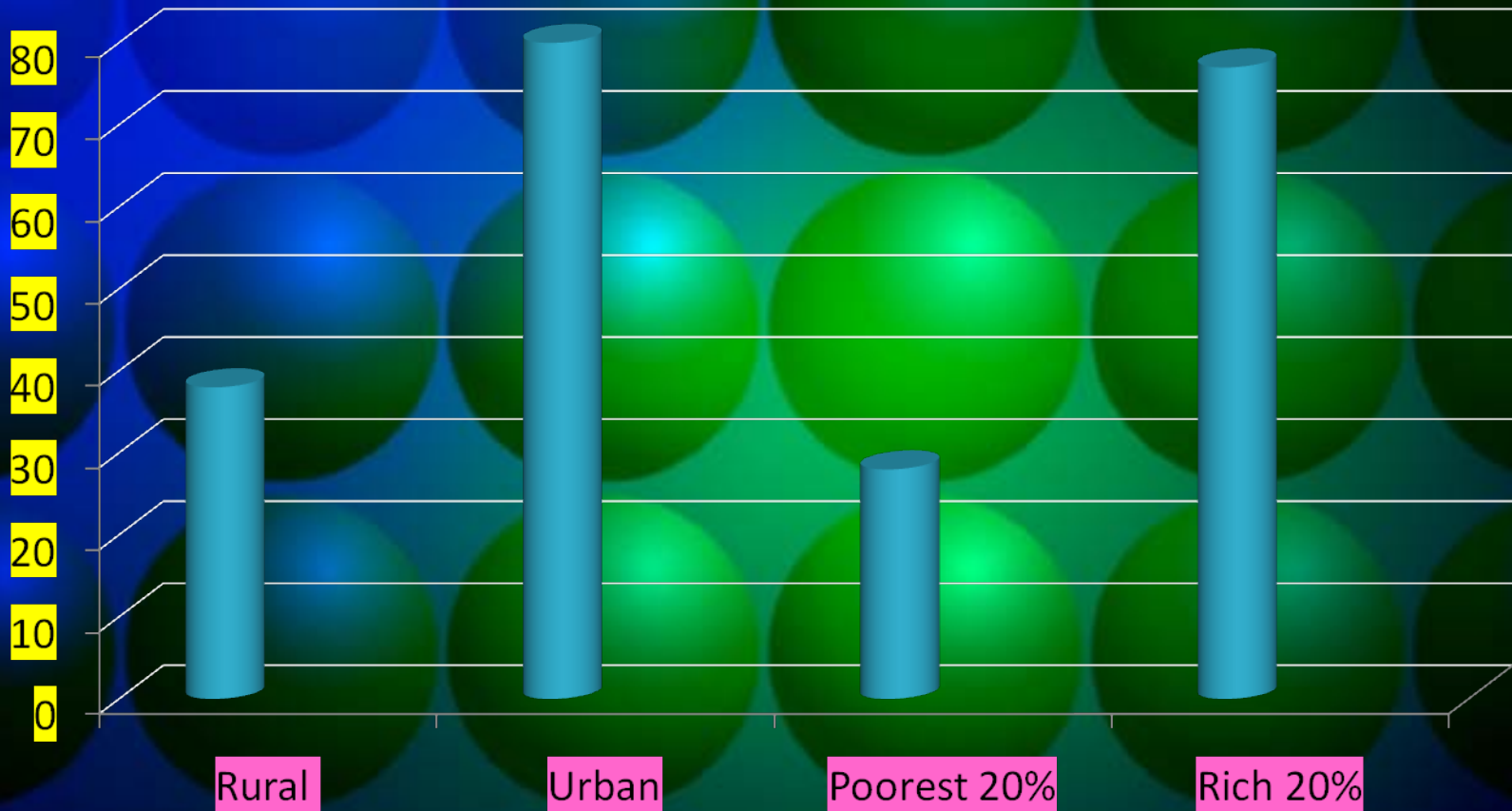


Uganda has a Rapid Population Growth Rate (3.4 % p.a.)

Major factors (among others):

- High fertility rate
- Short birth intervals
- High teenage pregnancies

Birth attended by skilled health personnel



Uganda: Demographic Characteristics

- Total Population - 32 million
- Population growth rate - 3.4%
- Population doubling time - 21 years
- HIV prevalence - 6.4%
- Infant mortality rate - 76/1000
- Under-5 mortality rate - 157/1000
- Maternal mortality ratio - 435/100,000
- Life Expectancy - 50 years

Health status statistics

Cause of death among children under 5 years of age (%)

- Malaria 20.8%
- Prenatal conditions 20.2%
- Pneumonia 19%
- Injuries 4.4%
- Neonatal causes 24%
- Othors 12.4%
- HIV/AIDS 7.7%

Top ten causes of death in all ages

- HIV/AIDS 20%
- Malaria 12%
- Lower respiratory infections 12%
- Diarrhoeal diseases 9%
- Perinatal conditions 4%
- Tuberculosis 4%
- Cerebrovascular diseases 3%
- Ischaemic heart disease 3%

The ratio of health workers to population

The Ratio of health workers to Patients in Uganda

- Doctor is 1:24,000
- Nurse is 1: 1,700
- Midwives 1: 9,000
- Dentists 1: 77,000
- Lab technician 1: 16,000
- Occupational Therapist 1: 433,000
- Env'tal health officer 1: 27,000

What is a Health System

- Complex to define, however, a health system is taken to include **“all activities whose primary purpose is to promote, restore or maintain Health”**
- This definition encompasses Health actions and Non-Health actions within and outside the Health Sector that lead to desired health results.

Ugandan Health care System

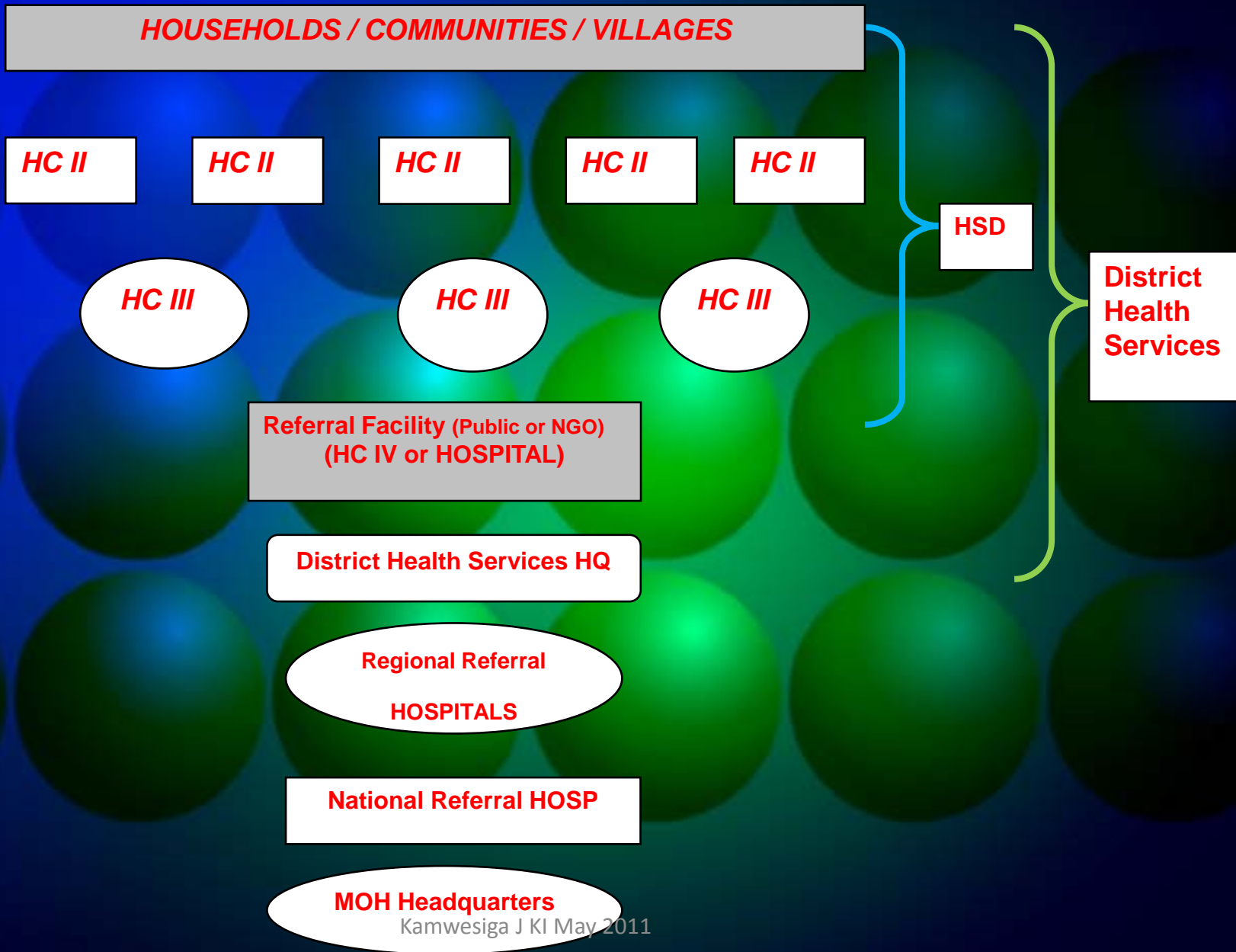
- The Uganda's health system, like other systems, aims to achieve and sustain good health for its people.
- The Health system has been evolving over the last 3 to 4 decades to handle emerging concerns and challenges to the health situation in the country.
- Health Care Delivery has mostly been through modern and Traditional practices.

Health Care Organization

- Public Sector
- Private Not For Profit (Faith Based)
- Private Medical Practice
- Traditional and Complementary
 - Herbal medicine
 - Traditional Birth Attendants
 - Bone Setters
 - Spiritual Healers
- Community health workers/promoters/drug peddlers

Health Care Delivery

- Health care delivery is done through a decentralized framework. The District health structure is responsible for all structures in the district except the Regional Referral Hospitals where they exist.



Uganda Health system cont'

- **Village health teams/community medicine distributors**

The first contact for someone living in a rural area would be a medicine distributor or a member of a village health team (VHT). Each village is supposed to have these volunteers using bicycles. They still have no medicine, but they can advise patients and refer them to health centres.

- **Health centre II**

- According to the Ugandan government's health policy, every parish is supposed to have one of these centres. A health centre II facility, serving a few thousand people, should be able to treat common diseases like malaria. It is supposed to be led by an enrolled nurse, working with a midwife, It runs an out-patient clinic, treating common diseases and offering antenatal care.

Health centre III

- This facility should be found in every sub-county in Uganda. These centres should have about 18 staff, led by a senior clinical officer, It should also have a functioning laboratory.

Health centre IV/ District Hospital

- This level of health facility serves a county. In addition to services found at health centre III, it should have wards for men, women, and children and should be able to admit patients. It should have a senior medical officer and another doctor as well as a theatre for carrying out emergency operations.

Regional Referral Hospital (RRH)

- There are 10 RRH which should have all the services offered at a health centre IV, plus specialised clinics – such as those for mental health and dentistry – and consultant physicians.

National Referral and Teaching Hospital

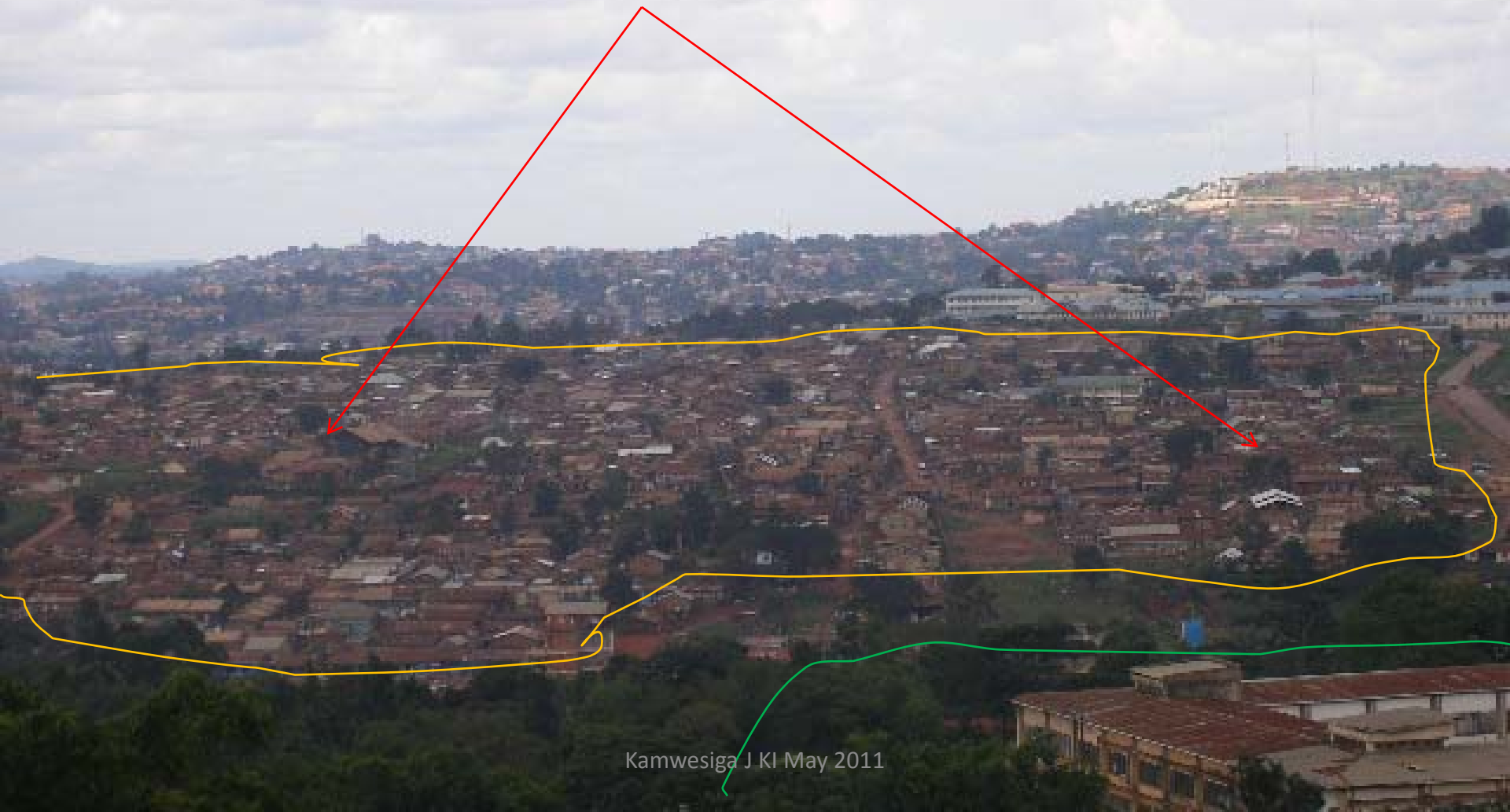
- At the top of the healthcare chain is the national referral hospital.
- This is where some of the best medical brains can be found, often working part-time at private clinics to supplement their meagre government salaries.

Mulago National referral hospital



Makerere University

Surrounding slums



The Health sector reforms

- Decentralization
- Abolition of user fee.
- Government partnering with Private not for profit organizations.
- Working with private health care providers.
- Encourage the autonomy of public Hospitals.
- Planning and resource allocation system (bottom-up Vs Top-down practice).

HEALTH SECTOR REFORM CONT'S

- Human resource management
 - Retrenchment
 - Pay reforms
 - Transparent remuneration structures
 - Decentralized human resource management

Health sector & the rehabilitation of PWDs in Uganda

Rehabilitation of PWDs involves;

- Medical Rehabilitation – treatment and counseling.
- Special or Inclusive education.
- Social economical rehabilitation through provision of vocational training and income generating projects.
- Psychological support for self acceptance and realization.
- Supporting and involving Disabled Peoples' Organizations (DPO) in government development programmes.

- A Typical picture you can see while at one of the District Hospitals in Uganda



Ministry of Health guidelines and action plan on rehabilitation

- Rehabilitation is one of the essential district health services.
- Rehabilitation starts at health centre III where assessment is done and referral made.
- Out reach clinics are organized to reach out for PWDS in the Districts.
- District Hospital is the first level specialist rehabilitation services.

Role of Government in promoting CBR

- Policy-making and planning
- Putting in place appropriate administrative structures.
- Provision of resources
- Decentralization
- Training personnel
- Onward referral system, monitoring & evaluation.

Through CBR Uganda has achieved the following

- PWDs in Uganda have been trained to appreciate and manage disabilities- thru accessibility to education facilities.
- Local communities have contributed assistive devices and other appropriate resources to assist children in school access education opportunities
- Local communities have been assisted to establish corrective surgery for their children.
- Local communities have been empowered to identify children in need of special services.

Special needs education



Vocational Training for the blind



Challenges of CBR

1. Poverty
2. Unreliability of community involvement Vs DPOs
3. Gov't denial of responsibility of services provision.
4. Limited local resources poor infrastructure
5. High level of illiteracy.
6. Unequal opportunities
7. Dependency
8. Women with disabilities
9. Sustainability is poor

Challenges cont

10. The Global Human Resource crisis hits Uganda hard.

11. Leadership, Management and Specialization are in short supply at all levels of health care.

12. A low Health Sector budget leaves many interventions unfulfilled.

Challenges cont'

13. Investment in training is low
14. recruitment and retaining of staff is poor
15. deployment of staff is difficult
16. migration of health workers is on the rise
17. demoralization due to work overload is common.
18. Restrictions on recruitment and low salary packages'.

Poverty a challenge to CBR



Accessibility Challenge





Karwesiga, 1st May 201

Narrow entrance & un even floor for wheel Chair

**Poverty and
inadequate
community
infrastructure**

**The Wheel chair
does not enter
the house**



Thank you

God bless