Exchanging the Impact of International Volunteer Service and Village Health Teams on Community Health in Uganda’s Mukono District

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The Problem
In many third world countries there is a dramatic shortage of doctors available for growing populations.

The country’s infrastructure lacks adequate public transportation at an affordable cost.

Many people do not seek care until it is too late and do not receive basic medical education on how to keep their family and themselves healthy.

This is especially true throughout the continent of Africa. The Omni Med project focuses on the Mukono district in Uganda.

The Idea
Train community Health Workers in preventative medical education.

In Uganda, they are called Village Health Teams (VHT). VHTs are selected by their community to serve three functions:
1) Instruct villagers in preventative medicine;
2) Become local first responders and links to health centers; and
3) Track health data for the Ministry of Health.

Train VHTs within the Mukono district and determine their effectiveness on the general health of their communities before expanding the program into other regions of Uganda.

Objectives
- Examine the effectiveness of VHTs on international health outcomes
- Gain more experience working with diverse communities
- Observe international clinical practice and care
- Obtain an enhanced understanding of the cultural aspects of health

The Omni Med Initiative
Omni Med began in March 2008. In an effort to train VHTs in Uganda, members of this organization partnered with the Ugandan Ministry of Health, the US Peace Corps and St Elizabeth’s Medical Center in Boston.

The goal of this partnership is to revive a previously successful program led by the Ugandan Ministry of Health and empower local communities to improve their own health and create sustainable and measurable health impact.

Volunteers from the U.S are employed to carry out this effort by assisting in the education of VHTs, but local Ugandans are essential to make this program successful.

The VHTs live in rural communities and are trained to provide primary and preventative health care.

The goal is that by empowering local communities to improve their own health care there will be a measurable impact on life expectancy, infant and child mortality.

The Training Program
Training Weeks consist of a 5-day program that lasts from 8am to 6pm daily. Nine modules are covered throughout the five days which focus on preventative and curative health.

Volunteers taught modules as well as supported local health personnel who ran the VHTs training.

To maintain contact and deliver continuing education, volunteers helped with focus groups, home visits with VHTs, and Integrated Community Case Management (ICCM).

So Far
- 916 VHTs have been trained as of January 2013; will surpass 1000 by May
- Estimated 164,680 lives impacted thus far

Our Experience

Final Thoughts
- The training program is effective in teaching primary and preventative care to VHTs and knowledge is being assimilated into the community
- The VHTs need additional time and resources to affect health patterns within their communities
- Currently, the VHT are empowering their communities with knowledge but lack the resources to provide their fellow villagers with the means to change their behaviors
- The program is sustainable; with increased funding it could provide a measurable impact on communities within Uganda

Intervention Assessment
- Prospective clinical trial to measure program’s impact
- Compare baseline health indices before and after VHTs and follow up home visits
- Baseline demographics and health related behaviors were measured in 650 households in Mukono
- Households were randomly assigned to be a control or for treatment
- VHTs provided interventions and six months later all households were surveyed again
- Data collection was completed in May 2012