HOMESTEAD HYGIENE IN RURAL UGANDA

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- St. Mary’s School of Midwifery
  - Kalongo, Uganda
  - January 12-18

- Ocer Campion Jesuit College
  - Gulu, Uganda
  - January 18-20

I would like to thank Sister Carmel and Tutor Polly from St. Mary’s School of Midwifery and Father Tony and Nurse Susan from Ocer Campion for hosting our group and providing such excellent, immersive educational opportunities.
The Village Health Team (VHT) concept was introduced in Uganda in 2001 as part of a national health strategic plan. VHTs are intended to bridge the gap between un-served households and the formal health system. They form the first level of Ugandan healthcare.
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Attendees at a community health education lesson about Hepatitis, led by Village Health Team members and St. Mary’s nursing students.
An Interview with Kalongo’s Senior Community Development Officer: Atim Agnes Prussy
Health Assistant: Eric Ongom

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• **Common health and environmental concerns as identified by the Community Development Officer:**
  - Latrine collapse during the rainy season
  - Deforestation
  - Bush burning
  - Waste disposal
  - Stray animals- destroying of water sources
  - Areas of standing water- malaria
Postpartum Home Visit

• Diploma students from the midwifery school are assigned mothers to follow every day for 1 week following delivery.

• They do complete exams of both mom and baby.

• They provide education on bathing, breastfeeding, and family planning.

*Diploma student bathing baby (4 days) during home visit in Kalongo, Uganda.*
Village Health Team Presentation

• Village Health Team (VHT) Responsibilities
  • Link the community with health centers and hospitals
  • Identify children due for immunizations
  • Encourage pregnant mothers to utilize anti-natal services
  • Identification and treatment of neglected tropical diseases
  • Family planning education
  • Alert medical professional of outbreaks
  • Malnutrition assessment
  • Encourage positive hygiene practices
Area of focus: VHTs and Homestead Hygiene

• Three of Uganda’s top four causes of mortality include respiratory infections, malaria, and diarrheal diseases. All of these are influenced by homestead hygiene.

• Healthy home components encouraged by VHT members:
  • Vegetation/garden
  • Pit latrine
  • Separate bathing and toilet areas
  • Trash pit
  • Drying rack for dishes
  • Hand hygiene station
  • Minimizing standing water

• Areas needing improvement:
  • Management of animals
  • Cookstove ventilation
This family was chosen for our visit because they were identified as having the ideal homestead. This honor of displaying the home for guests is used by the VHTs as motivation for other families to improve their homestead hygiene.
Positive Deviance & Program Planning through VHT:
Identify and learn from units that perform beyond expectations

Positive Deviance originated from the idea that interventions could be designed around beneficial health behaviors that some community members already practice. It identifies the uncommon but healthy practices that allow some individuals to thrive when other, equally at-risk neighbors, do not.

1. Assess the data set for the health problem in the group of interest.
2. Carry out a situational analysis
   1. The goal is to understand the common practices, beliefs, and attitudes pertinent to the health problem
3. Define key risk factors associated with the health problem
4. Identify positive deviants
   1. Classify all cases along two dimensions: (1) exceeding or not exceeding the threshold for presence of health problem and (2) exceeding or not exceeding the threshold for presence of risk
   2. Positive Deviants are those for whom risk is present, but do not exhibit the health problem
Intervention/Evaluation

- Identify positive deviants’ behaviors, attitudes, and beliefs relevant to health problem
  - Implementing a positive deviance framework requires extensive observation
  - Village Health Teams would be trained and utilized to identify outlying behaviors
- Develop strategies for implementing positive deviants’ behaviors into larger populations

Evaluation: Regional hospitals are responsible for keeping data on patients in the area. This information will be used to evaluate progress within communities as well as to compare between villages. Evaluation of VHT members and their ability to complete thorough observations would also be necessary.
Sustainability/Partnerships

- Positive Deviance has been utilized very effectively in community development all over the world.¹
- It tends to produce sustainable changes because the methods highlighted are already in use by members of the community.⁴

Elements of Sustainability:³

1. Maintaining health benefits achieved through the initial program
   1. By implementing strategies already utilized by other community members, we know the methods are sustainable.
2. Continuation of the program activities within an organizational structure
   1. Successful implementation would require buy-in from VHT members, local hospitals, the CDO, and regional health assistants.
3. Building capacity of the recipient community
   1. VHT members would be trained to recognize positive deviants and implement their strategies, building the capacity of the community to apply this strategy on their own in the future.
Conclusion & Future Goals

• Improved homestead hygiene can decrease rates in many of Uganda’s primary health concerns.

• Moving forward we would like to see the VHT members utilizing models, such as positive deviance, to initiate change within their own communities.

• Finally, maintaining partnerships with local and regional stakeholders will ensure this program has the support it needs to be successful.
Thank you to Dr. and Mrs. Zamierowski for making this trip possible for students from the School of Nursing.


