

Want to reach out

The Health Clinic in Holy Trinity Peace Village (HTPV) reached out to over 10.000 patients in six months when they had funding for an outreach program. Now they only treat one fifth of that number.



Many Toposa's received treatment through the Clinic's outreach program earlier this year. Photo: Okello Dennis

By: Miriam Hagen

"The outreach project helped the community very much, but unfortunately it ended," said Health Coordinator and Clinical Officer Okello Dennis at the HTPV Health Clinic.

UNICEF granted funding for a six months outreach program, which was running from November last year until April this year. The proposal to continue this project has been declined, but Okello refuses to give up quite yet.

“We reached a lot of people. During these six months we treated above 10.000 patients,” he said.

Migrates

An average of 300 patients visits the clinic every month, which means that the outreach program increased the number of patients by more than five times. The health personnel travelled to the villages twice a week. They visited 10 sites, and each of the places was seen at least once a month. Places of higher demands were visited twice.

As Kuronvillage.net visited the clinic on a Friday morning, very few patients were seen.

“The whole day we have only seen four patients, but if we go to the villages, we can get so many patients who are sick,” Okello said with a sad facial expression.

He explained that during the dry season many of the Toposa’s travel with their cattle to find water and grass. Since the whole family relies on milk and blood from the cows, they all have to go.

“If they get sick, they cannot reach us. It can take up to a week to get here by foot,” Okello told.

Treated in the field

He believes that it would be strategic for the health clinic to spend a lot of the time out in the field during the dry season from October to May. In the rainy season it is very difficult for the vehicle to reach far out because of mud and bad roads, but at least the population stays closer to the clinic.

“Do you see different diseases when you are out in the villages?”

“No, not really. The most common ones are Conjunctivitis, Skin infections, Urinary tract infections, Sexually Transmitted Infections, Diarrhea and Malaria.

Many of these are due to poor hygiene, and can be prevented through health education and use of clean water,” Okello said.

He explained that in most cases, this can be treated with drugs out in the field. In severe cases, the patient will be brought to the clinic and admitted.



The outreach program had a special focus on pregnant women. 611 women were examined and they received a “clean delivery kit”. Photo; Okello Dennis

Hygienic delivery

Very few Toposa women go for health checkups during pregnancy and only an average of two women every month go to the clinic to deliver. During the six months of outreach program, 611 pregnant women were examined. After week 16-28, they received Malaria prophylaxis, Tetanus Toxoid vaccines, Mebendazole for deworming and a mosquito net to prevent Malaria at the time of delivery. They also got a “clean delivery kit” at 36 weeks of gestation, which consisted of a clean polythene sheet, a blade to cut the cord, soap, cord ligature, 2 baby’s towels, Vitamin A and Tetracycline eye ointment to smear in

the eyes of the baby to prevent Conjunctivitis transmitted from any sexually transmitted diseases the mother might have. Before the mothers used stones to cut the cords, this resulted in so many cases of infections of the new born babies (neonatal infections).

“Do you see any results from this work?”

“Yes, before they could bring 2-3 day old babies with high fever from infections (neonatal sepsis) which comes due to poor hygiene during the process of delivery. We have not seen any cases like that recently,” Okello smiled.

Needs donor

He is currently looking for a donor which can support this project. Before it can even start, the ambulance need some repair.

“It needs five new tires, and the breaks and four wheel transmissions are not working,” Okello explained. As the tires are hard to find, it needs to be sent from Nairobi, and the costs can come up to 5.000 USD to get the ambulance back on the road.

In the proposal, which was declined by UNICEF, Okello had budgeted with 15.000 USD annually to keep the outreach program running with the existing staff from the clinic.

“So 20.000 USD will be enough to continue the program?”

“Yes, that will be enough. It can get us back to the outreach and we shall be able to help a very big number of people with the staff we already have,” Okello concludes.

Facts about the clinic:

- Together with Nanyangachor Primary Health Care Centre, supported by the catholic diocese of Torit, it covers Kauto Payam district, which had 51.323 citizens in 2008.

- It started in a simple, locally made house in 2006 with one nurse, Sister Angella. At this time the project was funded by the Catholic foundation “Mercy beyond Borders”.
- The existing facilities were built in 2008.
- The clinic operated without a permanent donor between 2012 and July 2013, when “American Refugee Committee International” (ARC) committed to pay the expenses of staff, drugs and fuel until the end of 2015 under the project of the Health Pool Fund.
- The clinic currently has 8 medical staff, whereas 2 Clinical Officers, 1 Laboratory technician, 1 nurse and 4 nurse assistants.
- In 2014 an average of about 300 patients are treated at the clinic each month.







