



**PLANNING PROPOSAL FOR THE ESTABLISHMENT OF A 100 BED FREE
CHILDREN AND WOMEN'S NON-PROFIT HOSPITAL IN UGANDA**

BY



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Executive Summary

The 100 bed free children and women's hospital project aspires to provide sick children and women and the chronically / terminally ill patients free and easily accessible quality healthcare services.

The hospital seeks to provide speciality services such as, medical, maternity, surgical and radiation oncology, palliative care, paediatrics and paediatrics cancer care, pain management and support services. A state of the art lab for Bio-chemistry, microbiology, pathology and haematology will also form part of the hospital. The hospital would have separate Geriatric, male, Female and Paediatric wards.

The hospital is aimed at serving the need of the Ugandan population and will be run on a not for profit basis. The project involves construction of a day-care clinic and a 100 bed hospital in Wakiso district. The hospital will offer completely free quality medical services to all children under the age of eighteen and pregnant mothers. The rest will have affordable quality services.

The day-care clinic and hospital are expected to be funded by volunteers, supporters, grants and donations. The 100 bed hospital is expected to be completed and ready for operations within two years from the commencement of the project, the out-patient clinic will however be operational within 3 – 6 months.

In a developing country like Uganda where many poor parents seek financial help in the media on television and radio to fundraise money to take their sick children for surgery/treatment in foreign countries especially India, China, South Africa etc and many fail to raise the required amount, there is need for a modern free children's and cancer care hospital to provide treatment to bridge the demand gap that is currently not addressed by the existing government, private and social sector hospital and health institutions.

The purpose of the Medical Centre

The main purpose of the medical centre is to offer free quality medical care to all children under the age of Eighteen years (18) plus pregnant mothers and also offer affordable but high quality medical care and preventative services to all women in Uganda. It will offer comprehensive services for medical, physical, and mental healing, so that the people may have a better life.

It will offer a wide range of health services. It will have an Out-patient Department for general medical care, an In-patient Department, Cancer Care Department, Dental care services, Eye care services, Maternity care services, ambulance services and Pediatrics Unit.

The hospital will bring health services nearer to people as we plan in the future to put in place an ambulance service in each of the remote districts of Uganda for those severely and or chronically sick children and women who might not afford to travel to our main facility.

Reasons for undertaking this project

There is a genuine need for undertaking this project. While enormous strides have been in recent years in medicine and hospitalization in Uganda, much remains to be done. Improvement of child health is particularly urgent. Infant mortality (within the first five years) is officially reported at 140 per 1000 children which is a high percentage and this figure might be low because of the inadequacy of statistical reporting at the village level, where mortality is highest.

There are only a handful of adequately trained pediatricians and gynecologists to serve a nation of over 36 million people; of all the nurses of all kinds in Uganda, only a few have adequate training. Physiotherapists, trained medical technicians and/or dieticians are nonexistent in Uganda. Pediatric methods are seriously and in some areas dangerously antiquated. Of the very few and poor children's wards in our hospitals, none are adequately run by modern standards. There are not even any properly administered isolation wards for children. And, in the whole country there are no adequate facilities for premature births apart from those few very expensive private institutions that can only be affordable by about 1% of the Ugandan population.

Elimination of user fees at government health facilities has led to 80% increase in patient visits to national hospitals making them overcrowded where the ratio stands at 8 physicians per 100,000 persons. Many users are denied care if they don't provide their own medical equipment especially pregnant women leading to 6000 women dying each year due to pregnancy related complications.

On the other hand, there is ample evidence that the Ugandan people, with their dramatic production increases and steadily rising standard of living, are becoming progressively more aware of this problem. Everywhere there are demands for information, and even peasants offer high prices to get the services of pediatricians and gynecologists. In our judgment, this problem is susceptible to rapid improvement, if the people were given information and leadership by properly trained doctors and public health officials. Unfortunately, however, as pointed out above, few Ugandan doctors or public health officials are prepared for this role. Most doctors have been trained either in Uganda or briefly in Europe many years ago. In any case, they have had little opportunity to keep abreast of current progress in this field.

Furthermore, this project can eventually be expanded to include a larger general medical center, research facilities, and schools of medicine, dentistry, physiotherapy, medical technology, dietetics and social work. After making substantial progress with respect to Uganda, provision might be made for a gradually expanding training program to include doctors; nurses and other health personnel from other countries, the referral service might be extended and publication projects broadened. In addition to the urgent and pressing need for a children's medical center, there are psychological reasons for starting this project with the construction of a children and women's hospital. Certainly, one of the outstanding problems understood and appreciated by even the humble is that of child health and welfare. "The hand that rocks the cradle rules the world." An attack on this problem might therefore, be used as a key for approaching the ultimate goal.

Why Should this be a Charity Non Profit - Making Institution?

Non profit Trust hospitals play a significant role in bridging the healthcare gap particularly for the underprivileged. The healthcare infrastructure in Uganda is very wide and ranges from 5 bed nursing homes to 1000+ bed teaching and super specialty hospitals. Some of the most respected healthcare organizations include Mulago Hospital, Kampala International Hospital, Rubaga Hospital, Nakasero Hospital, Guru Hospital, Mengo, Nsambya Hospitals and are also run on somehow NGO mission or religious motive though not completely non-profit.

In North America and many countries in Europe, many hospitals are private or of a charity character, as the governments have insufficient funds to cover all the requirements of the

people. Moreover, historically hospital and medical work have had strong support from charitable and eleemosynary institutions which have pioneered in this field.

In Uganda, unfortunately, practically all big medical institutions are State owned and controlled, the exceptions being primarily missionary institutions or those of the minority religious or racial groups such as Catholics, protestants and Islamic which have historical roots. Tremendous strides have been made during the past few years in national hospitals and State medicine with benefits to the nation, and it is anticipated that in the future the bulk of medical hospital facilities will continue to be State supported. There is, however, an urgent need for private enterprise in this field which could be done in part by the establishment of a strong, outstanding example of a Ugandan, charity based non-profit private Children's centre with high standards.

State medicine tends to have the same faults in Uganda which have been so frequently observed in other countries, namely, too much burdensome regulations, understaffing, the rule of seniority rather than promotion on merit, political meddling and too little of the experimental and pioneering attitude so necessary for progress in medical science. Moreover, State medicine in Uganda does not have the leavening effect of friendly competition from private medical institutions which has done so much to keep the government-owned hospitals on their toes in the United States. It should be added that the Ugandan Government and the Ministry of Health urgently feel the need, and believe there is ample room for charity based health institutions to work side by side and in close collaboration with government institutions. It may be added that the Government recognizes this by making small subventions to those operating private institutions doing substantial charity work, including institutions run by minority groups.

Furthermore, it is even more true in Uganda than in the western world that the Government simply cannot afford to provide the medical service required for all of the people who cannot afford very expensive private health care. It therefore seems appropriate to tap private funds, particularly in view of the Ugandan tradition of charity which is deeply embedded in religious feelings and mores of the people. It is believed that an institution like this can do much toward channeling this feeling toward the support of modern medicine and that also other charities will help copy and spread this idea through-out the country and in encouraging local communities to meet their own requirements rather than relying solely on assistance from the central government. It will be a major objective of this institution to instill in the medical profession a zeal for developing local initiative, both private and public, for supplying local needs.

Justification for the Medical Centre

Wakiso District lies in the Central Region of the country, bordering with Nakaseke District and Luweero District to the north, Mukono District to the east, Kalangala District in Lake Victoria to the south, Mpigi District to the southwest and Mityana District to the northwest. Wakiso lies approximately 20 kilometres (12 miles), by road, northwest of Kampala, the capital of Uganda and the largest city in the country- The coordinates of the district are: 00 24N, 32 29E. Wakiso District has a total area of 2,704 square kilometres (1,044 sq mi).

It is an area that is densely populated. According to the 2010 statistics, it was estimated to have a population of 1,310,100 people making it the second most populated district in the country. At that time, 53% of the population were children below the age of 18 years and 17% of the total population were orphans. The average people in this area rely on subsistence farming.

People have to travel long distances to access good quality medical care in this area. The nearest hospital is Mulago Hospital which is a government Hospital situated in Mulago Kampala, a neighboring district.

The majority of Ugandan people are very poor and come from very far from towns who cannot afford the waiting periods in national hospitals . It is also hard for pregnant women to wait this long which forces these people resort to Pentecostal churches in order for pastors to heal them through prayer or local herbs which sometimes cause severe infections or even kill them. It is common for pregnant women to deliver children in hospital corridors or waiting rooms while waiting to clear congested maternity wards.

The ABATO Children and Women's Hospital will offer services to all children under the age of 18 regardless of their sex and all women regardless of age The infant mortality rate (that is, children who die before the age of 5) is about 15% but most causes of this are preventable and treatable diseases like malaria meningitis, yellow fever which will be prevented and treated at this Medical Center.

The Center's health programs will include health education for preventing these diseases. It will also carry out immunization programs and HIV/AIDS community outreach awareness campaigns and provide counseling services.

Sustainability of the Center

The Center will need an initial capital for operational costs and will begin to generate income from fundraising campaigns in and outside Uganda. There will be an affordable fee that will be charged for some of the services offered at the centre only to women who are not pregnant and men who are considered adult or are above the age of eighteen.

The hospital is a volunteer based centre whereby a number of doctors will offer free medical services on a volunteer basis through our partnerships with international healthcare volunteer organizations, universities and hospitals in Africa, North America, Asia and Europe.

Details of the Hospital Project

An ideal site centrally located between the country's poorest and well to do sections has already been secured by Abato Charitable Foundation in Wakiso District.

A functionally designed and non-luxurious structure which will include,

- 100 beds with (20 ICU beds, 80 transit and Operational beds)
- Offices and Administration,
- Technical Plant facilities,
- Out Patient Clinics and support,
- Diagnostic facilities,
- Laboratory, X-ray etc,
- Conference and Training Facility,
- Cafeteria, Kitchen and Laundry,
- Central supply and Sterilization,
- ER and Ambulance.
- Cold (body) storage.
- Dormitories/housing for overseas volunteers and interns.

