## I. Demographic Information

1. **City & Province**
   Bidibidi, Yumbe District, Uganda

2. **Organization:**
   Real Medicine Foundation Uganda ([www.realmedicinefoundation.org](http://www.realmedicinefoundation.org))

3. **Project Title:**
   Bidibidi Refugee Settlement

4. **Reporting Period**
   November 1, 2016 – January 31, 2017

5. **Project Location (region & city/town/village):**
   Bidibidi, Yumbe District, West Nile sub-region, Uganda

6. **Target Population:**
   Current statistics indicate that there are **272,206** refugees and asylum seekers now living in Bidibidi Refugee Settlement, and including residents of its catchment areas, the project targets **over 330,000** people.

   The refugee population in Uganda has increased rapidly due to the influx of South Sudanese fleeing violence, scarcity of food, and financial instability in their country. The UNHCR reported 12,889 new arrivals from South Sudan in one week (January 18–24, 2017), and Goboro border continues to receive more than 1,000 refugees daily. Bidibidi Refugee Settlement, opened in early August 2016 and still being built from the ground up, is now filled to capacity and has been closed to new arrivals.

## II. Project Information

7. **Project Goal:**
   Assist refugee and host populations by treating the most prevalent health conditions in Bidibidi Refugee Settlement, with special attention to malaria and malnutrition at the six level III health centers and through community outreaches in Bidibidi Refugee Settlement.

8. **Project Objectives:**
   - Provide health services as needed/budgeted to residents of Bidibidi Refugee Settlement and the host community in Yumbe District, West Nile sub-region.
   - Maintain adequate amounts of medicine, medical supplies, and cleaning supplies in Bidibidi Refugee Settlement.
   - Procure and transport medicine, medical supplies, and cleaning supplies to Bidibidi Refugee Settlement.
   - Support health service delivery by employing medical personnel.
   - Support security and smooth operation of health centers by employing non-medical personnel (such as data clerks, guards, and cleaners).
   - Provide compensation for the medical coordinator, as well as the medical team leader and medical officers in Bidibidi Refugee Settlement.
   - Support RMF Uganda’s Kampala office that is overseeing Bidibidi by contributing to paying rent and equipping the office with furniture, computers, internet service, stationery, cleaning supplies, a security guard, cleaners’ uniforms, etc.
9. Summary of RMF-sponsored activities carried out during the reporting period under each project objective (note any changes from original plans):

- Continued to provide high-quality health services and health outreach in Bidibidi Refugee Settlement.
- Procured and transported medicine, as well as medical, laboratory, and cleaning supplies for the health centers in Bidibidi Refugee Settlement.
- Procured and transported hospital equipment, namely beds, delivery beds, and drip stands.
- Recruited additional medical and non-medical staff to support and expand the program.
- Inducted and oriented new staff members and deployed them to begin work.
- Recruited and trained Village Health Teams (VHTs) and commissioned them to start work in their respective communities.
- Procured computers and furniture, as well as uniforms for guards and cleaners.
- Paid salaries of newly recruited staff members and top-up salaries to the medical team leaders.

10. Results and/or accomplishments achieved during this reporting period:

- We conducted deliveries in the health facilities, with no maternal deaths registered. Between December and January, we have **delivered an estimated 213 babies** in Zone 1 and Zone 4. The number of women who give birth in the community without going to a health center has been reduced tremendously.
- The project is securing the future of children through immunization programs.
- Through community outreaches, we have been able to mobilize the refugee and host communities to come for antenatal care, immunization, cancer screening, family planning, HIV/AIDS counseling, testing, and nutrition assessment.
- We have managed to identify clients who were previously on ART and enrolled them for continuity. A total of **351 people living with HIV/AIDS** are currently being served, of which 275 are refugees.
- A program for preventing mother-to-child transmission (PMTCT) of HIV has been adopted. We currently have **12 mothers enrolled** in the program.
- Early diagnosis for infants under 18 months born to HIV-positive mothers has also been started. Currently, we have **35 babies being monitored**.
- TB management is another component of the project. Currently, **34 TB clients are managed**, with routine screenings of new and existing patients.
- We have continued to conduct HIV testing and counseling (HTC) services both at the health facilities and the community level. Between December 2016 and January 2017, we have **tested 1,702 individuals for HIV**.
- As part of preventing HIV transmission, RMF has been involved in condom distribution. A total of **28,800 condoms were distributed** between December 2016 and January 2017.
- Throughout this reporting period, RMF has been able to ensure a continuous stock of medical, laboratory, and cleaning supplies to ensure people of concern receive proper treatment.
- RMF sustained a highly professional and motivated medical team and support staff to accomplish our objectives.
- RMF has been able to rent a field office in the town of Yumbe so that the administrative team can work in a permanent building, as opposed to the initial days where they worked in the shade of trees.
- Sufficient hospital equipment has been purchased. Now patients can be accommodated on hospital beds, mothers can deliver on delivery beds instead of the ground, and health facilities are kept clean because of the timely provision of cleaning materials.
- Mothers who give birth at the health centers are given dignity kits.
- RMF has improved its visibility in the settlement. Signs have been installed, and staff uniforms have been supplied, as well as T-shirts for VHTs.
- RMF has been providing respectful burial services to refugees who die in the settlement. They are buried in one place, where exhuming will be easy if loved ones wish to rebury them in their home country when peace comes.
- RMF has been able to purchase a variety testing kits for different illnesses. Thus, the number of medical tests conducted at the health facilities have increased. For instance; in addition to malaria, the health centers are testing hepatitis B, cervical cancer, HIV, HCG, etc.
- The peaceful coexistence of refugees and the host community has been promoted through RMF’s approach of providing health care to both refugees and nationals without segregation.
- RMF has proven to UNHCR, OPM, and other partners that it has outstanding capacity to provide health care in an emergency situation.
- The suspected cholera outbreak has been contained. There were no major outbreaks of disease during the reporting period.
- We have been able to open a medical screening point at the Goboro border (a point at which refugees from South Sudan are entering Uganda), where we are able to vaccinate all children under 5, provide first aid when required, and refer the critically ill to health facilities.
- Continuous medical education (CME) sessions were fully carried out during this reporting period.
- Medical outreaches were conducted as planned.
- Medical screenings of new refugees arriving at the settlement were effectively completed.

11. Impact this project has on the community (who is benefiting and how):
- The project has helped eliminate unnecessary deaths.
- Safe birthing practices have been realized in the community.
- The project has promoted peaceful coexistence, since our services benefit both refugees and nationals.
- The community feels a sense of protection, since they know that medical care is available.
- The project has boosted the economic welfare of refugees and the host community, mainly through those who have secured employment with RMF.
- The project is also benefiting the government through taxes received from staff members and local services taxes.
- The project has helped normalize life in the settlement.
- The bond of collaboration between RMF and Yumbe Hospital has been strengthened by the fact that RMF has offered a medical officer to support the hospital, especially with cases requiring surgery. This has helped RMF win the hearts of Yumbe District's local government. This has a direct bearing on promoting the peaceful coexistence refugees and the host community.
- The six health centers have maintained a high level of cleanliness.
- RMF has continued to deliver health services according to the tripartite agreement between UNHCR, OPM, and RMF. Thus, RMF is upholding its mandate as UNHCR Health Implementing Partner in Bidibidi Refugee Settlement, Yumbe District. RMF now extends health services to the Goboro border as well.

12. Number of indirect project beneficiaries (geographic coverage):
About 272,206 refugees from South Sudan and over 60,000 people in the host community

13. If applicable, please list the medical services provided:
- Maternity Services
- Laboratory Services
- TB, HIV/AIDS Treatment, Care, and Support
- Nutrition Services
- General Health Care
- Ambulance Services
- Expanded Immunization Program
- Community Outreach Services

14. Please list the most common health problems treated through this project:
- Malaria
- Respiratory Tract Infections
- Watery Diarrhea
- Urinary Tract Infections
- Fractures
### 15. Notable project challenges and obstacles:

- **Delayed release of funds from UNHCR is a great challenge, because it results in delayed implementation of activities.** Timely release of funds is critical in solving this challenge.
- **Transporting staff members is a big challenge since the project covers a large area.** Thus, coordination between locations is difficult, as is provision of follow-up visits to HIV/AIDS and chronically ill patients. Purchasing a car and motorcycles will reduce this challenge.
- **Currently, we are operating in temporary shelters.** This compromises the quality of service, because the shelters have grown old. There is need to secure permanent buildings.
- **Medicine stock-outs are another challenge.** These occur mainly when UNHCR does not deliver medicine on time. Once RMF has depleted our own stock, it becomes challenging to operate.
- **Lack of accommodation for staff remains a challenge.** Currently, staff members are sleeping in tents, which become very hot during the day and very cold during the night.
- **The entire operation is lacking proper storage facilities for medicine.** Bidibidi is a hot area, thus some medicines that need to be kept cool are difficult to stock. The pharmacy needs air conditioners.

### 16. If applicable, plans for next reporting period:

- Continue to provide medical services and outreach.
- Continue to purchase medicines, as well as medical, laboratory, and cleaning supplies for the health centers.
- Continue to pay salaries of all RMF medical and non-medical staff in Bidibidi.
- Recruit a driver and program director.

### 17. If applicable, summary of RMF-sponsored medical supply distribution and use:

Medicines, medical supplies, and laboratory supplies for the six level III health centers.

### 18. Success story(s) highlighting project impact:

Please refer to Appendices:
- Appendix A: RMF’s Kampala Office, overseeing Bidibidi Operations
- Appendix B: Hospital Items and Medical Supplies
- Appendix C: Storing Medical Supplies and Treating Patients
- Appendix D: Daily Activities at the Health Centers
- Appendix E: Visit of the American Ambassador to Bidibidi

### 19. Photos of project activities (file attachment is fine):

Please refer to Appendices:
- Appendix A: RMF’s Kampala Office, overseeing Bidibidi Operations
- Appendix B: Hospital Items and Medical Supplies
- Appendix C: Storing Medical Supplies and Treating Patients
- Appendix D: Daily Activities at the Health Centers
- Appendix E: Visit of the American Ambassador to Bidibidi

### III. Financial Information

20. Detailed summary of expenditures within each budget category as presented in your funded proposal (file attachment is fine). Please note any changes from plans.

Sent separately.
APPENDIX A: RMF’s Kampala Office, overseeing Bidibidi Operations

RMF Uganda’s Kampala office, where our Human Resource Manager, procurement officers, directors, and project coordinators are based.

Conference room
Country Director in his office

Human Resource Manager in his office

New tables and chairs to be assembled

New table and chairs assembled
APPENDIX B: Hospital Items and Medical Supplies

Some of the hospital beds procured for Bidibidi health centers

Some of the hospital mattresses purchased during the reporting period
Medicines purchased for Bidibidi health centers
General supplies purchased for Bidibidi health centers

Other hospital equipment

Truck that transported the above items to Bidibidi
APPENDIX C: Storing Medical Supplies and Treating Patients

Innovatively established RMF pharmacy at Bidibidi Refugee Settlement

RMF laboratory team carrying out rapid malaria tests
RMF staff treating a wound that has long troubled this girl; it is painful but must be done.

APPENDIX D: Daily Activities at the Health Centers

Increasing RMF visibility at the Outpatient department of Bidibidi health facilities
One of the mothers who delivered at RMF facilities in Bidibidi Refugee Settlement

Ensuring accurate records during a ward round
Mothers now bring their children to the immunization program

The isolation ward with one TB patient
Health facilities run by RMF

Many patients arrive for treatment on a daily basis.
RMF conducting medical screenings at the Goboro border point

Goboro border: Large numbers of refugees continue fleeing from South Sudan to Uganda
APPENDIX E: Visit of the American Ambassador to Bidibidi

US Ambassador to Uganda, Deborah R. Malac, has applauded RMF for our health care program in Bidibidi Refugee Settlement, Uganda. The ambassador, who visited the settlement on January 6th, 2017, had the desire to extend the compassion of the American people to refugees living in Bidibidi Refugee Settlement and to personally experience and appreciate the challenges faced by refugees on a daily basis.

RMF Medical Officer and Team Leader Dr. Alex Paul Tezita explaining the dimensions of the health care system in Kiryandongo Refugee Settlement to the envoy

US Ambassador to Uganda being received at Bidibidi Refugee Settlement with a South Sudanese traditional dance
Signature of the diplomats in RMF's visitor book