## **MHP Case Study**

Project officer's name	Edward Sentamu
Your email &cell number(in case follow up is required)	eddiese2002@yahoo.com / 0782963611
Implementing Partner	Sicklecell Association of Uganda
Location of case study (district and sub-county)	Mubende District, Nalutuntu Subcounty
Period (State the time period covered by this story)	July– September 2014
Case study title (no more than 20 words; try and use a title that catches people's attention)	Identifying a Midwife to stand in for Ms. Lwanga Lydia a Midwife from Mirembe HCII.
Background (Give brief background or context to the story)	Mirembe HCII is the only Government Health facility in Nalutuntu sub county with the In charge and a midwife. The health facility among services provided is antenatal care.
Focus (Explain the core of the case study; this might be a problem or incident or result. State which project result area the story links to.)	Ms. Lydia Lwanga was recommended by the District to go for further studies at Mengo School of Nursing. The facility was only left with a male in charge whom pregnant women felt uncomfortable to handle them for antenatal services. Through a community dialogue the women raised this issue that they needed a female midwife who could provide that service.  Result area 1 and 3
The story? (Summarise the sequence of events, who did what, any challenges faced and how they were overcome)	SAU conducted a stakeholders meeting where they held the Subcounty and the district accountable.  SAU facilitated the Mirembe HCII HUMC members and they all agreed that they needed a midwife to stand in for Ms. Lydia Lwanga who had gone for further studies.  The Subcounty and the in charge had to identify another midwife who had to stand in for her.  They approached St. Matia Mulumba a faith based health facility which accepted to provide with them a midwife for the period when Ms.Lydia will come back at the facility.
The result (what was the end result of what happened? Was it a positive outcome or a negative outcome? Remember	Yes, mothers who had stopped attending antenatal services because of no midwife have now come back for this service at Mirembe Health

to identify the sources of your information)	Center II.
The message (what message or messages do you want people to take from this case study? i.e. why did you want them to know the story?)	Holding community dialogues will help in getting real issues which are hindering health service provision in the community.  Constructive engagement with the District, Subcounty officials and health workers can yield positive results.  Health Unit Management Committee resolutions can be used as a change agent at the facility.
Lessons learned (overall, what does the case study tell us? What have we learned? What lesson do we want to share with others?Remember not to draw conclusions unless the information in the case study supports them)	We learnt that holding duty bearers accountable is very key in health service provision.
Future plans (Is anything going to change as a result of what happened?)	Yes, there will be an increase in antenatal attendances because of the new female midwife.
Quotes (remember to give details of who said what. If service providers or officials are quoted, remember to state their affiliation/job title?)	Mirembe HCII In charge said that "Now we have got a female midwife antenatal attendances which had decreased will now increase". Mr. Buyondo Frank.
Additional information (Anything else you want to mention? Is there any other information that readers might find useful about this case study or limitations as to how the idea might be utilised)	
Confidentiality / approval (Did you ask permission for the story to be shared? Have you changed any names to preserve confidentiality?)	Yes, asked permission from the In charge Mirembe Health center.  I have not changed any name.
Photos (Are you sending any photos? If so, list the file names and explain what/who each picture shows?)	No