



## MAIN GOAL - A WORLD WHERE NO WOMAN DIES GIVING LIFE



**BENEFICIARIES** - Women & Newborn  
Children



**LOCATION** - Western Uganda



**FUNDING REQUESTED** - 20,000 USD

Uganda is one of the most dangerous places in the world for expectant mothers and their newborns.

Today **16** women and **115** newborns will die due to complications in pregnancy and childbirth.

Increasing access to high quality, comprehensive, emergency obstetric care, proved by trained professionals, **can prevent these deaths.**



## PROJECT SUMMARY

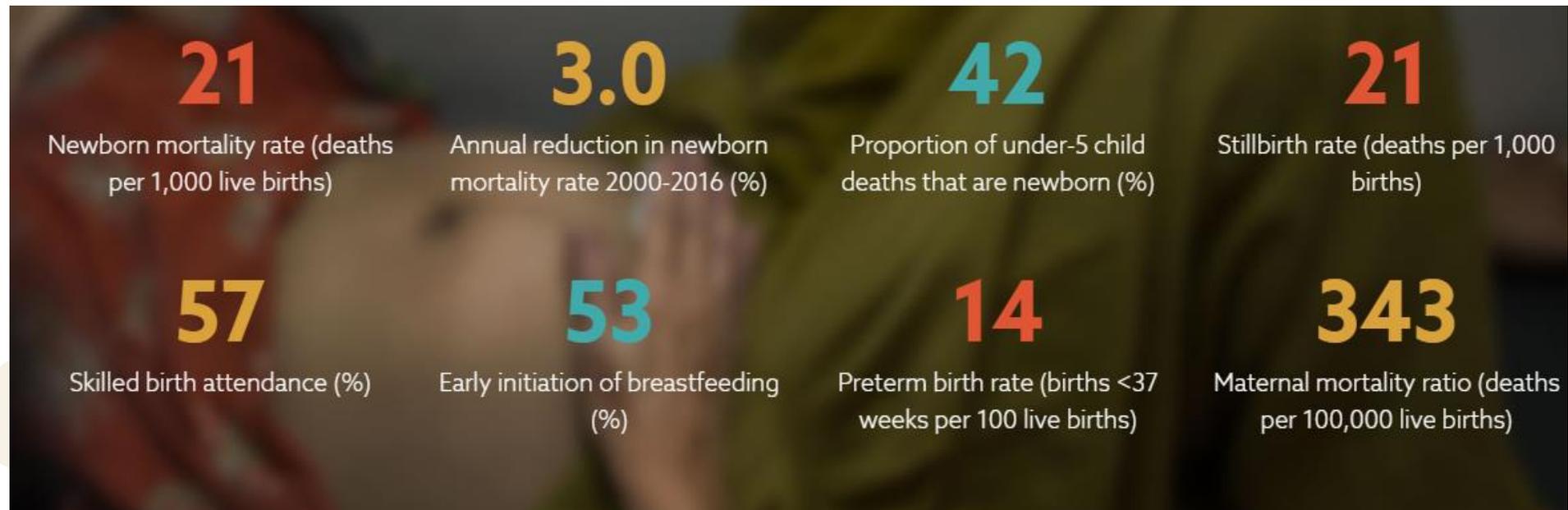
**Neonatal deaths are inextricably linked to the conditions of delivery and newborn care.** Many women die every year during pregnancy and childbirth as a result of conditions that could have been prevented or treated. Poor quality of care due to an insufficient number of skilled health workers and lack of basic equipment, as well as long distances from home to health care facilities are major deterrents to facility delivery. Women living in rural areas, those who come from the poorest families and those who are less educated, have the least access to skilled attendance at delivery.

YORGHAS Foundation is looking for funds to implement the Project called “Safe Childbirth in Rural Uganda”. Within the project organisation will distribute among local midwives and pregnant women safe delivery kits and train local birth attendants.



You are heavily pregnant, about to go into labour. You walk and walk but no one will take you in. There is no shelter, no midwife, no way to relieve your pain. Eventually you can go on no further. You settle down in a shack. What will happen to you? This may sound like a 2000-year-old story, but it is the reality of most women in Isingiro District and also other rural areas in Uganda...

In Uganda lack of access to safe maternity services contribute to a range of adverse outcomes, from delayed treatment to disability and even death. With limited resources, it is not feasible to build and staff numerous static facilities that offer or meet the need for emergency obstetric and neonatal care. Less than half the population can get to healthcare within 15 km and there is a huge lack of trained health workers. This means that if a woman goes into labour and there are complications, such as infection, haemorrhage, hypertension, sepsis, the likelihood is that she won't be able to get to a hospital- even if she does, there probably won't be a trained midwife to give her the care she needs.



## MAIN PROBLEMS



### SHORTAGES OF QUALIFIED MEDICAL STAFF



### SHORTAGES OF LIFE-SAVING EQUIPMENT AND MEDICAL

Every mother should be entitled to access to health care, regardless of economic status and location, to ensure the health, safety and well-being of herself and her baby.

**Two third** of the births in Uganda still occur at home.

**Only 57%** of births are attended by doctors, nurses, or midwives.

The deaths of newborn babies in Uganda represent a quarter of the total number of deaths of children under-five. The majority of these occur within the first week of life, mainly due to complications during pregnancy and delivery reflecting the intimate link between newborn survival and the quality of maternal care. Main causes of neonatal deaths are birth asphyxia, severe infections including tetanus and premature birth.

## YORGIAS FOUNDATION

Infections and birth defects cause <b>most neonatal deaths</b> .	Skilled health workers lead to a <b>54%</b> reduction in mortality at birth.	An estimated <b>287,000</b> women die every year during pregnancy and childbirth.	<b>2.5 million</b> children die in the first month of life — approximately <b>7 000</b> newborn deaths every day with about 1 million dying on the first day.
In developing countries, complications from pregnancy and childbirth are the <b>leading cause</b> of deaths among girls 15-19.	Approximately <b>800 women die everyday</b> from preventable causes related to pregnancy and childbirth.	<b>99%</b> of all maternal death occur in developing countries.	Women who receive midwife-led continuity of care provided by professional midwives, educated and regulated to international standards, are <b>16%</b> less likely to lose their baby.

## OUR SOLUTION



**We will train healthcare providers how to carry out a safe childbirth.**



**We will equip health centres providing mothers high quality, comprehensive and respectful care.**



**We will distribute safe delivery kits among mothers.**

# PROJECT TIMELINE



SELECTION OF BENEFICIARIES



AGREEMENT SIGN-OFFS, PROJECT PREPARATION



PURCHASE OF DELIVERY KITS, DOCUMENTS AND CARGO PREPARATION



CARGO FREIGHT, CLEARANCE, OVERLAND TRANSPORT TO END DESTINATIONS



ON-SITE TEAM MOBILISATION, VILLAGE APPOINTMENT, PROJECT ANNOUNCEMENT



DISTRIBUTION OF DELIVERY KITS TO MIDWIFES AND PREGNANT WOMEN



CAPACITY BUILDING & MIDWIFES TRAINING



FOLLOW-UP VISITS AT VILLAGE LEVEL, MONITORING AND EVALUATION. FINAL REPORTING TO A DONOR





## BENEFICIARIES

Direct beneficiaries are pregnant women. Most of them come from ultra-poor families that cannot afford basic amenities for a safe delivery and care of the child. **Pregnant women and their babies will be beneficiaries of the project.**

We focus on women who have access to hospitals but can't afford simple delivery kits to assure safe and clean childbirth. As a result, many mothers fail to give birth in health facilities because they are unable to buy the basic maternity necessities such as gloves, blades, cotton wool, sanitary pads and soap. Access to birthing kits will improve on the often strained relationship between health workers and expectant mothers and encourage more women to give birth in health facilities.

Health care providers are also beneficiaries of this project as they will receive trainings.

## LOCATION OF THE PROJECT

The project will be implemented in Western Uganda. The project will target the five districts of Mbarara, Isingiro, Ibanda, Sheema and Bushenyi. Western Region has the lowest skilled attendant at birth of 49.3% compared to 50.2% in Northern Uganda, 72.2% for central and 58.1% in eastern Uganda. Western region again has the lowest institutional delivery of 48.8 % together with Northern region behind eastern at 57.7% and central 71.8 percent. The selected districts have an average of 21,285 teenage mothers giving birth every year (UDHS, 2016). The project will target rural health centres moest especially Health Centres IIIs that are often affected by acue lack of medical supplies.



## LIFE- SAVING SOLUTIONS

### Six Cleans by World Health Organization



Hygienic behaviours during childbirth and during the early postnatal period are variably defined. In this project we propose a solution that helps to create a clean birth and postnatal care practices in accordance with World Health Organisation's (WHO) "six cleans" - hand washing of birth attendant before birth, clean birth surface, clean perineum, cutting of the umbilical cord using a clean implement, clean cord tie, and a clean cloth for drying. These practices may be influenced by reductions in neonatal mortality.



## MAMA KIT

A Mama Kit contains all the tools needed to provide a clean and safe delivery. It allows women to give birth in a hospital, clinic or at home. Mama Kit can greatly prevent a risk of infection during labour and reduce the number of women and babies deaths that can occur during childbirth.



## PROJECT OBJECTIVES, OUTCOMES AND INDICATORS

Organization will serve to achieve the following results:

**Improvement of infrastructure and equipping of medical entities, increasing the qualifications of medical personnel and providing medical care to mothers and newborns in Uganda.**



We are a team of experienced passionates whose desire is to help the most vulnerable people all over the world. We've been cooperating for years with partners in Africa and the Middle East.

**We save pregnant women, mothers and newborns from deaths caused by poverty, lack of hygiene, access to proper healthcare or education in developing countries.**

We defend women's, girls' and children's rights not only to safe childbirth and proper healthcare, but also to education, personal development and a dignified life. We are everywhere where they need our help.

**HELP US END MATERNAL DEATHS!**

**DONATE:**

**89160014621879328920000002 USD**

**[www.yorghas.org](http://www.yorghas.org)**

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**A donation today is  
an investment in life-saving  
equipment and life-changing  
care.**

