OUTREACH MEDICAL PROGRAMME IN TROPICAL AFRICA – UniKL RCMP EXPERIENCE

‘IF THEY CAN’T COME WE FOLLOW THEM’

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INTRODUCTION

• Outreach programs in the tropical Africa are helping many rural under privilege people.
• For those who cannot afford the transport cost or social reason or even ignorance about the nature of their illnesses.
For those whose health facility is just too far, the medical outreach program is a useful shortcut for them.
Why Outreach programe?

- Shortage of health personnel is one of the main problems.
- In general Sub-Saharan Africa has only 4% of health workers but 25% of Global Burden of Disease (GBD). Compared with America which has 37% of health workers but only 10% of GBD. (The World Health Report 2006 by WHO)
• Shortage of health personnel from Africa has been attributed mainly due to migration to Western countries including USA.

• This alone has affected the quality of health delivery.
• Just like the former WHO director noted. “it takes a considerable investment of time and money to train health workers,” and when the latter emigrate, “there is a loss of hope and a loss of years of investment”

Typically in many developing countries, the outreach program involve a multidisciplinary team, although this is not a rule.
This is a typical chart of one of the many Outreach clinics in Tanzania (344 patients were attended).

<table>
<thead>
<tr>
<th>EYES</th>
<th>ENT</th>
<th>DIABETIC</th>
<th>HYPERTENSION</th>
<th>OTHER DISEASES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cataract</td>
<td>12</td>
<td>Old cases: 0</td>
<td>Old cases: 15</td>
<td>99</td>
</tr>
<tr>
<td>Presbyopia</td>
<td>53</td>
<td>0</td>
<td>New cases: 1</td>
<td>8</td>
</tr>
<tr>
<td>Retina disease</td>
<td>0</td>
<td>Wax impaction</td>
<td></td>
<td>DENTAL</td>
</tr>
<tr>
<td>Maculopathy</td>
<td>2</td>
<td>SNHL</td>
<td>Dental carries</td>
<td>27</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>18</td>
<td>Otitis external</td>
<td>Tooth extraction</td>
<td>23</td>
</tr>
<tr>
<td>Ptergium</td>
<td>18</td>
<td>LPR</td>
<td>Gingivitis/Periodontitis</td>
<td>5</td>
</tr>
<tr>
<td>Short-sightedness</td>
<td>13</td>
<td>Tinnitus</td>
<td>Dental Abscess</td>
<td>0</td>
</tr>
<tr>
<td>Long-sightedness</td>
<td>19</td>
<td>Allergic rhinitis</td>
<td>Neoplasia</td>
<td>0</td>
</tr>
<tr>
<td>Glaucoma</td>
<td>3</td>
<td>Tonsillitis</td>
<td>Referral</td>
<td>0</td>
</tr>
<tr>
<td>Others</td>
<td>31</td>
<td>Others 21</td>
<td>Others</td>
<td>0</td>
</tr>
</tbody>
</table>

45 spectacles were dispensed to the patients
• The main objectives of the outreach programs is to provide health services to the rural communities.
• Obviously some may need to be referred.
The lucky ones will go home happy being able to read again after a one stop service.
Our students did their part
• For them it was also a learning opportunity.
And experience
In fact the outreach program has provided a hands on platform to our students.
Even students from as far as Europe and USA had their share.
CHALLENGES

• Of cause to go for an outreach program in tropical Africa is not always an easy ride.
• Neither a comfortable walking
• Sometimes a muddy drive
• The kind of disease conditions seen are not as straight forward as we used to see.
But we were told not to give hope in helping others.
From the very young
• To the very old
• When we get stuck we should be ready to push
At the end of the day

- Some of the chronic patients were successfully treated or referred to the tertiary centers.
- Newly diagnosed patients were started on treatment without delay.
- Learning / hands on experience especially for students.
CONCLUSION

In a nutshell;
Outreach program in tropical Africa may not be comfortable to some.
CONCLUSION

• You might have to cross the sea channel in an adventurous way.
CONCLUSION

• Plus ‘not your usual way of walking’.
CONCLUSION

• However the smiling faces of disadvantaged/underserved people makes one compels to go back again and again.
• This is because for a job well done, the results are priceless
To some this will have an everlasting impact.
And nothing else matter
• At the end of the day, everybody is a winner; the patients were attended; the health workers were happy and satisfied to have helped people and the students were happy to have learned a thing or two.
• Of course to some of the local children it was part of fun.
• It is all about outreach program which was voluntarily started, planned and executed all by volunteers, after all;

• “CHOICE IS BETTER THAN COMPULSION”

THANK YOU
This presentation is dedicated to our students, Zanzibar Outreach program and all medical volunteers all over the world for their continuous dedications towards underserved communities.