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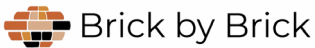


**Project name**  
**Mama Rescue**

**Country**  
**Uganda**



**Implemented by**



**Budget**

**350.000 €**

**Duration**

**12/2019 – 11/2022**

**Contribution to SDGs**

**3** GOOD HEALTH AND WELL-BEING



**5** GENDER EQUALITY



**Implemented by**



**Financed by**



## CHALLENGES/CONTEXT

In Uganda, 7000 women and 45,000 newborns die annually due to complications of pregnancy and childbirth. 90% of these deaths are due to 3 delays:

- Delay in decision to seek care
- Delay in reaching care due
- Delay in receiving adequate health care

In certain communities, women often travel long distances to reach a health center. They are forced to deliver in villages without a skilled attendant due to lack of funds for transport or the poor quality of the roads. Therefore, Mama Rescue intends to address the second delay, reducing the time to access quality care.

## DIGITAL SOLUTION/APPROACH



The Mama Rescue Project is a simple automated mobile-phone platform that provides vouchers enabling women to be transported by local motorcycle and taxi drivers to deliver in health centers.

We partner with local drivers who live close by our laboring mothers, creating a rapid response system between village and health centers, as well as between the health center and referral hospital when needed. Our system relies on easy to use mobile phone technology that improves communication between drivers, midwives and doctors.



### INITIAL TRAININGS

With financial support from Wehubit, we carried out initial trainings of 155 District Officials, 30 Religious leaders and 97 Ambassadors.

### PRE-TESTED THE TRANSPORT SYSTEM

With financial support from Wehubit, we piloted our digital solution for both components and pre-tested our tools.

### BASELINE SURVEY

We could complete a baseline survey: 74% of the respondents who reported to have complications before or during labor experienced a delay in reaching care due.

## EXPECTED ACHIEVEMENTS

The project features four objectives:

- 1) Increase the percentage of births that take place in health facilities from 79.7% to 90% of all births;
- 2) Increase the percentage of women with complications of labor who are referred from lower level facilities to higher level facilities from 5% to 15%;
- 3) Increase awareness for maternal, newborn and child health services by 50%, leading to increased demand and an increase in skilled attendance at birth;
- 4) Improve quality of maternal and newborn care.

125 MOTORCYCLE  
DRIVERS AND  
15 AUTOMOBILE  
DRIVERS RECRUITED

155 DISTRICT OFFICIALS,  
30 RELIGIOUS LEADERS  
AND 97 COMMUNITY  
HEALTH WORKERS  
TRAINED

## LESSONS LEARNED

1. The process of building partnerships requires to be persistent while focusing on the ultimate goal of the project. Building partnerships with MTN, the leader telecom company in Uganda enabled Brick by Brick to pay for the Uganda Communications Annual Fees.
2. The project experienced delays arising out of the Covid-19 pandemic lockdown. Thanks to a strong partnership with the district, the project obtained permission on movements to conduct the piloting and pre-testing phase of the transport system and tools.

## WOULD YOU LIKE TO KNOW MORE?



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