

Rotary



# Rotarian Peace Projects Incubator

## Project Proposal Form

<b>Rotarian Peace Projects Incubator's Thematic Area</b>	<b>Health and Peace</b>
<b>Rotary Focus Area</b>	<b>Disease Prevention and Treatment</b>
<b>Contact:</b> Contact person within your group (Name and email)	<b>Eva Czermak</b> <b>Eva.czermak@gmx.at</b>
<b>Project Title:</b> Provide a full title (and acronym if any)	<b>Ni Abacu</b> <b>Prevention and treatment of diabetes, hypertension and cervical carcinoma and help to people suffering from these</b>
<b>Project Partners and Participating Organisations:</b> List all your project partner organisations, including participating Rotary clubs and districts if any	<b>Dr. Louis Mujawamariya, MD</b> Vice president of the Fondation Ubuzima – la Vie Current position: head of regional blood transfusion center of Gitega region for the ministry of health  <b>Jean-Pierre Ndayirukiye, MD,MPH</b> President RC Gitega Rukinzo 2020-2021 Current position: Executive Director of IPROSARUDE (Initiative for Promotion of Rural Health and Development )  <b>Eva Czermak, MD, E.MA</b> Rotary Peace fellow Current position: head of Ambulatorium Caritas Marienambulanz, Graz, Austria
<b>Geographical Scope</b>	Gitega and district Buhiga, province Karusi
<b>Summary:</b> Please provide a concise summary with a maximum of 500 words outlining the project and explaining the community needs your project will address and how these needs were identified.  Ensure that you include what your project aims to achieve (objective) and how (method/procedure). What will be the main outcomes?  Explain in a few sentences how you will incorporate the objective of sustainability into your project.	<p>In Burundi, 17% of the inhabitants cannot afford medical treatment at all, 81,5% need to endebt themselves to get treatment. Diabates is the third main cause for hospitalisation in the University Clinic in Kamenge and reason for 30% of amputations. Hypertension often aggravates clinical outcomesgoes. A study by IOM showed that 34 % of all cancer deaths in Burundi are due to cervical cancer. 70% of women consult their doctors in a stage when the cancer is already inoperable. A study by IPROSARUDE showed that only 53 % of women knew the word cancer, and 6 % HPV.</p> <p>The overall mortality of those mentioned diseases remains low (diabetes 1%, cardiovascar disease 11 %, cancer 5%), and international funding goes mostly into the sector of communicable diseases. Chronic, non communicable diseases have been taken into the national health strategy, but remain underfunded.</p> <p>In addition, it has been observed by the two partnering doctors themselves that people suffering these diseases often feel as burdens to their family, knowing the money they would cost them, and therefore remain at home , untreated and somewhat stigmatized by their own families.</p>

	<p>The Buhira region has been chosen because it is highly densely populated and in terms of medical staff has the second lowest numbers in Burundi. Gitega has been chosen for the cervical cancer projects because most of the cancer cases have been detected there and because of an existing cooperation of three clinics involved in the project.</p> <p>The needs were thus identified by two doctors working in the public health sector in Burundi, and are based on facts established in several studies.</p> <p>Objectives:</p> <ul style="list-style-type: none"> <li>• Sensibilisation: first medical assistants are trained in facts about the diseases and in testing methods. Then campaigns of mass sensibilisation are held (gatherings, radio, leaflets etc.)</li> <li>• Testing: In cooperation with local health centers people are encouraged for testing.</li> <li>• Treatment: for all chronic diseases better treatment should be made possible. For cervical cancer, this would be in provision of equipment of crytherapie, cauterisation, better imaging.</li> <li>• Home visits and accompaniment to locally unavailable treatment: in the rural areas by a team of volunteers to support those people sick / unable to move who are at home and under distress.</li> <li>• Research: <ul style="list-style-type: none"> <li>○ Acceptance of project / knowledge</li> <li>○ Incidence of chronic diseases, co-occurrence of cervical cancer with HIV</li> <li>○ Number of people cured / health status stabilized</li> </ul> </li> </ul> <p>The main outcomes will be broader knowledge in the population about risk factors, a higher rate of testing as well as a higher rate of cured women (cervical cancer). Very desperate people unable to leave their homes will get some relief. Data will be gathered that can be used for further planning.</p> <p>As for sustainability, the materials designed for the sensibilisation campaigns can be re-used and spread to other areas. Knowledge established about chronic diseases leads to a process where more testing becomes the norm and thus perpetuates. There are hopes that later other sponsors will be found and that the government might take over successful parts of the project and transfer it to other regions.</p>
<p><b>Beneficiaries:</b> Who are the beneficiares? Please include the estimated number of direct beneficiaries</p>	<p>For cervical carcinoma: 70.000 women sensibilized, 7000 tested, 650 treated For diabetes and hypertension no figures yet.</p>