

FOUNTAIN OF PEACE CHILDREN'S FOUNDATION.
MOTHERS MATTER IN CHILDBIRTH PROJECT.
MMC.



Andrew, Marie and Madam Peace handing over medical equipment to Bufunjo HCIII Staff

END OF YEAR REPORT 2025.

Prepared by: Kahuma Hassan

1. Introduction

The Mothers Matter in Childbirth (MMC) project was launched in October 2023 with the primary goal of reducing maternal and neonatal mortality in Kanyegaramire Sub-County, Kyenjojo District, by addressing the **Three Delays** that contribute to preventable deaths:

1. **Delay in deciding to seek care** – influenced by cultural beliefs, lack of awareness, and reliance on Traditional Birth Attendants (TBAs).
2. **Delay in reaching a health facility** – due to transportation challenges, poor roads, and distance.
3. **Delay in receiving adequate care** – resulting from understaffed facilities, lack of equipment, and insufficient emergency response systems.

The year 2025 has been a milestone period for the Mothers Matter in Childbirth (MMC) project. Building on the strong foundation laid since its inception in October 2023, the project continued to make significant strides in reducing maternal and neonatal mortality in Kanyegaramire Sub-County and expanding its reach to neighboring communities. Throughout the year, the project maintained a **100% survival rate** for all mothers and newborns under its care, with over 1,000 safe deliveries achieved cumulatively by 25th December 2025.

Key achievements include the successful launch of Antenatal and Immunization Outreaches, strengthened partnerships with district health authorities, enhanced capacity of frontline health workers, and the impactful visit of Dr. Andrew, Director of Medical Services, to Bufunjo Health Center III. Despite persistent challenges such as adverse weather, infrastructure gaps, and the influence of Traditional Birth Attendants (TBAs), the project adapted through community engagement, data-driven strategies, and strategic expansions.

The project built upon its foundational successes, expanded its outreach, deepened stakeholder engagement, and introduced innovative service delivery models to ensure that every mother and newborn receives timely, skilled, and dignified care.

This report consolidates activities, outcomes, challenges, and lessons learned across all quarters of 2025, providing a holistic view of the project's impact and future direction.

2. Annual Performance Highlights

2.1 Delivery Statistics (Cumulative from Oct 2023 – Dec 2025)

MONTH	NUMBER OF MOTHERS THAT GAVE BIRTH IN BUFUNJO HCIII	NUMBER OF MOTHERS REFERRED TO KYENJOJO BY AMBULANCE	NUMBER OF MOTHERS REFERRED TO KYENJOJO HOSP BY MOTOR BIKE	MOTHERS	BABIES
Oct-23	8	2	0	10	10
Nov-23	25	2	3	30	31
Dec-23	31	2	1	34	34
Jan-24	31	1	6	38	38
Feb-24	36	0	12	48	49
Mar-24	40	0	6	46	46
Apr-24	40	0	8	48	48
May-24	38	0	7	45	45
Jun-24	36	0	5	41	41
Jul-24	30	0	10	40	40
Aug-24	37	0	7	44	44
Sep-24	40	0	9	49	49
Oct-24	47	0	6	53	53
Nov-24	40	0	7	47	47
Dec-24	32	0	6	38	38
Jan-25	33	0	6	39	39
Feb-25	32	0	12	44	45
Mar-25	34	0	7	41	41
Apr-25	39	1	5	45	45
May-25	37	0	7	44	45
Jun-25	41	0	7	48	48
Jul-25	44	0	5	49	49
Sep-25	40	1	2	43	43
Aug-25	43	0	5	48	48
Oct-25	31	1	7	39	39
Nov-25	34	0	6	40	40
Dec-25	32	0	7	39	39
TOTAL	951	10	169	1130	1134

Summary

Indicator	Total
Mothers delivered at Bufunjo HCIII	951
Mothers referred to Kyenjojo Hospital	179
Total Mothers supported	1,130
Total Babies born safely	1,134
Maternal deaths recorded	0
Neonatal deaths recorded	0

Note: Data includes all months up to December 2025.

3. Key Achievements in 2025

3.1 Launch of Antenatal and Immunization Outreaches

In January 2025, in response to over 20 mothers arriving at Bufunjo HCIII without completing the recommended six ANC visits, MMC launched ANC/Immunization Outreaches across all 26 villages of Kanyegaramire.

The official launch was held on **31st January 2025** in Nyamicu Village, attended by over 200 mothers, local leaders, and the LCV Chairperson of Kyenjojo District. FOP UK donated 2 tents, two examination tables, ward screens, and 50 plastic chairs to support mobile ANC services. This intervention drastically reduced the number of mothers reporting for delivery without prior ANC. The project expanded its interventions to include mobile antenatal clinics, community sensitization drives, and strengthened referral systems, while maintaining its core service of providing free transportation and delivery kits to expectant mothers.



3.2 Strengthened Health System Partnerships

- Continued collaboration with Kyenjojo District Health Office.
- Engagement with the new District Health Officer (DHO) and Principal Nursing Officer.
- Local government appointed an additional midwife at Bufunjo HCIII and pledged to upgrade the facility to HCIV.

3.3 Capacity Building and Equipment Support

- Training of six skilled birth attendants in newborn resuscitation and emergency obstetric care.
- Donation of critical medical equipment to Bufunjo HCIII by Dr. Andrew in November, including:
 - Delivery beds
 - Suction machine
 - Anti-shock garments
 - Sonicaid device, delivery kit
 - MVA set and pelvic model

3.4 Community Engagement and Empowerment

- Provision of gum boots to all active VHTs to ensure safe home visits during rainy seasons.
- Review meetings held with VHTs, boda-boda riders, and CHEWs to strengthen referral networks.
- Reflector jackets provided to boda-boda riders for safer nighttime referrals.



3.5 Expansion Planning

- Plans initiated to pilot Mobile ANC Clinics in Batalika Sub-County in partnership with Nyankwanzi HCIII.
- District Health Office endorsed phased expansion pending final evaluation of MMC's three-year impact.

4. Challenges Encountered

1. Weather and Transport Delays: Heavy rains affected road access, delaying referrals and ANC outreach schedules.
2. Persistent Use of TBAs: Approximately 10% of mothers still opted for traditional birth attendants, leading to late referrals.
3. Infrastructure Gaps: Bufunjo HCIII faces water shortages, poor sanitation, and inadequate staff quarters.
4. Uneven Service Distribution: Monthly ANC outreaches were insufficient to cover all four parishes equally.

5. Strategies for Improvement

- Increase ANC outreach frequency and rotate teams to ensure equitable coverage.
- Intensify community sensitization through local leaders, male involvement programs, and survivor testimonies.
- Strengthen data collection to analyze TBA usage patterns and inform targeted interventions.
- Advocate for infrastructure improvements in collaboration with district authorities.

6. Looking Ahead: Focus for 2026

- Scale-up Mobile ANC Clinics in Batalika Sub-County.
- Construction of a 4-stance VIP latrine at Bufunjo Health Center III to address the sanitation problems that were identified during Andrew's visit.
- Strengthen community-led monitoring systems with VHTs and CHEWs.
- Enhance digital data tracking for real-time monitoring and reporting.

7. Acknowledgement

Our collaboration with the Kyenjojo District Health Office continues to provide a strong institutional backbone for the project. At the service level, the dedicated teams at Bufunjo Health Center III and Kyenjojo General Hospital consistently translate guidelines into compassionate, lifesaving care, demonstrating both professionalism and humanity in their work.

The ability of the project to reach families at the household level is driven by the tireless efforts of the Village Health Teams and Community Health Extension Workers, who serve as trusted links between the health system and the community. Complementing this effort are the boda-boda riders, whose determination and quick response create a vital connection between homes and health facilities, often turning emergency situations into successful outcomes.

Providing overall direction and strategic oversight is the FOP Uganda Directorate (FOP UG). Through strong leadership and long-term vision, they ensure that project activities are well coordinated, effective, and built to endure beyond immediate interventions.

Central to all these accomplishments is the invaluable support from our funding partners, FOP UK and FOP NZ. Their confidence in the project and continued financial commitment make every critical intervention possible. The improvements in maternal and newborn outcomes are a clear testament to their dedication to advancing safe childbirth. We extend our sincere appreciation for their unwavering partnership and support.

Together, we are not only saving lives but also building a sustainable model for maternal and newborn health in hard-to-reach communities.

8. Conclusion

The year 2025 has reinforced the MMC project's viability as a community-integrated, data-informed, and partnership-driven initiative. With zero maternal or neonatal deaths among supported mothers, the project stands as a testament to what is possible when communities, health systems, and donors align around a shared mission. As we move into 2026, we remain committed to learning, adapting, and expanding our impact so that every mother and child can experience safe childbirth.

Merry Christmas

