

Western University

Scholarship@Western

---

Africa Western Collaborations Day 2020  
Abstracts

Africa Western Collaborations Day

---

2020

## Monitoring Preeclampsia in Rural Uganda Through Community Health Workers Using the MiniPIERS Model

Amina Abib Osman

University of Western Ontario, aosman57@uwo.ca

Josephine Mariz De Leon

University of Western Ontario, jdeleon6@uwo.ca

Ayah Karra Aly

University of Western Ontario, akarraal@uwo.ca

Follow this and additional works at: [https://ir.lib.uwo.ca/awc\\_abstracts](https://ir.lib.uwo.ca/awc_abstracts)



Part of the [Public Health Commons](#)

---

### Citation of this paper:

Osman, Amina Abib; De Leon, Josephine Mariz; and Karra Aly, Ayah, "Monitoring Preeclampsia in Rural Uganda Through Community Health Workers Using the MiniPIERS Model" (2020). *Africa Western Collaborations Day 2020 Abstracts*. 42.

[https://ir.lib.uwo.ca/awc\\_abstracts/42](https://ir.lib.uwo.ca/awc_abstracts/42)

Grant Proposal Title: Monitoring Preeclampsia in Rural Uganda Through Community Health Workers Using the MiniPIERS Model

Authors: Josephine Mariz De Leon, Ayah Karra Aly, and Amina Abib Osman

Abstract

Pre-eclampsia, a hypertensive pregnancy disorder, is the third leading cause of maternal mortality in Uganda. This is partly due to the improper monitoring, shortages of healthcare professionals, and a lack of resources, placing stress on Uganda's healthcare system. We aim to disseminate the already established miniPIERS model and utilize the concept of task-shifting, to reduce maternal mortality through proper monitoring of pre-eclampsia affected women. Due to the shortages in diagnostic tools necessary for identifying pre-eclampsia, we chose to implement our innovative strategy in the Lira sub-county, situated in Northern Uganda. The aim is to increase the number of severe cases referred to tertiary hospitals by working alongside Village Health Teams (VHTs) and Community Health Extension Workers (CHEWs). Data will be collected using the miniPIERS toolkit to ensure that at-risk mothers receive appropriate care and monitoring. We hope to decrease the burden on the Ugandan healthcare system, by adopting an effective referral system that reduces unnecessary healthcare visits. Our strategic recommendation is conducted in four phases: engagement of stakeholders, education, and implementation, monitoring of workers, and lastly, follow-up and coaching. Our goal is to decrease the rate of maternal mortality in Uganda attributed to hypertensive disorders. Therefore, increasing GDP, the empowerment of women, communities, and positive maternal health outcomes. We aim to make our innovation sustainable by ensuring the projected costs of maintenance and implementation are minimal. There are many potential partnerships that can be utilized in the process of subsidizing costs and resources. Nevertheless, ongoing evaluations and community engagement will help improve the model and tailor it to suit the needs of the Lira Sub-county. Furthermore, using the miniPIERS toolkit and training of VHTs can be an effective precursor to the Pre-eclampsia On the Move app, which can facilitate data transmission. Although simple, the utilization of VHTs and the miniPIERS toolkit could result in a significant impact that saves mothers and their unborn children.