

## **Senior Postdoc Fellowship für Dr. David Kyaddondo: Mobilizing Social and Medical Resources for Health: Consumer practices in a composite medical care system in Uganda**

Initiative: Wissen für morgen – Kooperative Forschungsvorhaben im subsaharischen Afrika (beendet)

Ausschreibung: Postdoctoral Fellowships Social Sciences

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Laufzeit: 3 Jahre

How do health consumers and providers make their way through a fragmented system of medical care? Uganda's formal system involves public institutions, private for profit providers, and non-profit providers. Since the larger health system operates under conditions of extreme scarcity, basic therapeutic resources are scattered across multiple parts of this hybrid system in a way that makes it difficult to achieve the rational organization of care and referral. Both patients and health workers see the need to combine resources in multiple institutional locations: a testing technology here, an operating theater there, a physician with special skills in a third place and (from the patient's point of view) a trusted health worker-intermediary at yet another location. The system as a whole therefore includes, as constitutive elements, sets of practices and resources that are not on the organizational charts of any one health care institution. These practices and resources, while informal, are not unstructured. The purpose of this research project is to explore the role of these practices within a fragmented health system, with an emphasis on the practices of patients and their supporters, and on forms of influence that revolve around what we call social capital. The project will investigate access to health care in formal health units (public, private for profit and private not for profit) and in informal settings (households). It will ask about the different resources for HIV and AIDS care needed by consumers, the practices of how these are mobilized and to which extent they are attained. Furthermore, the project will establish an account of the practices in use of different resources in the therapeutic management of HIV/AIDS. HIV and AIDS is selected as a case because it is highly prevalent in Uganda, and since a high level of resources has been provided relative to other diseases. Thus, it will illustrate in an extreme form patterns of resource allocation and patient decision-making.

### **Projektbeteiligte**

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