#### **ABSTRACT**

# **Background:**

In Uganda, community committees for example VHTs committees have worked towards reducing mortality and morbidity (Uganda Program Brochure-Health in Uganda, 2012).

#### **General Objective:**

To assess the community attitude towards community committees in improving quality of health care in North Rukiga ADP in Kabale District.

# Methodology:

A cross-sectional study was used with qualitative and quantitative approaches of data collection from a sample of 125 community beneficiaries of community committees where simple random sampling and census sampling methods were used to community beneficiaries and key informant respectively. A semi-structured questionnaire-guide, interview-guide and FGD-guide were used to obtain data. Quantitative and qualitative data were analyzed using the Statistical Package for Social Sciences (SPSS) version 20.0 and thematic content analysis respectively.

# **Results:**

Training, drug supply, support supervision, community mobilization, monitoring of health services, immunization, home visits, counseling activities were conducted; At multivariate analysis, training (p-values: 0.004; 95%, OR:1.04, CI: 1.06–2.01), drug supply (p-values: 0.001; 95%, OR: 2.05, CI:1.94–2.09), home visit (p-values: 0.009; 95%, OR: 1.04, CI:1.01–2.10), satisfaction with health services (p-values: 0.002; 95%, OR:1.11, CI:1.01–2.96), adequate drug supply (p-values: 0.006; 95%, OR: 1.84, CI:1.70–2.98), usefulness of community committees (p-values: 0.003; 95%, OR: 2.95, CI:1.07-2.98), monitoring of health care services (p-values: 0.005; 95%, OR: 3.54, CI: 2.11-3.94) and cooperation (p-values: 0.008; 95%, OR:2.06, CI:1.74-2.09) were related to improving quality of health care among respondents. The performance of community committees was fair revealed by 73(69.5%), 63(60.0%) of the beneficiaries were satisfied with community committees, a positive attitude was held by

beneficiaries of community committees. The most faced challenges by community committees were lack of clean and safe water 23(21.9%), drug shortage at health facilities 18(17.1%), infections and diseases outbreak 13(12.4%), food shortage/malnutrition 10(9.5%) and low community members response to community committees' activities.

# **Conclusion:**

Social, health/medical and administrative related activities including; training, drug supply, support supervision, community mobilization, monitoring of health services, immunization, home visits counseling of patients and treatment were conducted by community committees to improve quality health care. The performance of community committees was fair. A positive attitude was held by beneficiaries of community committees. However, medical/health related challenges like drug stock out and increased diseases and epidemics among people triggered a negative attitude towards community committees and their activities and lack of clean and safe water, drug shortage at health facilities, limited funding, poor road/communication network, outbreak of infections and diseases, food shortage/malnutrition and low community members response to community committees' activities were the most challenges affecting improvement of quality health care.

#### **Recommendations:**

Community committees in North Rukiga should conduct regular performance assessments for their staff/health workers so that gaps are identified and bridged to improve their performance. The assessment will help to understand areas of weakness, strength and as well suggest ways to improving their programs.