Global Health Program

UGANDA
PARTICIPANT GUIDE

April 2018
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Dear Participants,

On behalf of the Global Health Office of Makerere University, I warmly welcome you to Uganda, the Pearl of Africa! During this clinical exchange program you will be exposed to the health care and medical education systems of Uganda. We will strive to provide you with the best possible educational experience, enriched with the cultural traditions of our region.

In this guide you will find all the necessary information about the program. Please take time to read through it carefully. Should you have any questions or concerns, either myself, your Local Site Director, or the UVM/WCHN Global Health Office members, are always at your disposal for assistance.

We hope that you enjoy your clinical rotation here and return home with great memories and knowledge.

Isaac Okullo, MD

Professor, Deputy Principal
College of Health Sciences, Makerere University, Uganda
Mubuuze ko!

Welcome to Uganda, the Pearl of Africa! Situated on the Equator, Uganda enjoys a mild climate with beautiful and varied scenery – from lakesides to tall mountains, with jungle in between. Uganda is also home to some of the most welcoming people you will ever meet.

During your global health rotation in Uganda, you will learn from health care professionals in rural, peri-urban, and urban areas. The opportunities for global health learning in Uganda are staggering. Depending on your placement, you will have the opportunity to participate in patient care in primary care clinics and village hospitals, as well as specialty clinics and referral-based inpatient care at Mulago National Referral Hospital.

Additionally, you will have the opportunity to learn about Ugandan history and culture through your homestay family, as well as by visiting attractions throughout the country. Luganda language classes are also available upon request. I hope that you will take full advantage of all Uganda has to offer.

In this guide, you will find information to help you prepare for your rotation, key contacts within Uganda, policies and procedures for your rotation, and a brief introduction to the culture and history of Uganda. Please keep this guide close at hand while traveling and use it to supplement your pre-departure training. Do not hesitate to contact me with questions or concerns.

I hope you have a thought-provoking, rewarding, and enjoyable rotation in Uganda!

Majid Sadigh, MD

Director of Global Health Program,
University of Vermont Larner College of Medicine and Western Connecticut Health Network
Christian J. Trefz Family Endowed Chair in Global Health, WCHN
Key List of Contacts

U.S. Embassy Kampala
1577 Ggaba Road
Kampala, Uganda
Tel: 256-414-259791
Fax: 256-414-259794
Emergency Services (callers outside Uganda): 256 414 306 001 / 256 312 306 001
Emergency Services (callers within Uganda): 0414 306 001 / 0312 306 001 / 0414 259 791
Email: KampalaUSCitizen@state.gov
Website: https://ug.usembassy.gov/

International SOS Assistance Center
Nairobi Office
Eden Square, 7th Floor, Block 1
Chiromo Road, Westlands
Nairobi, Kenya
Local Tel: +254 20 3673 692
International Tel: +1 215 942 8226

International Coordination Office
Makerere University College of Health Sciences
Mulago Hill, Mulago
Kampala City, Uganda
Email: internationaloffice@chs.mak.ac.ug
Website: http://chs.mak.ac.ug/Welcome%20to%20the%20International%20Coordination%20Office

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About Uganda

Uganda is located in East Africa. It is bordered by the Democratic Republic of Congo, Kenya, Rwanda, South Sudan, and Tanzania. Uganda achieved independence from the United Kingdom in 1962. It has 112 districts, and Kampala, its capital city, sits close to Lake Victoria.

According to the 2014 census, Uganda’s population was 37.5 million. Half of the population is 14 years of age or younger, only 2.2% are 65 or older, and between 15 to 17% of children are orphans. Uganda has the third highest birth rate in the world, and one of the highest maternal mortality rates. Infant mortality is 38 per 1000 live births and life expectancy at birth is 58.5.

As of 2014, there were 500,000 refugees from Sudan and Rwanda living in Uganda. The population of internally displaced persons is 29,776. There are around 20 different ethnic groups living in Uganda. A third of the population is Roman Catholic, and a third is Protestant. Muslims and Indigenous Believers make up 16% and 18% of the population, respectively. The literacy rate is 73.2%.

In 2013, the number of people living with HIV/AIDS in Uganda was estimated at 1.6 million. The HIV/AIDS prevalence is 7.4% among those 15-49 years of age. Approximately 63,000 people died from HIV/AIDS in 2013.

Up to date information on Uganda can be found in the CIA World Factbook: https://www.cia.gov/library/publications/the-world-factbook/geos/ug.html

Brief History of Uganda

Evidence of human habitation of the land surrounding Lake Victoria dates back 50,000-100,000 years. Around 400 BC, bands of Nilotic hunter-gatherers who originally lived in the area, were infiltrated by Bantu-speaking tribes from the north. The Bantus cleared the forests and brought with them agriculture and metallurgy. They governed themselves through a system of clan-chiefs, which developed into larger political alliances around the time of the first millennium. By the time European explorers arrived in the 19th century, the Buganda Kingdom had emerged as the predominant power
along the shores of Lake Victoria. Buganda had a formidable military presence with an outrigger canoe navy that patrolled the waters of Lake Victoria, and an army that numbered in the hundreds of thousands. The Buganda also built an infrastructure of roads, bridges and aqueducts across their territory, and their capital was home to an estimated 40,000 people.

Contact with the outside world began in the mid-19th century, driven largely by the ivory trade. The introduction of foreign religions, guns, and devastating epidemics of smallpox and sleeping sickness sent much of the territory into social and political unrest. An alliance between the British government and a newly-converted Christian Buganda led to a number of military victories that expanded Bugandan territory and established Britain as the dominant colonial power by the end of the 19th century.

The year 1894 marks a crucial transition in Ugandan history when the East Africa Company officially gave control of the territory to the British Government. This led to the creation of the Ugandan Protectorate, a British territory with borders that roughly correspond to the present day ones. With this new territory, Britain was swift to levy taxes in attempts to recover some of their military expenses. British agents sought the aid of the Buganda chiefs to act as colonial administrators to aid in tax collection. As one can imagine, this was poorly received by neighboring peoples and led to backlash.

However, not all areas suffered under British administration. Once a means of collecting taxes was established, the British quickly promoted cotton growth and export. From 1905 to 1915, cotton exports rose from £200 to over £350,000 and allowed new schools to be built, as well as novel imports from Britain (metal roofing, bicycles, and automobiles) to be attained.

Through the first half of the 20th century, Ugandans became more and more discontented with Britain rule. As a result, Uganda began to seek independence both politically and economically. This sentiment was originally resisted by the British. However, in 1952 there arrived a new reformist governor, Sir Andrew Cohen, who began preparing Uganda for independence by granting many of the economic liberties that the Ugandan people had been demanding and also reforming the political system to include African representatives elected from districts throughout the country.

Finally, in April 1962, the Ugandan people held elections that led to their independence in October of the same year. At the time, Uganda was still strongly divided along ethnic, religious and political lines. Protestants dominated political life even though the majority of the citizens were Catholic and from the ethnic groups of the north. In contrast, economic power was largely in the hands of a small group of Indian immigrants. After several years of political vying between forces focused on centralist versus federation tribalist government, Milton Obote forcefully took control suspending the constitution and increasing the power of the presidency. He did so in 1967 with the strength of a military led by a young General, Idi Amin. Amin, in turn, overthrew the Obote government when the Prime Minister was out of the country in 1971.
The ten-year dictatorial rule of Idi Amin is a dark period in Ugandan history. The economy quickly collapsed under Amin’s nationalistic policies, and his military regime was directly responsible for the deaths of thousands of Ugandans. Amin ruled the country through a disorganized system of martial law. Infighting within the military was common and rivalries were often settled with lethal force. Amin maintained power through the appeasement of the military, execution of the opposition, and terror in the general population.

Amin's reign ended with the Uganda-Tanzania War of 1979. Following an incursion by Amin's army into Tanzania in pursuit of mutineers, President Julius Nyerere of Tanzania, a long-time ally of the former Prime Minister Obote, counter-attacked. In coordination with Ugandan military exiles, organized as the Uganda National Liberation Army, Tanzanian forces captured Kampala in April 1979 and Idi Amin fled in exile to Saudi Arabia.

With the end of the Amin dictatorship in 1979, Uganda entered an interim period of government in which many different parties jockeyed for power. This ended in 1980 with a military coup and a general election which gave power back to Milton Obote. However, Yoweri Musevini disputed the election results and spent the next 4 years gaining the military power necessary to overthrow the Obote government. As a result, Musevini became president in 1986, and his presidency has remained until the present day.

**Language**

English and Luganda are the official languages of Uganda. The educational system is in English. Medical education, including clinic rotations, are conducted in English, but many patients will not speak English and will require translation. At home, most families will speak their native language. There are 20 tribes in Uganda with more than 60 dialects.

**Climate**

Being on the equator, Uganda has generally mild temperatures with an annual range of 60-80 degrees Fahrenheit. There are typically 2 rainy seasons: April-May and September-November. Evenings may get cool therefore a long-sleeved shirt or light sweatshirt is necessary. Being on the equator, sunrise and sunset occur around 7am and 7pm respectively all year round.

**Cuisine**

Traditional Ugandan cuisine consists of a combination of a protein and starch dish. A choice of beef, chicken, lamb, beans, or peas is often stewed with various vegetables and is accompanied by either matoke (boiled and mashed green banana), rice, ugali (maize meal), cassava, or potatoes.

Other common foods include chapati (an Indian flatbread) and ground nut sauce (a peanut sauce eaten plain or with meat). Fresh fruit and vegetable side-dishes are also served with most meals.
General Information

About the Program

The Robert Larner College of Medicine at The University of Vermont and Western Connecticut Health Network Global Health Program provides motivated medical students with an introduction to global health through participation in US-based didactics and experiential learning at various international sites. Our Global Health faculty members have worked with a diversity of underserved populations, both within the US and overseas, and each brings their unique experience to the program. Ultimately, the Global Health Program aims to inspire medical students interested in working with medically underserved populations around the globe and to better prepare them for practice in low resource settings.

Application and Medical License

You will need to complete the following prior to your departure:

- Students will need to complete an application form to be sent to the International Office Coordinator (Susan Byekwaso), along with all required documents. Please contact Susan or Audree Frey with any questions.
- Residents, fellows, and attendings will need to obtain a medical license in order to practice in Uganda. This can be a time-consuming process. Please start the process 6 months prior to your visit. Susan Byekwaso and Audree Frey can help to coordinate this process.

How to Obtain a Visa

Visas must be obtained prior to leaving the US. It can take up to two weeks for a visa to be issued, so plan accordingly. The visa requirements for Uganda change frequently. Please see their website for the most up-to-date information (http://washington.mofa.go.ug/).
Health and Safety

Your well-being and safety are very important to us. Participation in an elective outside the U.S. increases your exposure not only to minor inconveniences, but could expose you to serious threats to your personal health and safety. Please review the Code of Conduct regarding how to reduce risk when traveling abroad, and the general elective guide for health and safety. As always, your travel health provider and the CDC are the best and most up-to-date resources for health information.

Prior to your elective:

- Visit your primary care provider to get post-exposure prophylaxis (PEP) in case of bodily fluid exposure/needle sticks. Global health faculty are not permitted to write prescriptions for you. If you need a note for the travel clinic or your PCP regarding this requirement, please email Audree Frey.
- Obtain a prescription for malaria prophylaxis.
- Obtain a Yellow Fever vaccination and an International Certificate of Vaccination (yellow card). The Certificate becomes valid 10 days after vaccination. Do not delay getting this vaccine as countries reserve the right to quarantine visitors until the 10 days have passed. You will be asked to present this card when entering the country. If you do not have your card, you may be denied entry to the country, or be given a vaccine in the airport (which is not ideal).

During your elective:

- Avoid mosquitos whenever possible. Use insecticide, sleep under an insecticide treated bed net, and take your malaria prophylaxis
- In case of illness or injury while in Uganda, you should call International SOS and notify the local site director as well as your host family.
- If you have an exposure to bodily fluids/needle stick:
  - Rinse the affected area with clean water and soap if available.
  - Take your first dose of PEP immediately – **This should be kept on your person at all times!**
  - Contact your Local Site Director and International SOS for further instruction.

After your elective:

- Visit your health care provider or travel clinic to discuss screening for any communicable diseases you may have encountered while in Uganda.
Travel Safety

- Thefts are the major scam you will encounter, including pick-pockets in crowds at soccer matches or markets, and thefts from parked vehicles or vehicles stuck in traffic. Some thieves will reach inside open car windows that have stopped in traffic, so beware of cell phones and other small electronics even when you are in the car.
- Keep keys, passport, and money in a safe place. Never put documents, keys or money in the back pocket of your pants. A money belt is especially nice when traveling long distances.
- Take care when doing any online banking or purchases in Uganda. There has been an increase in fraud involving wire transfers, credit cards, checks etc.
- Avoid leaving any valuables in common areas.
- You may consider arranging for travel insurance that has theft insurance for electronics or other valuables.
- In small towns, avoid using large denomination bills as it may raise the price of whatever item you are purchasing. Keep a supply of “small money” in your wallet.
- Check your change. Mistakes can and do happen.
- Avoid running through grass trails as there are poisonous snakes in rural Uganda. Stick to the main roads, unless you are walking slowly and making a lot of noise.
- Avoid walking alone at night, especially in isolated, dark places.
- Be respectful around armed guards and military personnel.
- Keep away from scenes of violence and violent protests.
- Try as much as possible to keep away from crowded places that may be a target for terror attacks. Likewise, report any suspicious packages and parcels in your vicinity.
- Do not purchase meat that is not refrigerated.
- Drink only bottled or boiled water, or carbonated drinks in cans or bottles. Avoid tap water, fountain drinks, and ice cubes. If this is not possible, boil water before using.

Finances

Currency

The Ugandan Shilling is the currency of Uganda. The exchange rate of USD to Ugandan Shilling for 2017 was about 1 Dollar to 3 600 Shillings. US dollars are used at times as well, especially when booking tourist activities such as gorilla trekking or safaris.

Travelers are encouraged to obtain dollar bills newer than 2003 for the best exchange rates. Older or torn bills will fetch lower value at all Forex Bureaus, and they may not be accepted
outside Kampala. Small dollar bills in the denominations of $20, $10, $5, $1 and coins also fetch low value on the Ugandan market.

ATMs

ATMs are widely available in Kampala. Most ATMs accept VISA. Only Stanbic Bank ATMs accept Mastercard. Please check with your own bank about fees that you may be charged for using your credit/debit card in Uganda, and for the currency conversion. Be safe when using local ATMs – watch out for pickpockets, cover the keypad when entering your PIN, and make sure you get your card back when finished.

Credit Cards

Some larger supermarkets, restaurants and banks will accept credit cards. Visa is more accepted than Master Card or AMEX. There may be a surcharge of ~3% added to your bill if you are using a credit card. Be sure to let your bank and credit card companies know that you will be traveling to Uganda prior to leaving the US.

Communication

Cell Phones

Cell phones are ubiquitous in Uganda and are the most reliable method of communication. You can either pay for an international plan with your US cellphone provider, or you can purchase a Ugandan SIM card ($1), which can be inserted into any unlocked phone. Be certain that your phone is unlocked prior to leaving the US. Once you have a SIM card, you will then buy minutes or “airtime” which you can load on your phone to make calls or send text messages. Airtime cards can be purchased easily throughout Uganda.

There is a 24hr shop at the airport where you can purchase phones and SIM cards upon your arrival. You will need your passport for this. When you purchase your SIM card, be sure to keep all of the paper work that you are given in a safe place. If you lose your phone, call your service provider immediately so that they can freeze your account.

International Calls

The price to call the US from Uganda using a cell phone is ~$1/minute. In contrast, incoming calls (including calls from the US) are FREE, therefore it is better to have family and friends in the US call you.

- To call Uganda from the US, dial 011 256, then the number. Leave off the ‘0’ in front of all phone numbers.
- To call the US from Uganda, dial +1, then the number.
- Skype or other internet phone services are useful (and inexpensive) if you have enough
• Cellphone and internet service becomes spotty when traveling in the “upcountry” or rural areas.

**Internet**

Data plans can be purchased in order to access the internet on your phone. You can then create a mobile hotspot from your phone to get internet to your computer. Wi-Fi is present at some hospitals and homes. Please see information below with regards to wi-fi access at specific sites.

**Recommended Coffee Shops & Restaurants in Kampala**

- Cafe Java’s
- One Thousand Cups
- Café Pap
- Mama Ashanti’s (Ghanaian)
- Fasika (Ethiopian)
- Masala Chaat House (Indian)
- Khaza, Khazana (Indian)
- Club 5 (Indian)
- Krua Thai (Thai)
- Yujo Sushi Bar (Japanese)
- Fang Fang (Chinese)
- Fez Brasserie (International)
- Mambo Point Pizzeria (Italian)
- Mediterrano (Italian)

**Sightseeing**

Your host family can assist you in organizing field trips during the weekends and holidays. Popular field trips include:

- Whitewater Rafting on the Nile River in Jinja
- Source of the Nile River in Jinja
- Origin of HIV in Kasensero
- Gorilla Trekking in Bwindi Impenetrable Forest
- Chimpanzee trekking
• Safari at Murchison Falls and Queen Elizabeth National Park
• Sipi Falls
• Lake Bunyonyi
• Cultural Dance Performance at the Ndere Center
• Uganda Museum
• National Mosque

What to Bring

Clothing

• Ugandans are well-dressed and meticulous with their appearance. While rounding on wards or in clinics, you will be expected to dress professionally as you would in clinics in the US.
• Women:
  - Skirts, knee-length or below, or dress trousers, with a blouse or shirt.
  - Comfortable, close-toed shoes (many students wear ballet-style flats) for clinics and wards. You may also consider wearing Dansko’s or other clogs, especially if you will be walking a lot or standing in the operating theater. If you are on OB/GYN or Surgery, you will need a separate pair of OR shoes.
• Men:
  - Trousers (khakis are fine) with an ironed shirt, with or without tie.
  - Comfortable Shoes.
• While on the wards and in clinics, you will be expected to wear a clean, white coat.
• Scrubs are required if you are on Surgery or OB/GYN. Check with the international office about what to wear when you are introduced to your team. However, you may want to bring scrubs with you on the first day just in case. When in the operating theater, you will need to bring head covers, sterile gloves, and masks with face shields.
• An umbrella, raincoat, sturdy shoes, and jacket are recommended for the wet season.
• Iron your clothes and white coats, and polish your shoes if you are able to, as this is a sign of respect to both your patients and colleagues in the hospital.
• Many of you will be walking to the hospital and your shoes will get quite dusty or muddy. Consider wearing a pair of good walking shoes to work and keeping a separate pair of clean shoes for the hospital in your bag or in the International Coordination Office with Susan. Or, you could keep a cloth to wipe your shoes in the office. You may also consider bringing a shoe shine (i.e. the Kiwi brand express shoe shine sponge), which is everywhere in the US, but impossible to find in Uganda.
• Casual clothes to wear at home and on weekends.
• A jacket/sweatshirt to wear in the morning and evenings. If the sun is not out, it can be quite cool in Kampala. The upcountry can be even cooler depending on the elevation.
• Bathroom/Shower flip-flops.
• Good walking shoes.
• If you plan on gorilla trekking, you will also need hiking shoes.

Other Items to Bring

• 1-2 boxes of exam gloves – These are in short supply and students have reported having to clean and reuse gloves on patients.
• Copious amounts of hand sanitizer.
• TB mask.
• Masks with face shields for OB/GYN and Surgery.
• Bring eye protection, especially if you are on OB/GYN or surgery, even if you already wear glasses.
• Stethoscope.
• Multi-purpose plug adaptor (voltage converter): Electrical circuit voltage in Uganda is 220-240 Volts. Please see the picture to the right.
• Headlamp/Flashlight for when the power goes out.
• Power strip – you will be likely only find a single working outlet in your room.
• You will be provided a mosquito net by your host family, but you may want to bring one with you for weekend travel as not all guest houses have high quality bed nets.
• Small packets of tissues as toilet paper is not always available.
• Snacks such as protein bars, dried fruit or nuts that can be easily carried in a pocket.
• Insect repellent.
• Sunscreen.
• Oxford Handbook of Tropical Medicine.
About the Hospitals

There are 4 active clinical sites in Uganda:

- Makerere University (Mulago Hospital)
- St. Francis Naggalama Hospital
- ACCESS Health Training Institute
- St. Stephen’s Hospital.

Makerere University

Educational Center

Why study at Makerere University?

Makerere University is the largest university in East Africa. Its mission is to provide innovative learning and research experiences in light of both national and global needs. Makerere University offers a broad range of academic activities despite its resource-constrained environment. The University has 35,000 undergraduate students and 3,500 graduate students. Makerere University College of Health Sciences partners with Mulago National Referral Hospital, one of the largest hospitals in East Africa, to provide clinical experience for its medical and health professions students, as well as visiting international students.

*Please note that Mulago Hospital is currently (January 2018) under construction. Students are able to do some rotations there like anesthesiology and trauma, but many of them are at smaller affiliate hospitals, e.g. Kiruddu Hospital.

Clinical Rotations

Through bedside teaching, morning rounds and, discussions with physicians, students see a strong demonstration of the importance of history-taking and physical exams in the absence of extensive diagnostic testing. Clinical clerkships are supervised by experienced physicians at Mulago National Referral Hospital and other hospitals who have partnered with UVM.

Laboratory Sessions

In order to equip students with diagnostics skills, the International Office organizes laboratory sessions in Tropical Medicine, in partnership with laboratory technicians. Students are taught how to diagnose tropical diseases, e.g. malaria. Additionally, they acquire the basic techniques required to stain and culture bacteria, as well as techniques required to study the metabolism, growth and environmental influences of bacteria.
Social Classes

In order to appreciate the social and economic determinants of health, and the global burden of disease, the International Office organizes classes on cultural and social issues in Uganda, the Luganda language, and social activities like traditional engagement parties, cultural dances, and visits to cultural sites.

Clinical Rotation Attendance Requirements, Duties and Expectations

A Typical Day on the Wards at Mulago Hospital

- 8:00 AM – Lectures. Frequently peer-teaching from house staff with an attending overseeing the lecture.
- 9:00 AM - Ward rounds with house staff, medical students, and the attending physician. Rounds typically last until 12-1pm.
- 1:00 PM - Lunch.
- Teaching rounds by an attending in the afternoon, or clinic depending on what rotation the student is on.

The schedule varies from day-to-day depending on the individual team, the visiting lecturers, and the day of the week.

Outpatient Clinics

Clinics are packed with patients who are seen by house staff and students, who then present to the attending or senior house staff. You are highly encouraged to attend clinics. Clinic start times vary. Ask one of the residents for more information. In general, clinics start when the first resident/attending arrives, and end when the last patient is seen.

Accommodation

The Host Family Experience

There are many advantages to living with a host family. Most importantly, it allows for greater immersion and integration into the cultural, social, and language components of an international experience. Moreover, it offers a network of support that will assist you with the transition into life in Uganda, and can help alleviate emotional challenges related to the global health experience.
Dr. Sam Luboga

Most participants will be staying with Dr. Sam Luboga and his family in Namere, Mpererwe. Dr. Sam Luboga and his wife, Christine, are a lovely couple who have graciously opened their house and a newly constructed 21-room guest house to UVM students and faculty. They have seven children (six sons and one daughter).

Dr. Luboga is a Medical Doctor, Professor of Anatomy, and an Anglican priest. He is very active in Public Health and Community Resiliency. He has helped communities develop health centers, most notably St. Stephen’s Hospital where some of you will rotate. Dr. Luboga is a member and chair of several non-profit charitable organizations. His research interests include Human and Comparative Anatomy, Health Professional Education, Leadership and Management, and Health Systems Strengthening. His hobbies include storytelling, public speaking, and table tennis.

At the Luboga’s, you will be given a guest bedroom with a private bathroom. You will be able to share communal, home-cooked meals with Dr. Luboga and his family (students are expected to cover the cost of the meals). Laundry will be subject to a reasonable fee, but please wash your own undergarments! All participants should be proactive in reaching out to their host family to see how they can contribute to their family life in a meaningful way. These possibilities include: engaging in the community, church, orphanage or school, and teaching English or Computer Literary courses to children.

Directions:
Plot 777 Namere Mpererwe – across the street from the Catholic Church. At 5 miles along Gayaza Road, make a left turn along Kitezi Road, followed by the first left turn after Mpererwe Primary School and St. Stephen’s Church. If you are having trouble giving these directions to a taxi driver, call one of the Lubogas and ask for help giving directions to your driver.
Isaac Okullo

Dr. Okullo is a Senior Lecturer and Deputy Dean at Makerere University. He is a dentist by training and works in the Department of Public Health. He is originally from north Uganda but now lives in Kampala. His wife Anna works making gowns and other garment work for the University. Their sons attend the university and stop by frequently. They have guests stay with them regularly. There are several dogs (2 German shepherds and 2 Pomeranians) and a cat on the property.

Dr. Okullo’s home is in Kikoni, off the Nanfumbami Road. The closest landmark is the “California Girl’s Hostel” which is about 100m up the road. It is a large home that is part of a compound owned by Dr. Okullo. The home has several guest rooms that have 1 to 2 beds per room. The rooms have bed nets, and are furnished with chairs and dressers.

His home is adjacent to Makerere University. It is about 1.5 miles, a 30-45 minute walk from Mulago Hospital. Alternatively, an Uber can be taken to the hospital for about $2 one-way. There are taxis that can be taken as well. Traveling on boda-bodas is not recommended due to safety concerns. The routes are at least partly on dirt roads, which can be rough and uneven so good walking shoes are a must. The route is considered safe during the daylight hours. Be aware of traffic along the road and at crossings as the taxis, cars, and boda-bodas do not follow traffic rules.

The Okullos are generous in their hospitality. They invite all guests to join them for breakfast, lunch, tea, and dinner. If you are interested in getting any food from local shops or markets they are happy to help suggest where to go. Their full kitchen is available for your use. They have purified water in their home that is safe for drinking. There are showers (with no hot water as is typical for the area) and bathrooms that are private or semi-private for your room. Laundry is available on site, with a washing machine and an outdoor drying line. They have Wi-Fi in the home that is available for guests.

**Transportation**

A driver will be arranged to pick you up and take you to the airport at the time of your arrival and departure.
To get about town, you can walk, take buses (mutatu), or hire a taxi.

Getting from the Lubogas to Mulago:

- Taxi prices fluctuate based on the price of fuel which is very expensive in Uganda. One-way fare from the Luboga’s into town will cost approximately 20,000-30,000 UGX. You can negotiate a daily rate with a taxi driver if you are going to use the same one on a regular basis. This may be a bit cheaper. Gonzaga Lwega is the ambulance driver for St. Stephen’s and also runs a taxi service. He is a safe and reliable driver. His mobile number is 0772925412.
- You can take a matatu to Wandegeya for 1,500UGX, and then walk to Mulago Hospital (about a 10 minute walk). Ask your host family to take you the first time. Coming home, walk to Wandegeya and ask for mutatus to Mpererwe (1000-1500UGX). You will transfer there, then go to Namere (500 UGX).

NOTE:

- Recent years have seen a significant growth in the number of cars in the city, which has led to traffic jams. Traffic accidents are more numerous than in North America. Drivers regularly ignore traffic lights, road signs and traffic regulations, as well as pedestrians, so you have to be very careful and walk defensively at all times.
- NEVER take motorcycles (boda bodas). They are a leading cause of accidents, injuries and deaths!
- When using public transport, do not let the baggage handlers touch your suitcase or you may have to tip them generously to rescue your baggage. Keep your belongings on your lap and protected at all times. Crowded matatus are common sites for theft.

Wi-Fi

You can activate the Wi-Fi at your host family’s house. You will need to pay for this, but your host family can assist you in setting up the system. If there is a group of students traveling together, they might want to go in together on internet services. Many cafes or restaurants will also have Wi-Fi.
St. Francis Naggalama Hospital

Educational Center

St. Francis Naggalama Hospital is a 100-bed, private, non-profit, rural community hospital owned by the Roman Catholic diocese, and administered by the Little Sisters of Saint Francis. It is located in the Mukono district of Uganda, approximately 38km from Kampala, but often a 2-hour drive due to traffic. Sister Jane Nakafeero is the Hospital Administrator.

There are 5 main departments in the hospital:

Outpatient Department

The Outpatient Department has a basic emergency room that essentially serves to triage patients either to the inpatient ward, or to Kampala for more acute care. It also includes a separate orthopedics section for musculoskeletal injuries. The facility has equipment for basic outpatient care and minor procedures.

The OPD clinics which meet on different days include the Adult Clinic, HIV Clinic, Pediatrics Clinic, Sickle Cell Clinic, and the Palliative Care Clinic. There is also a Private Clinic for those who wish to pay extra for shorter wait times.

General Hospital Ward

The General Ward is divided into male and female wings, including 8 bed rooms, a couple of private rooms, and two isolation rooms. Hospital rounds are scheduled at the discretion of the doctor assigned to the ward in a particular week, but often occur in the mornings up until
around noon. Lunch is taken for 1 hour, after which the nursing staff will care for the patients for the remainder of the day, unless emergencies arise. Nurses administer IV and IM medications and do wound care. Every patient has an attendant/family member who stays at the hospital with them (usually sleeping on the floor near the patient’s bed) to prepare meals, buy medications from the pharmacy, administer oral medications, and to do the patient’s laundry. The on-call physician generally leaves the hospital after rounds, or may go to the operating theater, but will stay near the hospital for any new admissions.

**Pediatrics Ward**

The Pediatrics Ward has 30 beds, plus an adjacent play area for the kids. The start time for rounds depends on physician preference. Pediatrics rounds may occur as bedside rounds or as each child being brought to the front desk to be seen by the physician assigned to the ward.

**Maternity Ward**

The Maternity Ward is divided into general labor and post-surgical sections. Rounds typically begin at 8:30 am. C-sections for the day are referred to the operating theater. There is a gynecologist on staff, and midwives who attend vaginal deliveries.

**Operating Theater**

The OR consists of 2 main operating rooms and 1 small operating room for minor procedures. Procedures include C-sections, hernia repairs, circumcisions, myomectomies, I&Ds, exploratory laps, etc.

**Other Facilities**

- Laboratory with basic tests, e.g. CBC, malaria smear, HIV tests, urinalyses, and some basic blood biochemistry if the patient can afford to pay.
- Radiology Department with one X-ray machine and an ultrasound machine.
- Pharmacy (minimal stock).
- Nursery School, primarily for children of staff.
- Basic housing (hostels) for hospital staff on campus.

There are approximately 5 doctors at Naggalama Hospital, including an experienced gynecologist who is currently serving as the Medical Supervisor for the hospital. There are generally 3 young doctors, just recently out of a one year rotating internship following their medical school graduation. The 3 doctors rotate through the General Ward, Pediatrics Ward, Maternity Ward, and OPD. There are several clinical officers (similar to PAs) who see outpatients only.
The Palliative Care Outreach Program is a unique aspect of Naggalama Hospital, considered as a model for palliative care in rural Uganda. It is run by a team that includes a nurse with specialized palliative care training, a nurse assistant, and a spiritual leader. They have worked in collaboration with the US based NGO, Palliative Care for Uganda (www.palliativecareforuganda.org) run by physicians from Weill Cornell Medical Center and Western Connecticut Health Network.

Students are encouraged to arrange with the PC team to accompany them on house calls to rural villages in the surrounding communities. These are long days out in the field without lunch or bathroom stops, so you might want to bring a snack bar, tissues, and hand sanitizer.
Accommodation

Depending on the time of year and the number of other visitors to Naggalama Hospital, you will be housed in one of two guest houses.

The student guest house is a 2 bedroom house with 2 beds in one room, one bed in the second bedroom, a shared bathroom with a hand shower, a small living/dining area, and a small basic kitchen. There are mosquito nets over all the beds and screens on the windows. If you are at Naggalama without visiting faculty, you will likely be housed here.

There is also a large 4 bedroom, 4 bathroom guest house located just outside the hospital gates, near the student guest house. Each room has 2 twin beds with mosquito nets, a bathroom, and a ceiling fan. There is a spacious shared living and dining area meant for group discussions. The house is gated outside with security cameras in both the front and backyard. The house is privately funded by a donor who uses it as her home when she is in the country. Please respect it and its furnishings.

For both houses, a housekeeper will prepare and serve 3 meals per day, do general cleaning of the house, and will do your laundry about once a week at your request (students are expected to cover the cost of the meals, laundry and cleaning fees). Everything is hand washed and hung out to dry, so clothes that dry quickly are best. Bed sheets, toilet paper and towels are provided at both houses. You should bring your own soap, shampoo and any other toiletries you may need. Don't count on being able to buy any of your usual toiletries there.

The hospital Wi-Fi is sometimes available, but their monthly data allotment is limited and will run out if used for social media, FaceTime, video streaming, and YouTube. Please don’t use the hospital network for these purposes.

It is very dusty in Naggalama and you are expected to remove your shoes before entering either guest house. Bring slip on shoes (preferably something that can be rinsed off if they get caked with the orange clay soil on a muddy day), and rubber flip flops for wearing inside the house. Your clothing will also get very dusty, so you should bring cool, comfortable informal clothing for the evening hours so you don’t transfer the dirt and dust from your work clothes onto your bed or other upholstered furniture.

The large guest house has no screens on the windows so you will essentially be living in the open air. You should bring insect repellant. At times, you can expect to find insects and small lizards inside the house.
St. Francis Community

Naggalama Hospital is located on a large campus shared with 2 large faith-based boarding schools, and a church which has 2 masses every Sunday morning. There is a soccer field at the boys’ boarding school where the locals, hospital staff, and school children often play soccer from 5pm to 7pm. They welcome visitors to join them.

While Naggalama is generally a safe community, you should avoid walking around alone at night. If you leave the hospital campus, you should make sure your colleagues are aware of your whereabouts.

Transportation

St. Francis Hospital is 23 miles away from Kampala, a 2-hour drive due to traffic. The Student Guest House is conveniently close to the Hospital (5 mins).

Additional tips

- You will not have access to a grocery store in Naggalama. Bring anything you think is essential with you – toiletries, medications, snacks, instant coffee. You might consider asking the driver who picks you up at the airport or hotel to make a stop at the Lugogo Mall on your way to Naggalama where you can purchase some additional supplementary food items. There is an ATM there and most of the stores at the mall will take Visa credit cards. There is also a nice and reasonable souvenir shop there called Banana Boat.
- Due to poor internet service, we recommend downloading any entertainment (movies and TV shows) as streaming is not an option. Wi-Fi is limited and can be used for emails and google searches, but will run out quickly if used for video streaming or video chat.
Monthly data allotments for the entire hospital are usually used up by the middle of each month.

- Electricity is unpredictable and can go out at any time so definitely bring a headlamp/flashlight.
- Miscellaneous items to bring: notepads/pens/small day pack/balloons, lollipops, stickers to give to children while on outreach trips.
- While not required, many visitors bring gifts for their hosts and the hospital staff. Small inexpensive items that can easily be packed are great. Since Naggalama is a very poor area, even simple items such as packages of pens, penlights or flashlights, hand sanitizer, chocolate bars, and scented soaps are appropriate.
- Many guests tip the housekeeper(s). The amount is at your discretion. However, a general rule of thumb would be about 10,000 Ugandan Shillings (~ $3) per person per week. Some guests also give a small tip to the driver at the end of their stay.
ACCESS Health Training Institute, Nakaseke

Educational Center

ACCESS (African Community Center for Social Sustainability) is a community-based organization in the Nakaseke district in Uganda (formerly part of Luwero District). The headquarters is situated on 17 acres of land in Nakaseke village. ACCESS operates in two sub counties (Nakaseke and Kasangombe) serving a population of 191, 100.

ACCESS is 65km from Kampala district on Kiwoko Road. In collaboration with Nakaseke Hospital, which is about 5kms from the main headquarters of ACCESS, the organization maintains bidirectional collaborations with many academic institutions in Uganda and abroad, in which faculty, residents, students, and well-wishers run projects of mutual interest with the partners.

The Nakaseke District Hospital has a Pediatric Ward, Male and Female Wards, a Maternity Ward, and multiple Operating Rooms. Additionally, it has an HIV Clinic, a Diabetes Clinic, Private Rooms, an Emergency Department, and multiple other specialty clinics. It is recommended that students bring a box of gloves, masks, scrubs, protective glasses, a stethoscope, and anything else they may want to use in the hospital.

The ACCESS site also has family planning community outreach programs where workers go out into the surrounding communities and provide various contraceptive methods for women. They usually insert Implanon and Jadelle hormone implants. Additionally, they give vaccines to children. This is a great opportunity for students to get experience of inserting hormone devices while helping the workers, and also to see the beautiful countryside and little villages of Uganda.
**Attendance, Duties and Expectations**

The students spend most of their time at Nakaseke Hospital for their rotations. Nakaseke Hospital Center is 2-3km away from the ACCESS. There are a couple of ACCESS site drivers who will drop off/pick up the students at the hospital either with a car/van or with a motorbike. Public boda-boda motorbikes are not recommended.

Volunteers must be open-minded, adaptable, motivated, and sensitive to local priorities. It is important to remember to be a good representative of your home institution and country. You are free to do as you please on the weekends and holidays. However, if you do plan to travel outside of Kampala, you are required to inform both the Local Site Supervisor and the Deputy Director for your own safety.

**ACCESS Daily Activities**

- **MONDAY**  
  - Proposal Writing  
  - Clinical Work at Nakaseke Hospital
- **TUESDAY**  
  - Patient Management  
  - Proposal Writing  
  - OVC Recruitment and Maintenance
- **WEDNESDAY**  
  - Community Outreach  
  - Patient Management  
  - School Visits  
  - Report Writing
- **THURSDAY**  
  - Community Outreach  
  - OVC Meeting & Counselling  
  - Patient Management
- **FRIDAY**  
  - Feedback Session  
  - Report Writing  
  - Clinic Audits  
  - Family Planning  
  - Immunization Clinic

**Pre-Departure Checklist**

We usually recommend that participants be oriented on the ground on either their first or second day at ACCESS. A guide book will provide the immediate information you need to prepare you for your visit.
The following checklist should be completed prior to departure:

- Contact Esther Loy Katali (kalyesloy@yahoo.com) about special interests and arrival details.
- Contact Esther Loy Katali (kalyesloy@yahoo.com) about accompanying guests, arrival details, and airport transfer.
- Contact Esther Loy Katali (kalyesloy@yahoo.com) about how you can contribute to ACCESS, e.g. education on US history and culture, computer literacy, engagement with specific projects such as proposal writing, orphanage counselling, schools, research etc.
- Register with the US State Department and Smart Traveler Enrollment Program (STEP) (travelregistration.state.gov/ibrs/ui/) to inform them of your travel and lodging arrangements.

**Specific Items to Bring**

- A padlock
- Flip-flops to wear in the bathroom/shower
- Good Walking Shoes
- Bathing Suit

**Accommodation**

Accommodation is provided in newly constructed living quarters which include a standard room with a bed and bedding, a private toilet, and a shower.

If you go to Kampala on weekends, it is safe to leave your belongings in the guest center. However, we recommend that you lock up your rooms using your personal padlocks.
**Transportation**

A driver will pick you up and take you to the airport at the time of your arrival and departure.

It is recommended that you use special-hire taxis for transportation around town, especially at night. It is inexpensive and is the safest option. Always settle on the price of your trip before getting in the vehicle!

**Recommended Drivers:**

Akram: 0776962792  
Patrick: 0772489298  
Joseph: 0712-926779

**Internet**

Currently, MTN is the preferred mobile network due to its ability to cope with the mountainous terrain in Nakaseke.

**Meals**

Three meals per day will be provided. The staff lets the students decide when they want to eat. The food is brought over to the room and the student usually eats by himself/herself. The types of food that are served include rice, noodles, potatoes, Zapati, eggs, bananas, watermelon, pineapple, mango, plantains, spinach, chicken, and fish (students are expected to cover the cost of the meals).

**Laundry**

Mrs. Naluwagga Winnie can do your laundry. It will be hand washed in a bucket of water with soap. She charges between 10,000-20,000 shillings depending on the size of the load.
St. Stephen’s Hospital

Education Center

St. Stephen’s Hospital is located in Mpererwe Village in Kampala. It is a private, non-profit organization which was founded in July 1987 by St. Stephen’s Church of Uganda Mpererwe. It is registered with the Ministry of Health and with the Uganda Protestant Medical Bureau through the Namirembe Diocese.

The Hospital is located 7 kilometers from the Kampala city-center, off Gayaza Road on Buwambo – Kiteezi Road. It serves 8 parishes: Kawempe II, Mpererwe, Komamboga, Kanyanya, Katalemwa and Kitettikka. This catchment area has a population of about 80,000 people.

The hospital is built on a 2-acre piece of land. It has 3 blocks - Staff Quarters, an Outpatient Department, and an Inpatient Department. The Inpatient Department includes Male and Female Wards, a Children’s Ward, 4 single unit rooms, a Maternity Ward, and an Operating Theatre.

St. Stephen’s Hospital Mpererwe collaborates with the Kampala City Council, Makerere University College of Health Sciences, the Rotary Club of Kololo, and the Rotary Club of Kampala North. Additionally, it receives support from the Mrs. L. D. Rope Third Charitable Settlement in the UK, and from the Government of Uganda in the form of delegated funds.

The different services at the hospital include: Maternal and Child Health, Outpatient and Inpatient Care, Comprehensive HIV Care and Treatment, Surgery, Immunization, Health Education, Counseling, Home Visits, Ambulance Services, Dental Care, Laboratory Testing, School Health Programs, Family Planning, Ultrasound Scans, and Malaria Prevention. Community health is ensured through a network of Community Resource Persons (CRPs).

St. Stephen’s has a bed capacity of 40. Per month, at least 40 major operations are undertaken, 30 babies are delivered, and over 100 patients receive dental care. The outpatient clinic sees an average of 40 patients. Most of them suffer from acute respiratory tract infections or malaria.
The HIV Clinic sees over 40 patients every Tuesday. Additionally, we carry out home visits for follow-up, for patients who cannot come to hospital, and for child immunization outreaches. The staff at St. Stephen’s includes two full-time medical doctors and four visiting specialists in the areas of General Surgery, Orthopedic Surgery, Obstetrics and Gynecology, and General Medicine. Additionally, we have 4 Medical Assistants, 5 Midwives, 9 Nurses, 2 Laboratory Technicians, 1 Laboratory Scientist, 2 Public Health Dental Officers, an Accountant, 3 Accounts Assistants, 1 Counselor, 1 Social Worker, 1 Dispenser, 2 Community Health Workers, 1 HR & Administrative Officer, 1 M & E Officer, and 1 Records Officer.

**Duties**

1. While at St. Stephen’s, students will join the staff and participate in hospital activities in order to get a feel of and learn how health care is practiced in a small, peri-urban community hospital.
2. Students will be assigned to clerk a patient, follow-up, write a report, and present it for discussion with the Medical Officer and staff.
3. Students will prepare for and present during CME sessions.

**Accommodation**

Students will stay with Dr. Sam Luboga and his family. Please refer to the section on Makerere University to find more information about Dr. Luboga’s home.

Lunch is provided at 2pm daily to the entire staff at St. Stephen’s. It usually consists of beans and matoke. There is also tea around 11am.

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