

A Visit to the Local Health Care Facility in Uganda  
By Dr. Jim Casey

After a somewhat long and eventful trip to the Retreat House at Hoima, we traveled in a bright yellow ambulance provided by the bishop to visit the local clinic. There we met Alec, a physician's assistant and Joseph, the lab tech. The building was quite small, but well maintained, clean and well organized. There was a reception area, rooms for medications, an examination room, storage and a small laboratory. Alec became our guide. He was well-spoken and very competent on medical matters. He told us that malaria is the number one medical problem, followed by HIV/AIDS, asthma, and other infections. He also treats cobra snake bites. The inpatient facility is a separate building that also serves as a delivery room and post-partum medical unit. There is also a room for an optometrist, but no one to run it.

After seeing some in-patients, Alec explained that in Uganda the patient's family supplies everything. They bring the food, cook it, supply sheets, do patient care, buy medications and bring them to the facility. All the staff does is prescribe the meds and give them. The family does the rest.

The lab Joseph runs is about ten by ten feet with sink and microscope. There he can do CBC's, tests for STD's, typhoid, brucellosis, pregnancy and a few others. When asked for a wish, Joseph responded "a fire extinguisher and a back up generator". There is power there but it is unpredictable.

Our second stop was the local hospital/referral center. Guided by the hospital administrator, we visited the pediatric unit. There in 2 medium size wards were 58 pediatric patients of all ages. With multiple family members in attendance, it was a bit crowded. Interestingly, we did not hear any crying. Joseph told us that the hospital staff sees about 250 to 350 outpatients a day. The hospital itself is not one building, but several, each serving a specialty.

A visit to a medical supply/pharmacy followed. In Uganda there are several ways to be treated and obtain medication. One is the traditional way we use; another is to go to a practitioner, tell him/her what is wrong and receive the correct medicine. Traditional healers (herbalists) are also available. We did purchase lab testing materials for Joseph, and mosquito nets for inpatients that Alec has.

We then traveled to Nalwayo, where Blessed Trinity church and school is located. There is no church clinic there, but a school dispensary is in the plans. There is a government run clinic in Nalwayo. However, in March most of it burned down leaving the clinic with one small room for out patient care and a closet for meds.

A few miles up the road is Kakindo, where we did find an empty building that had been a church clinic staffed by some nuns. However, in the 1980's, some rebel fighters came through and stripped the clinic. It has been empty ever since. The structure itself looks

to be in good shape, and we are hoping to see it reopened. There is a government clinic in Kakindo, but the local populace does not seem to trust it much.

Finally, the people we met, though shy, were exceedingly friendly. They were warm generous and smiling. They walked for miles carrying 5 gallon plastic bottles of water. They push bicycles loaded with sacks of rice, beans, and water bottles. And they wait with amazing patience. They sing in church with drums and harmony that is almost angelic.

The trip is long, 20 plus hours in a crowded airplane seat, a 7 hour time change, miles of rough unpaved roads in a mini bus that lacked cushions and suspension. The electricity is “iffy”, red dust is everywhere, no hot showers, and anti-malarials are strongly recommended. But we will go back and love every minute of it.