

NEWSLETTER
KUMI HOSPITAL UGANDA
QUARTERLY PUBLICATION

04-'22



Eye Camp Kumi Hospital

Kumi Hospital, in collaboration with Soroti Regional Referral Hospital, organized an eye camp from September 19 to 24.

The team members of the eye camp offered an eye check and with the eye care facilities in the eye department they offered a direct treatment with overnight accommodation in the renovated eye ward. Also this time, the patients only had to contribute a small amount for the eye surgery.



OPD Eye Department



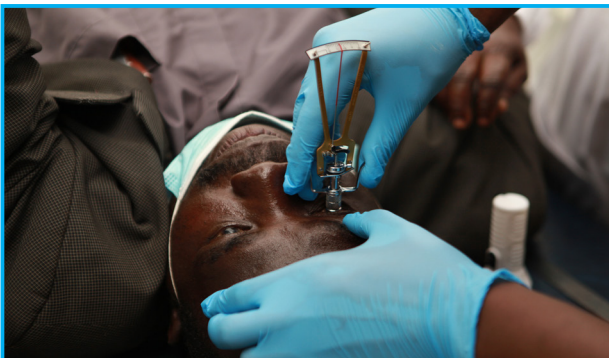
Screening of the patients



Eye measurement for the strength of the glasses



First check of the patients



Measuring of the eye pressure



Eye drops for maximum relaxed eyes

The medical team screened a total of 153 patients, of which 88 patients had surgery caused by cataracts, 2 patients with excisions (surgical removal) and 63 patients with other eye diseases.

As an eye department, we are very happy with the renovation of the eye department. We now have a new VA room, Eye OPD where patients wait while their VAS are taken. The men's and women's sections are now in good condition.

We took on the challenges with the operations and aftercare with confidence.



Funduscopy, looking at the internal structure of the eye



Anasthesia of the patient's eye



Preparation in the operating room



Surgery of the eye



Recovering in the male eye ward.



Checking the Post-Operatives



Waiting for removing the eye bandage



Clear new sight after years

Many thanks to the ophthalmologist and team members for the coordination and great work that has made the camp a great success. We also thanks the KH management and eye department staff for the succesfull eye camp.

Sr. Amero Salume, Ophthalmic Clinical Officer - Kumi Hospital.



K u m i H o s p i t a l

a Training Hospital for Schools and Universities

Nursing and Midwifery Schools

There is a growing interest in midwifery training in Uganda for both male and female students. Retaining midwives graduates in healthcare facilities offers new hope for mothers and newborns, who benefit from their complementary knowledge of obstetrics and newborn care in environments where there are no doctors, midwives and gynecologists. The students of the Nursing and Midwifery Schools of Kumi Mukongoro and Pallisa Alice Anume Memorial follow the training to obtain one of the following certificates ; Comprehensive Nursing (CCN) and Midwifery (CM) and diplomas Midwifery [DM] and Nursing [DN].

Nursing and Midwifery students come to practice in the hospital for their semester curriculum. During your internship in the hospital, the student will have the opportunity to learn in practice. The hospital provides challenging learning situations and good supervision during the internship.



Students from the Nursing and Midwifery school

UIAHMS Mulago

Physiotherapy students from Uganda Institute of Allied Health and Management Sciences complete an 8-day Community Based Rehabilitation (CBR) program to share knowledge and skills and learn the role of CBR staff in rehabilitation.

The CBR program basically allows the Physical Therapy students to relate the classroom work and the community.

Rotating every 3 days in different departments within the health facility, including the maternity ward, the outpatient department, the clinical department(s), the ART clinic and the laboratory.



Physiotherapy students from Mulago Kampala

Soroti University School of Health Sciences

Community Based Education and Service (COBMERS) is an academic program where second year students study at a health facility and conduct health studies through community research. The program is a community placement tool for social internships in a community and community experience, with priority national health programs, reality education, community empowerment and health equity.

Second years students were divided into groups of five students under the guidance of KH teacher, Dr. Gidoi Denis. They rotated every three days in the different departments within the health facility discovering the different activities carried out there.



Students from the University of Health Sciences Soroti

Medical Electives Universities Students

Students from Europe Universities coming for internship for their last semester in one of the medical specialties Global Health, Tropical Medical or Social Medical study. Undergraduate elective placements are an important part of the medical school curriculum. The length of a medical elective can vary between four and twelve weeks. Electives are short-term placements where medical students can learn by assisting in real healthcare situations.

The Placement Strategies of a Medical Elective Student

Practice-based professional development. Self-directed learning is the mainstay of the Problem-Based Learning Mentorship-centered apprenticeship. To support and mentor medical students to transform them into excellent and passionate practitioners.

Project-development with relevance to student and community. Inter-professional and interdisciplinary education.

Dr Denis Gidoi, medical officer

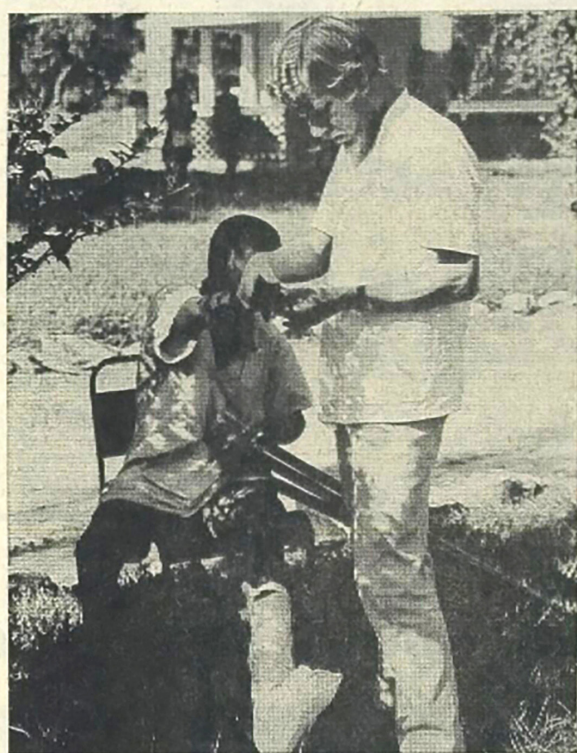


Medical Elective Students from Europe

When I was 4, living in Kumi with my parents, I don't think the thought ever crossed anyone's mind that I would one day become a leprosy patient myself.

My parents, Wim and Mariet Brandsma, worked and lived in Kumi Leprosy Hospital in the early 70's. To be honest, I have very few memories of my life there. A number of pictures, home video's and letters my mother wrote to those back home paint a picture of our lives. For me that life was filled with running around barefoot with my sister Lise while my dad did his leprosy work and my mom had her hands full with keeping us all safe and sound and happy.

I found out that I had leprosy when we lived in Carville, Louisiana in the 80's. We had moved there from Alert, a leprosy hospital and research center in Addis Ababa. I was 14 years old at the time. Growing up among leprosy patients and on the compounds of leprosy hospitals had become normal to me and my siblings. Things changed a bit when I found out I had leprosy. Instead of it being something that happened to other people, it was something that happened to me. It impacted my life directly.



Fysiotherapeut Wim Brandsma onderzoekt een patiënt. Op de achtergrond een van de ziekenverblijven van het centrum.

Physiotherapist Wim Brandsma at Kumi Leprosy Centre.
(Dutch newspaper January 1976)

My case was discovered almost by accident. I had had a white spot on my right knee for some time. It wasn't something we had paid a lot of attention too. Living in Africa meant dealing with various skin issues, and I was also a child that liked to play outside. But lying in the Louisiana sun had turned my legs a beautiful shade of brown which made that white spot stand out even more. One afternoon, during a get together with family and friends, the white spot on my knee was noted again. Almost jokingly my father suggested doing a sensitivity test. He took a piece of cotton wool, twisted it into a point and told me to close my eyes. He lightly touched my knee and leg with the cotton wool and asked me to point to where he was touching. I played along with this little game and thought nothing of it until I noticed a heavy silence filling the room.

When I opened my eyes, I saw the concern on the faces around me. Evidently I hadn't felt that cotton wool very well.

It was reason enough to start a round of serious tests to see if I had leprosy. On the one hand it wasn't too big of a deal. I knew leprosy was treatable, and I also knew it wasn't that contagious. But I was enrolled in a school and lived in a country where not a lot of people knew the facts about leprosy.

Their feelings were based on stigma and misinformation. I felt I had to keep the tests and my diagnosis a secret. It weighed heavily on me. I remember feeling panicked when I was late coming to school after having some medical tests. Feeling anxious when explaining why I wasn't allowed to swim in the pool at the end of the summer, because of the rule that the pool was meant for 'regular' people only, not for patients. I remember feeling angry when leprosy was being represented as a disfiguring, debilitating disease for fundraising purposes, and I remember feeling fear and trembling when I told my bible teacher that life with leprosy was worth living, even though she had just said that she'd rather die than have leprosy...

I ended up having multidrug therapy (MDT). My white spot disappeared and feeling returned to the spot. Having leprosy became a small blip in my life which I almost forgot.

Nowadays I use my experience with leprosy in my role as an ambassador for the Leprosy Mission. I try to bridge the gap between leprosy as being some distant foreign disease, and try to make it something that people can relate to, and be willing to invest in as part of the process of eliminating leprosy from the planet.

I tell about it being a curable disease if it gets caught in time, and I use myself as an example of that. I also speak about the shame and secrecy that still surrounds leprosy and how that can be more debilitating than the disease itself.

I am happy to use my personal experience to function as an ambassador for leprosy patients, to speak up, and to make a difference in a small way.

Marit Hofman - Brandsma, Nunspeet, the Netherlands (metmarit@gmail.com)



Lise and Marit Brandsma and Girado Okurut at Kumi Hospital harvesting bananas.



A briefly visit of the Dutch Kumi Hospital Foundation

And then the question arises whether we want to put our story on paper and especially briefly express our feelings about our trip to Kumi Hospital.

It can't really be summed up and so many words are needed, but what is the first impression and all-encompassing for the whole journey is the love we have felt. The people's love for their work and the community. The patience of all patients and their positive attitude.

We were able to see so much by going with Steffie Mooren of the Kumi Hospital Foundation on this very beautiful journey. Her love for the country, the community and the

the number of deliveries is falling sharply. This leaves the most difficult births in particular the ones with a very high chance of a poor outcome because people first received poorer care elsewhere. Our heads start to rattle and immediately we start thinking of ways to get the people back. Over the days and after many good conversations at all levels in the hospital, we get a better picture of the whole situation.

The arrival of Steffie means a new start, people dare to speak their minds and it becomes clear to everyone that communication must be high on the list of priorities. It is nice to see that everyone is open to the



Introduction at the Hall of Hope of the Hospital



At work at our latest foundation Walkway project

foundation is enormous. How special to experience it up close.

On arrival we had to deal with some setbacks in the first few days. It is tough to see that a lot has changed in a relatively short period of time. Due to the disappearance of the supporting contribution for childbirth,

future and wishes to continue with a positive mindset. Everyone has a very big heart for Kumi Hospital.

Over the days, we get to see all the different facets of the foundation's support. Our days are filled with success stories, but also with harrowing images. We do see that a lot of



A special welcome at the Adesso Primary School

attention is being paid to where, especially with only a little help, a big difference can be made. The aid is future-oriented and strives for progress and self-reliance.

We got a very valuable impression in a very short time and above all we took home a lot of love.

Thank you Steffie and all the people who put their heart and soul into helping the community and the Kumi Hospital Foundation.

Anne-Marie, Lonneke, Sanne and Steffie

www.kumihospital.nl



As a special guest at the Adesso Primary School



Opening of a renovated Classroom and Office



At the Nutrition Department



KH Outreach; Nutrition, Disability and Malnutrition

Soroti University School of Health Sciences

Second year students Aug 3 - Aug 16 2022

Location, Kumi Hospital Ongino, Ongino Sub County, Kumi District.
The hospital is co-owned by the Government of Uganda and the Church of Uganda.

COBMERS, Community Based Education and Service program, is an academic program where students study at a health facility and enter the community, i.e., the catchment area of the health facility for research and health studies in the community.



This program is a tool for community internships and to achieve the following, among other things.

- * Acclimate to the neighbourhoods and communities you will be working in.
- * Implement priority national health programs advocated by the UNMHCP.
- * Practice "Reality Education"
- * Promote community empowerment and equity in health.

The objectives of the COBMERS activity at the facility and the community were; social-behavioural determinants of health, participating in community and health education.

- * Discovering health system management and village health committee and health team.
- * Participate in the community dialogue to assess the burden of disease in the hospital's service area.



SOROTI UNIVERSITY
SCHOOL OF HEALTH SCIENCES



Community Dialogue at the Health Facility

Develop interview schedules and questionnaires to guide the process. To achieve these goals, we divided into groups of five students under the guidance of our teacher, Dr. Gidoi Dennis. We then rotated every three days in the different departments within the health facility, including the maternity ward, the outpatient department, the clinical ward(s), the ART clinic, and the laboratory. While in the wards, each group would discover the different activities performed there through: mentorship, observation, and active participation in the activities.

This program was a great experience; enlightening and educational academically for all of us.



Community Dialogue activity

Travel to the Community Site



Kumi Community Foundation UK



This October marks the 20th anniversary of Elspeth's first trip to Kumi. Here she explains what led her to Kumi and to found the Kumi Community Fund (the precursor of the Kumi Community Foundation). "Uganda, a distant country far from the world I was used to but, having been made redundant from St John of God Hospital in Scorton, surely I had more to offer as a physiotherapist, when I had the opportunity to visit Kumi Hospital in rural eastern Uganda. With the approval of my husband, Chris, who said this was what I had always wanted, I booked a flight for ten weeks into the unknown, not expecting to still be at the helm 20 years later. I knew from the moment I arrived in Kumi that this was for me, but could I be of use?"



Kumi October 2002 - Elspeth Robinson for the first time in Kumi



Kumi October 2022 - Elspeth Robinson with Harriet and husband Henry and their children Elspeth and Robinson

The patients at Kumi Hospital had conditions which I had never seen nor heard of. This was to be a challenge indeed. The Lord's Resistance Army was very active not far from us and I arrived in the midst of rebel activity. The living conditions were, to say the least, different; no running water, only candles or kerosene lamps after sunset, but I did have a roof over my head with so many bats for company! Now it is my second home, conditions have improved considerably but I am pleased I experienced the hard times. We are now a registered charity and I can be assured that, once it is time for me to call it a day, Kumi Community Foundation will be ongoing with its dedication to the care of children with disabilities and their families!"

www.kumicommunityfoundation.co.uk

Moving to a place of hope – news from the Kumi Community Foundation

by Elspeth Robinson

NORTHERN Cross readers have long supported the work of the Kumi Community Foundation in Eastern Uganda, and this summer helped us to raise a record sum of £3,700 at our Open Day in Darlington.

The money raised is already being used to provide artificial limbs and tricycles, and is funding surgeries for children with disabilities as well as many other projects.

One person who has benefited is Atima Meribu, a three-year old born with a congenital absence of the left lower limb.

Atima, who could shuffle along at great speed using her arms and one leg, was supplied with a prosthesis fabricated in the Kumi Community Foundation Orthopaedic Workshop.

The smallest foot supplied by Jaipur Rotary needed trimming to size for Atima, so she will be carefully monitored over the years as this will need to be replaced as she grows. She has managed to walk with a wooden walker made in Kumi Hospital.

Twenty sewing machines were dispatched to Kumi Hospital in a container alongside 119 wheelchairs sent by the Wheels for the World organisation.



□ Emma Edonu is now studying engineering.

These are being distributed to the mothers of children with disabilities or women with a disability.

Achem Betty is a paraplegic and the sewing machine will allow her to start a small business.

Emma Edonu was burned at the age of two old when his mosquito net caught light and the thatched roof of his home collapsed and seriously burnt his little body. We found him alone and withdrawn. We brought him to Kumi Hospital for plastic surgery by Charles Viva, the Teesside plastic surgeon who I used to work for.

Although Emma will always be disabled, he stands upright and can face the world with confidence now. He is studying engineering at a local college and, when his course is complete, will be able to start a business repairing motorcycles.

Betty Adongo was born totally blind. We found her aged about eight, walking with her hands behind her back round and round her compound where she lived in the bush with her grandfather. He agreed to us sending her to school and, for the first three years, she remained in primary one until she learnt to speak.

She is now a confident young woman and leader of the school choir who is learning skills such as bead work which will bring her in a small income.

Our plan for Betty is to build her a simple house with one room and an iron sheeting roof which will last longer than a mud thatched hut.

This done we will have achieved our target and changed Betty's life from one of hopeless poverty to her being a person in her own right.

Life for very many families in Kumi is tough, none more so than for a certain teenage girl from a local home where every day is hard.

Her mother struggles to bring up her family and even working seven days a week at two jobs she only earns a pittance compared to what we do, so

grows her own food crops for survival.

Sometimes I can see that not all is well – she may have malaria, may not have been paid, the crops may be failing.

There are so many burdens for her to carry and depression can take over, but she doesn't give in. Each day we exchange a few words: "How are you? How was your night?". They're always said with a smile, but I can see behind the mask.

The girl brings me a poem she has written and some pencil drawings of leaves. She has extraordinary talents and tells me her hopes and dreams, but it saddens me that the Kumi Community Foundation cannot help her to complete her education. As a registered charity it must keep to its strict criteria of helping families with children with disabilities or malnourishment.

Returning home I put some of her work on Facebook ([facebook.com/kumicommunityfoundationuganda](https://www.facebook.com/kumicommunityfoundationuganda)) and said my prayers.

God listened and soon an anonymous donor offered to help her.

Below is her latest poem.

Helping to change one youngster's life will hopefully provide security for one family and change the expression of one mother's face from one of hopelessness to one of hope.

*A lot is a mess, much is yet to come
Sorrrows of uncontrollable circumstances*

*Fears of one's deepest apologies
To unknown uncertainties of life
But a smile, a big joy to witness
The beauty of giving in order to be blessed*

*By the One who knows all that lives.
Wonders have I seen, but by you
All is calm to bestow upon my future
To create a meaning in a needy life.
To silence the order of poverty.
Thank you for seeing through life
And for others under the charity
May God bless you in any way possible*



□ ABOVE: Achem Betty, far right wearing a turquoise dress, with the sewing machines. LEFT: Betty Adongo is now a confident young woman who can read braille.

Northern Cross October 2022.

The Northern Cross is an independent newspaper for people of the Christian faith in North East England.

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A poem written by Betty Adongo, born totally blind.



Centenary Bank

Kumi Hospital is delighted to receive a donation from Centenary Bank to help refurbish one of its offices. This is a good gesture as we have been in a banking partnership for a long period of time.

This has even motivated us more to continue banking with Centenary Bank. Thanks to the management of Centenary Bank.





The Kumi Hospital logo is a leaf branch and fruit of the *Hydnocarpus Wightianus* or chaulmoogra tree. Chaulmoogra Marotti seed oil has been widely used in traditional Indian medicine (Ayurveda) and Chinese medicine. It entered early Western medicine in the nineteenth century before the era of sulfonamides and other antibiotics for the treatment of several skin diseases and leprosy. Chaulmoogra is given intravenously and might have calming- and fever-reducing properties and activity against skin disorders.

Kumi Hospital Ongino

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- * Sr. Amero Salume, Ophthalmic Clinical Officer KH
- * Marit Hofman - Brandsma, Nunspeet, the Netherlands
- * Elspeth Robinson, Kumi Community Foundation, UK
- * Steffie Mooren, Kumi Hospital Foundation, the Netherlands

This publication is also to download on kumihospital.org/information
Read also newsletter 1, 2 and 3 (about the history of Kumi Hospital).
If you no longer wish to receive this newsletter, please let us know and send us an email.

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