



HAU IHPCA

**HOSPICE
AFRICA UGANDA**

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NEWSLETTER

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Hospice Africa Uganda; Adding Life to Days



Like most NGOs, HAU requires diverse funding sources to sustain current services and ensure a stable future. The HAU board recognised the need for organisational changes along with a substantial budget reduction as we seek to attract more funding. As HAU's budget is primarily in personnel, the painful decision was made to downsize the HAU team along with reducing some services for now.

are confident that we are headed in the right direction, and optimistic about our future. We are proud of the staff, members and partners who continue to provide thousands of critically ill patients in Uganda with dignified, pain-free end-of- life care and work towards the HAU vision of bringing palliative care to all of Africa.

Annie Lezak

Throughout this process, the board, advised by volunteer consultants Annie Lezak and Michael Corless, kept the HAU vision, mission and ethos paramount. HAU must continue to be a beacon of palliative care that is appropriate for the context in Africa.

Now that HAU has reduced costs, we are focusing on strengthening our fundraising and building a sustainable organisation for the longer-term. Several strategies are underway, including grant applications and fundraising both within and without Uganda.

Two exciting recent developments are the membership drive that saw HAU partner with new members and the induction of the new, highly energised board.

Whilst the past year has been a difficult one for HAU, we



Mission

To bring peace to the suffering of Africa, through providing and facilitating affordable and accessible Palliative Care in Uganda and other African countries.

Vision

Palliative Care reaching all in need in Africa.



THOUGHTS FROM OUR FOUNDER

The introduction of oral affordable morphine to Kenya, Uganda, 1991 and 1993, and now many other countries, has brought hope, not only to the patients but for those who have struggled to control severe pain, particularly for the suffering poor. By removing pain and allowing the patient to think and feel normal, it has allowed patient and families to address other problems affecting them and bring them to peace.

Recently for the first time the delivery of this has been threatened by the withdrawing of two WHO documents which have assisted us in the treatment

of the pain in adults and children and in advocacy to Governments, to support affordable pain control for severe pain by importation of morphine powder to make the solution which can be used in the home. Removing these documents affects LMICs so no longer can the suffering, in the words of dame Cicely "live until they die".

In summary, the US is suffering from addiction to "opioids". This word covers not only morphine but all the synthetic products now produced by pharmaceutical companies at high price, recommended instead of morphine, which is recommended as the best with least side effects by WHO since 1986. Two Senators from US have complained about two of the publications of WHO, and asked for them to be withdrawn. They have now been withdrawn while they are reviewed.

Please read the Guardian Article which explains the problem: US attack on WHO 'hindering morphine drive in poor countries' | Society | The Guardian. It will be at least a year before these documents are again considered bona fide. Please pray that they will be restored so untreated cancers in particular and other causes of severe pain, will no longer suffer needlessly.



Uganda has led the way in Africa since 1993. Let us keep an eye on this problem on the media and wherever possible join our voices to ensure this simple and affordable form of morphine continues throughout the continent. This is "My Care, My Right".



Prof Dr Anne Merriman
MBE, FRCPI, FRCPEdin, MSc (IntComHealth).

Founder, Hospice Africa

Director of Policy and International Programmes at Hospice Africa Uganda





ROSELIGHT 'S TYPICAL DAY AT HAU

My name is Roselight Katusabe, a Palliative Care Nurse for 9 years, a leader, a wife, mother, student, and guardian. I wake up at 4:30am. I pray, prepare myself then wake up the children and my husband. After a simple breakfast, we set off for school at 6:00am. After dropping children at school, I head to Hospice Africa Uganda where I arrive before 8:00 am.

At Hospice we always begin with prayers. At morning prayers, we update each other on current happenings in the organization and outside, promoting togetherness.

After prayers, the clinical team I am part of has a morning brief where we discuss how to manage our patients better. It ends by 9:30am and I prepare for my day. My day may include patients' home visits, hospital visits or an outreach clinic that takes a long day. If am to stay for an outpatient clinic the same happens. We visit between 4-6 patients and drive in different locations.

After the patients' visits I return to Hospice at around 4:30pm. At this time of return to Hospice, there is no lunch or if someone picked food for me, it's too cold to be eaten. I buy a small tin of yoghurt that sustains me till I reach home. I update the patients' files, keep them as per the records system and return unused medications to the pharmacy. I then prepare for the next day's program.

Now it is time to struggle with traffic jam in a public taxi whereby it takes me 2-2 ½ hours to reach home. When it's very late, I use a 'boda boda' which is quicker but more expensive and risky.

At about 8:00pm when I get home, I bathe some of the children, have dinner and ensure that their home work is done before they sleep. Their Dad helps a lot. Interesting enough, I wake up first and sleep last! After supper, I help the housekeeper to make sure children's uniforms are ready, morning Juice is made to avoid delays when we wake up to prepare for the next day. When am not so tired I do some reading or a bit of my assignments to make sure I catch up with the given deadline. Then I sleep at around Midnight. However, after a very busy week, my husband makes sure I have a relaxed weekend because he understands the nature of my work. This is very helpful and it manages my stress before I start a new week.

In conclusion, when one is a Palliative Care practitioner, and especially in our setting of limited resources, self-care and caring for each other is vital.

Roselight Katusabe
Palliative Care Nurse



THANK YOU IHPCA



Germans at the APCA conference presenting his research

Allow me join thousands and millions of people, on both local and international scenes to congratulate Hospice Africa Uganda and the Institute of Hospice and Palliative Care in Africa upon the silver jubilee anniversary. Deservingly, it is worth celebrating.

Personally, I am indebted to HAU and IHPCA particularly for their incredible support and effort in training, mentorship and advocacy for palliative care. The knowledge and skills

imparted into the health professionals have impacted a lot on the lives of those facing the challenges imposed on them by life-limiting ailments in Uganda, Africa and across the globe.

In my second year of study, I must echo and acknowledge that I have acquired vast knowledge and skills from dedicated and experienced lecturers at the institute. May the Good Lord bless you unceasingly. Adding onto my background of clinical medicine, I have acquired palliative care knowledge and skills ranging from clinical audit, writing grant proposals, improved academic writing skills, managing complex pain and so many others, all of which are part of the course program modules.

Worth mentioning too, is thanking HAU, IHCPA and partner organisations and persons for their generous zeal in financially supporting students with fees, accommodation and meals. Very many students, myself inclusive would not have tasted the glory of palliative medicine had it not been the 'big push' from you people

How you can help



Money

Become a member For information about this, call or send an email

Donate

Hospice Africa Uganda Limited
Standard Chartered Bank (Speke Road)
Account 0108210657908 (UGX)
Account 8708210657900 (USD)
Swift Code: SCBLUGKA

MoMo Pay
Dial *165*4*4#
Enter merchant code **HOSPICE**
Enter Payment Reference (names)
Enter Amount
Enter Pin

Pro-bono Time

Legal, financial services, sustainability planning experts
Volunteer with us

Materials

Bed linen, clothing, essential medicines

UPCOMING EVENTS

- 12th Oct, World Hospice and Palliative Care Day, Voices for Hospice at HAU
- Nov HAU Grand Re - Union Fundraiser
- 1st Dec, World Aids Day



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