

Date: 18/07/2010.

TO: Neilesh Patel.

Founder/President -Healthcare Volunteer Inc – California USA.

Sarah Richardson

Director of International Direct Patient Care Programs

Dear President/Founder,

REPORT ON SIX WEEKS VOLUNTEERING OF ALICIA CARROLL AND ALEX STAPLES IN UGANDA



From L-R Alicia Carroll, Ponny Bukenya – Country Coordinator and Alex Staples on arrival in Uganda

During the last two months of May, June 2010, Healthcare volunteer Uganda received two female USA Health volunteers in the names of Alicia Carroll and Alex staples for six weeks volunteering as from 1st/06/2010 to 15th/07/2010 with the organization. These two volunteers were placed at Kassanda Cornerstone Foundation (KCF)'S partner – the people's medical center where they spent six weeks treating patients both in the field and in house (clinics)

In order to implement all what we have done as per the above period and even up to now, we have depended much entirely on the efforts of two volunteers and this philosophy of, " **No challenge is too great for us in Healthcare Volunteer Uganda to overcome if we work together to build our**

shared future. Small actions sustained over days, weeks, months and years with both the *Direct Patient Care and Rakai HIV/AIDS Education Programs* can amount to a big difference. Through a small and steady monthly donation, you can make a commitment to improve lives for the vulnerable girl - orphans in Rakai District – the HIV/AIDS Epicenter in Sub Saharan Africa.”

During the very six weeks in Uganda; Alicia Carroll and Alex Staples both coming from Indiana, USA have been able to participate in Health outreaches, direct patient care (treating patients at clinics), visiting hospitals and health center where HVU signed partnership in such a way that future volunteers could have a picture of the Uganda hospitals and for helping to recommending those interested and also further still, visited different orphanage sites in Rakai District in preparation for RHEP project.

What the volunteers have been able to do.

- A number of activities have been done by the volunteers on both organization and personal basis, and are here below;

Organization oriented activities

Attended and participated in Health outreach whereby they drawed blood and screened it for HIV/AIDS.



Health care volunteers from USA taking action in taking blood and next testing blood
HIV/AIDS TESTING RESULTS

A sample total of 108 clients have been tested for HIV, males were more responsive to HIV testing compared too, 55 and female were 53.



The pix shows most of men waiting with their blood tubes and next the Counselor in action with the lady. The table below shows the HIV/AIDS aggregate data

Sex	No Tested	%	- out come s	+out comes	HIV Positive cases by age group						
					0-17	17-27	28-37	38-47	48-57	58-67	68+
Male	55	50.9	54	01	-		-		-	01	-
Female	53	49	51	02	-		-	02	-	-	-
Total	108		105	03	-		-	02		01	-



One lady is crying due the results and next, nurse drawing/ taking blood on the client for screening.

Recommendations

HVU and the People's medical Center need to be supported to hold more such HIV/AIDS Counseling and Testing outreach to cover the rest of the 4 Sub Counties: Kiganda, Myanzi, Kitumbi, and Kassanda, to establish substantive prevalence rates for the whole of Kassanda County. We also need to organize home to home HIV testing. This can give an opportunity to those who would otherwise be unable to turn up for testing because of the distance from the homes as well as the disabled, students and those confined to bed due to sickness.

KCF and the People's medical Center with heartfelt gratitude extend their sincere thanks to The Health care volunteer Uganda which is a branch of Health care volunteer -the Californian USA based nonprofit organization for Counseling and testing outreach in Kalongo Bukuya sub- County.

We Very much hope that more help will be provided to cover up the rest of the 4 Sub Counties of Myanzi, Kiganda, Kitumbi, and Kassanda. This would establish substantive indicative figures on the infection rate in the whole county. It will also help us to plan for follow up of all the HIV/AIDS positive outcomes in the Kassanda County.

The in charge to the People's medical center raised an issue of opening up centers in all the five sub counties in conjunction with HVU for easy referral system to people with HIV/AIDS.

- Participated in treating patients in average, the two USA female volunteers treated 18-20 patients on a daily basis, 90-100 on weekly basis. Therefore in totality they (2volunteers) treated overall 540-600 patients during their six weeks stay in the country.



Volunteers in action treating patients

- Participated in KCF – Partnering for Positive Living livelihood Project (PPLP) Field monitoring activities whereby, they were able to have a chance socialize with people living HIV/AIDS and community care givers based in the field.
- Participated in the discussions on how we can implement an OVCs project for the girl children of Rakai – RHEP

Things done at individual level;

- Healthcare Volunteer Uganda and volunteers themselves financed some travels / trips of the volunteers like;
- Volunteers had a safari trip to Queen Elizabeth national park in western Uganda.
- The volunteers toured Eastern Uganda where they were able to visit the source of the River Nile, the Bujagali falls Owen falls dam and the bridge joining the Eastern to the Kampala city



Healthcare volunteers at the source of the Nile River during their tour and volunteer site monitoring in Kamuli district.

- HVU made visit with volunteers to Rakai – the HIV/AIDS Epicenter where they were able to visit orphanage sites, hospitals of Rakai and Kalisizo



Healthcare volunteer team visited girl orphanage home in Kagamba Rakai District, Uganda



Healthcare volunteer team poses for a photo with Rakai doctors at Rakai hospital during volunteer sites monitoring.



Healthcare volunteer team visited Kassanda Cornerstone Foundation (KCF) to start volunteering.

Areas visited

- 03 household in kaleere parish Dwaniro sub-county Rakai district
- 06 households in Kimuli and Lwabakooba parish in Kagamba sub-county Rakai District

Status of the households visited

1. The first household visited was in Iwanga village, Lwabakooba parish. The household head was identified as one Jjuuko Yonasan (a widower and disabled living with HIV/AIDS) living with 14 children (orphans) ie of 7 male and 7 female.
 - (a) The house they lived in was a grass thatched hut and too small to accommodate the family.
 - (b) The children lacked clothing and others were infected with jiggers.
 - (c) They looked malnourished, unhappy and filthy
 - (d) Health care volunteers donated few clothes to the vulnerable children
2. The second household visited was in Kempis village in Kimuli parish Kagamba sub-county. Its head was identified as Mrs. Naggayi Christine (a widower) with 06 orphans 3 female and 3 male.
 - (a) They lived in a dilapidated house and the children lacked enough clothing. They too looked filthy and malnourished
 - (b) They too were given second hand clothes by the Health care volunteer Uganda.
3. The third household was found in Lwentulege village in Kimuli parish, Kagamba sub-county. The household head was a widow ie Ms Nantale Anent. She lived with 7 needy children orphans 5 boys and 2 girls.
 - (a) They too received some clothing from the visiting team.
4. The fourth household was headed by a young boy named Ssengabi Francis he lived with his young brothers (orphans) ie 2 girls and 2 boys. They too were vulnerable.

5. They filthy household was headed by a widow called Kobusingye Josephine with 4 children including a 7 yr girl completely disabled (invalid and dumb). These lived at Kikuutu B Kimuli parish, Kagamba sub-county.
6. The sixth household was located in Kaleere parish zone B. the grand mother lived with 08 orphans. The grandmother was also a widow and the children belonged to her late sons. They lacked shelter, medical care and clothing. They also lacked scholastic materials. The household head was one Nyina Mivumbi.
7. The seventh household was located in Kakunyu village its head was Namuddu Kizza (a widow) with 4 orphans who lived in objects poverty.

(iii). Cross cutting problems

- Lacked of shelter
- Lacked of clothing
- Lacked of clean water
- Lacked of scholastic materials

(iv). Recommendations

- All households ought to be provided with permanent shelter, clothing and scholastic materials. They need also to be tested for HIV virus and their parents/ guardians need counseling and sensitization on:
 1. Domestic hygien
 2. Intensive commercial farming to enhance their household income
- Met and discusses with Rakai District Health Service top officers about their presence in the area and the services we intend to give them they welcomed us.

Promises made by volunteers to HVU

- To help fundraise for RHEP project for the girl OVCs in Rakai District especially those households visited during the trip to Rakai and other vulnerable families.
- Suggested ways on how we can work together to sustain the programme Alex and Alicia are going to contact the Ten thousand dollars – organization where we can send crafts and be sold out such that money can be used to help the children programme
- Promised to keep intouch with us (HVU) for programme development.

Lastly the volunteers interacted well to whomever was involved in to their stay in Uganda and to my happiest note however, they have left behind so many friends.

Yours truly,
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