Mengo Notes

Vol. 58

Winter 2024/2025



WE CAN MAKE A BIG DIFFERENCE!

WELCOME TO MENGO NOTES 2024

Dear Friends

Welcome to the latest issue of Mengo Notes which I hope you will enjoy reading. I am grateful to everyone who has contributed to writing pieces for this issue and for sharing their stories.

Something that has really struck me since taking over as Editor are the family connections with Mengo. In this issue James Stileman writes about a recent visit to Mengo and Emily Cook shares a report on a laparoscopy camp at the Hospital. James is nephew to Charles Sergel who worked at Mengo and Emily is great niece of Sir Albert Cook who founded Mengo and her grandfather Jack Cook was a surgeon at the Hospital for 20 years.

My brother Richard and I are honoured to serve as trustees. A relatively easy job compared to the job that our dad Hugh Oliver did at Mengo for 16 years supported by his wife Gwen. In those days a nurse would walk up the hill in the middle of the night to knock on the door and ask him to come and treat an emergency patient, often a difficult birth.

And when I look through the mailing list there are so many names that Richard and I grew up with, Billington, Wills, Lavy, Whitlock, with many of us born in Annie Walker Ward. It turns out a colleague of my wife's was born there a few weeks after me, delivered by a man who her mum says, 'seemed to be doing everything at the hospital'. Quite possibly dad.

I know that new connectioins are being made today between staff at Mengo and medical students doing electives or volunteers sharing their skills on training camps. Long may this continue.

As trustees of Friends of Mengo UK, we recognise that the Hospital is now a multi-million-pound business (no idea what that is in shillings!). The support that Friends of Mengo UK (FOMUK) gives to the hospital is small in terms of percentage of turnover but time and time again staff at Mengo thank us for continuing to offer that support. And it is only thanks to you, the Friends of Mengo, who donate, volunteer, share skills and knowledge, choose to spend their medical elective at Mengo, leave a legacy, and pray, that any of this is possible. So, thank you.

And I am sure that the patients rushed to hospital in the ambulance that FOMUK helped fund, would want to thank you, that the patients who had life saving laparoscopic surgery at a recent training camp would like to thank you.

A big thank you also to Grant and Beverley Whiteing who for the last 10 years have designed Mengo notes. I hope this issue comes somethere near your standards!

Please do contact me if you have any feedback about this issue, memories of being at Mengo or a good story to tell in the next issue of Mengo Notes.

Anthony Oliver, Editor, Mengo Notes

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Cover photo - elective student Becca welcomes a new life into the world.

REPORT ON A RECENT VISIT TO MENGO

By Mr John Dalton, Chair of Friends of Mengo UK

I was pleased to spend time at Mengo in September/October 2024 and to catch up with many friends and colleagues there.

Joel Oroni, the Hospital's Deputy Medical Director Administration took me on a tour. Talking through the Hospital's finances, Joel told me he is keen to invest in projects that would free up revenue in the long run to be reinvested in clinical services.

Regular readers of Mengo Notes will know water has been problematic at the Hospital for many years and Joel confirmed it remains a critical issue. The original spring cannot provide an adequate supply and there have been times when Kampala City Water has been out of commission for over a week resulting in significant expenditure on water tankers being brought to the Hospital.

Provision of onsite accommodation for students at the Hospital's training schools has saved the cost of more expensive of site accommodation. But this has significantly increased demand for water. Geological surveys on Namirembe Hill discovered water and two new boreholes have been drilled within Hospital grounds. The first near the General Outpatients department and the other by the Eye Hospital. Both have been drilled to a depth of over 100 metres and are producing water which is an exciting development. At one we met Isaac Mukiibi, Hospital Engineer who opened the inspection cover and it was fantastic to see clean water flowing at a great rate.

Whilst this helps, to be fully self-sufficient, the Hospital remains reliant on a well off site. It is thought this well has potential to provide a better source of water deeper down which is likely to be cleaner. To access this the Hospital needs to drill a new borehole, install a pump and wider bore pipes back up to the hospital. An onsite water treatment plant and large storage tanks would also offer better water security at the Hospital.

I had an informative and encouraging meeting with Dr Nsingo Simon Peter, the new Medical Director who I first met at the laparoscopy camp in March. We discussed the future of Friends of Mengo UK, and I pointed out that we are a small charity with limited funds. I was encouraged that he felt Friends of Mengo UK is important nevertheless and one of the biggest 'friends' contributors to Mengo in the last year. He was enthusiastic about the Surgical Camp (see pg 8) and felt it a very beneficial endeavour. He would support further collaboration on future camps.



Engineer Isaac Mukiibi with one of the new boreholes.

The all-important Hospital electrics were also discussed and there was enthusiasm for investment in more sustainable supplies including solar and in reduction of demand. New consolidated supplies and generators may also be required. Paul Darrall an Electrical Engineer and Committee member plans to visit Mengo before the year is out to help plan a way forward.

Two further building projects were discussed. The refurbishment of Jajja Gwen's guest house (and grave) for use by visitors or on duty medical staff. Secondly, extension of the Chapel which could prove of interest to other Christian funders that might consider a co-funding arrangement.

It was lovely to see an old friend in David Komunda who is keen to get his book on the history of Mengo Hospital to the typesetters and copies out to the UK, US and Canada. His passion for Mengo always amazes and encourages me!



Joel Oroni (left) David Komunda (right), former Hospital Administrator.

DR NSINGO SIMON PETER, MEDICAL DIRECTOR

Friends of Mengo UK welcome the new Medical Direcotor of the Hospital. Trustees were pleased to meet him at a recent committee meeting and look forward to working with him in the future.



Dr. Nsingo Simon Peter joined Mengo Hospital as Medical Director in December 2023, bringing over a decade of impactful leadership in healthcare management. Known for his dedication to patient-centred care, Dr. Nsingo has built a career marked by transformative improvements to healthcare infrastructure, human resources, and stakeholder engagement.

Prior to Mengo Hospital, Dr. Nisingo served as Hospital Director at Mukono COU Hospital for six years, where he successfully led infrastructure expansions that boosted patient capacity by 40%, enhanced emergency services, and introduced advance medical equipment. His leadership improved patient outcomes and created a modern, adaptable healthcare environment in the area.

Dr. Nsingo has been instrumental in human resource development, having implemented training and career development initiatives that reduced staff turnover by 20% and fostered a cohesive, skilled workforce. By engaging with both local and international stakeholders, he has secured funding and resources that sustain high standards of care and create a growth-oriented workplace.

In addition to his healthcare leadership, Dr. Nisingo is committed to academic mentorship. As a part-time lecturer at Uganda Christian University, he teaches Obstetrics and Gynaecology, and Healthcare Administration preparing students for dynamic careers in healthcare. He also serves on multiple boards in the healthcare and education institutions where he contributes his expertise in governance, financial stability, and policy reform to improve healthcare access.

Dr. Nsingo holds a Bachelor of Medicine from Gulu University, a Master of Medicine from Makerere University and a Master of Public Administration and Management from Uganda Christian University. He is passionate about collaborative solutions that leave a positive, lasting impact on communities.

Outside of work, he values time with his wife, Dr. Irene Nsingo, and their three children.

FAMILY CONNECTIONS

By James Stileman

On a business trip to Kampala in October 2022, I was taken up Namirembe Hill to St Paul's Cathedral. It is a wonderful vantage point from which to introduce first-time visitors to the city. One of the landmarks my host pointed out was Mengo Hospital which abuts the cathedral's land. "Mengo Hospital," I said, "I know Mengo!" My uncle, Dr Charles Sergel served there as a CMS medical missionary for a brief period before the war and eight years afterwards. And through that connection, a family trust of which I am a trustee, has made regular donations to the hospital for many years. But the link with Mengo was largely through another uncle and fellow trustee, so my knowledge of it was limited. I was keen to explore but only had time to wander briefly round the compound and take a few photos. This was likely to be a one-off trip to Kampala, so I left disappointed.

I need not have worried. In May this year I found myself back in Kampala on business completely unrelated to my first trip. This time I could plan ahead, and through Anthony Oliver arranged to be shown round the hospital by Denis, the public relations officer, and meet Henry Luweesi, the hospital's principal surgeon. What a fascinating and uplifting time I had. As a grant-giver, it is always a joy to meet beneficiaries and it is especially heartwarming when there are family ties.

Henry took me to the old surgical department where Uncle Charlie had operated decades earlier (see photo to right). The theatres are currently used for laparoscopy simulation training. Henry has plans to transform the wing into a specialist centre for teaching laparoscopy to the whole region of Africa centred on Kampala. He then took me to meet the team at the new surgical department and showed me two second-hand laparoscopy units procured from the



James with Henry and other staff.

UK in collaboration with Leeds University and Friends of Mengo. He enthused about their transformative impact. Encouraged by this I produced a photo of a plaque attached to an Xray machine which the family trust had helped purchase in memory of Uncle Charlie. I asked whether I might see the machine. When Henry learnt he died in 1980 he politely pointed out the machine had long since been decommissioned! But Henry's appreciation of assistance from UK partners and his infectious enthusiasm was a privilege to witness and so I left thoroughly inspired.

My work now requires me regular visits to the Democratic Republic of Congo. The easiest way of travelling there is via Kampala to Arua in northern Uganda and across into DRC. So, I will have plenty of opportunities to return to Mengo in the coming months and years. I intend to make the most of them. 23/10/24



BECCA AND CHARLIE - MEDICAL ELECTIVES

In part thanks to Friends of Mengo UK Chair, John Dalton, Leeds Teaching Hospitals NHS Trust has built a strong partnership with Mengo Hospital. This includes doctors in training spending electives at the hospital. In 2024 Charlie Rogers and Becca Pepple chose to take their fourth-year elective at Mengo. They told Mengo Notes about their experience and what they learnt about Uganda's rich culture.

For our fourth-year elective at the University of Leeds, we decided to travel to Mengo Hospital in Kampala, Uganda. There we undertook clinical attachments in Obstetrics and Gynaecology, a specialty we have wanted to pursue for several years based on our time at Leeds School Of Medicine. We spent most of our time on the general maternity ward Mpereza, working under the lead consultant Dr Billy Ndiwalana.



Becca meets staff at Mengo.

It was great to really get involved clinically. The day generally started with the morning handover from the on-call team followed by ward rounds and assisting in surgical procedures. One of the most common operations was Caesarean section and we got lots of experience with those. However, we also got to assist with myomectomies (fibroid removal), hysterectomies (removal of the womb) and MVAs (a type of surgical management of miscarriage).

Unlike in the UK, newly qualified doctors in Uganda are expected to perform operations, so as students they need to get a lot of exposure. Our elective meant we had far more exposure to surgery than our experience as students in Leeds. It was exciting and yet nerve-wracking to spend considerable time assisting in theatre but this has significantly improved our confidence with surgical skills.

We also spent time in antenatal clinics, on the wards and in the labour suite, clerking and reviewing patients where needed. The clinics ran very similarly to the UK but the doctors saw many more patients and were in much higher demand.

Our elective in Uganda was a life-changing experience from a personal and medical perspective. It gave us a great insight into obstetrics and gynaecology in a low-income country and offered practical experience in a way that we have not been able to experience in the UK. It's clear there are drastic differences between Uganda and the UK but our experience at Mengo has really opened our eyes to a career in obstetrics and gynaecology.

Uganda is a culturally rich country which has so much to offer outside of a clinical environment. Some highlights away from the hospital included safari weekends, nights out with interns from Mengo and a trip to the source of the Nile in Jinja.



Charlie masked and gowned and ready to assist.

We spent time visiting local landmarks - The Kasubi Tombs, Gaddafi Mosque, Kabaka's Palace and the Houses of Parliament to gain a more in-depth appreciation of the rich culture in Uganda. We strongly believe that connecting with the local culture and showing appreciation and knowledge of the history helps you to bond with local people and illustrates your openness to learn. This is a pivotal part of treating the patients that live there.

This was surely both from a clinical and leisure point of view, the best elective experience available. We are so grateful to the entire team at Mengo Hospital who were the most kind and welcoming people. **Beccy Pepple and Charlie Rogers, October 2024.**

ANDREW BILLINGTON 1949-2024

Trustee and President FOMUK

Born in the Annie Walker ward of Mengo Hospital on 24th January 1949, Andrew Billington was a lifelong supporter of the Hospital and Friends of Mengo UK serving as a trustee from 1998 to 2023, as a former Chairperson, and latterly as President.

Through his father Roy, who had worked alongside Sir Albert Cook, Andrew linked back to the founding of the hospital at Mengo. Roy, his wife Dora, and family lived in a house below Namirembe Cathedral (now the site of the Blood Bank). From there in 1955, Andrew attended Nakasero Primary School.

Andrew recalled how "home life in Kampala was very happy. I usually went around without shoes and my feet became very brown with tough and rough soles so there was no hardship in walking on stony ground. Our 'houseboy' would remove burrowing jiggers from my feet from time to time."

In 1970, now living in England, Andrew decided to hitch hike from London to Kampala, a journey that included a short time in an Egyptian jail, problems with thieves and a sandstorm in the Sahara.

In his professional life, Andrew was a key driver in the UK voluntary sector serving in senior positions with John Grooms Association for Disabled People (now Shaftesbury) and Winged Fellowship (now Revitalise Respite Holidays). In 1998, on the invitation of Jack Petchey, Andrew helped establish the Jack Petchey Foundation to support young people aged 11-25. The Foundation remains one of the largest and most influential grant-making trusts in London spending over £10M in 2023.

In 2002, Andrew and his wife Penney helped fund construction of a secondary school in Kadungulu, Eastern Uganda and later, a vocational training centre in Serere. For many years they visited twice a year to support and develop them both.

Penney recently wrote that *"Andrew loved to visit Mengo Hospital and would take a real interest in the lives of patients, relatives, and staff. Sometimes he would choose to visit the wards late in the evening when the hospital was quieter. He also felt the responsibility of checking that funds raised by Mengo Friends were used appropriately."*

Trustees of Friends of Mengo over the years will agree wholeheartedly with that last point and remember Andrew's energy and enthusiasm, thoughtful engagement with discussions but also the ability to drill down into projects to check their validity and need for funding. We miss him a great deal and valued him as a wise and critical friend.

We are grateful to Andrew for leaving a generous legacy to the work of Friends of Mengo UK.

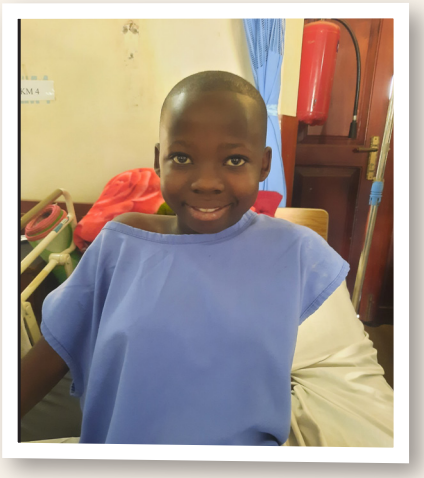
Our thoughts and prayers remain with Penney, Anna, Chris and all the family.



DEVELOPING LAPAROSCOPIC SURGERY AT MENGO

In March 2024 I had the pleasure of joining a team from Leeds Teaching Hospitals NHS Trust (LTHT) to take part in a week-long Laparoscopic (keyhole surgery) Camp at Mengo Hospital. The team was led by Mr John Dalton, gynaecologist and Chair of FOMUK, and comprised of three general surgeons (myself included), two urologists and an anaesthetist. Dr Joseph Njagi, gynaecologist and laparoscopic surgery expert from Kenya also took part. Dr Njagi provided valuable expertise from within the East African region, particularly from the view of practicing laparoscopic surgery in a developing country compared to what we are used to in the UK. He came with his surgical assistant and two scrub nurses who were able to pass on vital skills to the entire theatre team.

The Camp was organised on the Mengo side by Dr Henry Luweesi, general surgeon, with help from Dr Billy Ndiwalana, gynaecologist. A huge amount of work and effort had clearly been put in by the Mengo team to select suitable patients and make sure everything ran smoothly.



Juliana, pictured above, was one of the beneficiaries of the laparoscopy camp .

Background to the Trip

Some of the Mengo surgeons had visited Leeds in April 2022 and following on from this Mr Adam Peckham-Cooper (general surgeon on the trip) had spent time at Mengo setting up a Simulation Laboratory in July 2022. This enabled the practicing and development of laparoscopic skills before operating on live patients. LTHT had donated laparoscopic stacks and other equipment and FOMH UK paid to transport them to Mengo, so thank you to our supporters who made this possible. The Mengo surgeons had started doing simple laparoscopic cases such as appendicectomy in 2023. By the time of the camp they had done about 30 cases. The idea of the camp was to further develop laparoscopic skills and support the local team in the development of the laparoscopic service.

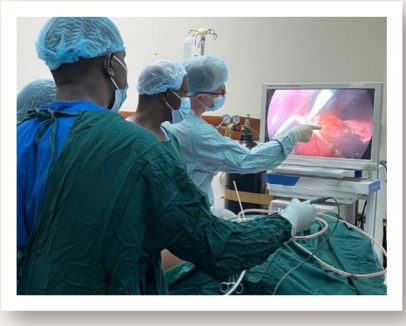
Arriving in Kampala

We arrived in Kampala laden down with bags of laparoscopic kit donated to Mengo from our local hospitals. We had a warm welcome at Mengo, and the week started with an amazing service in hospital chapel where we had many prayers for a successful week and experienced the full joys of Ugandan singing. This was followed by a press conference at which there was national interest because to the best of our knowledge, this was the first minimal access (ie keyhole) surgical camp in Kampala. Dr Henry and team explained the potential benefits of laparoscopic surgery for the local population such as reduced rates of wound infection, shorter lengths of stay in hospital and earlier return to work.

Getting to work!

After a tour of the hospital and the medical school we got to meet some of the patients that had been selected for surgery, and then it was down to action! It was a full-on week and we managed to operate on 30 cases, both elective and emergency: five appendixes, four gallbladders, three reflux operations, four hernia

repairs, one colectomy and 12 gynaecological cases. All the patients did well and almost all of them went home the following day. It was decided that one fibroid removal should be undertaken as a traditional open operation as opposed to keyhole.



Prof Toogood helps Mengo staff skill up.

Learning and Debrief

There was a great deal of learning both ways, and not just in theatre. Mr Shekhar Biyani, Consultant Urologist, was busy in the simulation lab training on basic laparoscopic techniques, as well as organising teaching sessions for the medical students. The UK team learnt a lot about improvisation and re-use of kit, and it really opened my eyes to the amount of surgical waste we have in the UK with our single-use instruments.

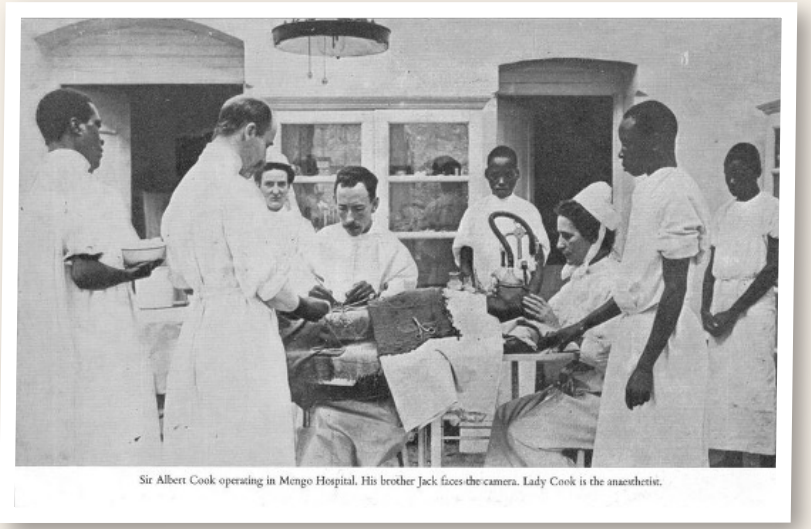
At the end of the week, we had a debrief and reflection. The Mengo team were incredibly grateful for our time and support. In return we congratulated them on what they had achieved so far in introducing the service under difficult circumstances such as not being able to guarantee a consistent power supply and with the lack of laparoscopic surgeons currently in Uganda to provide training.

Farewell

We finished the week with a farewell dinner organised by Mengo Hospital at the Ndere Cultural Centre. We got to experience Ugandan food and a fantastic display of traditional dancing which we were all invited to join in with at the end!

On a personal level it felt extremely special to me to be able to take part in the camp and operate at Mengo. My great uncle was Sir Albert Cook who founded Mengo and my grandfather Jack Cook, also a surgeon, who worked at Mengo for 20 years. I hope there will be many more trips to come, as we continue to support Mengo in its development into a centre of excellence for laparoscopic surgery in Uganda.

Emily Cook, Consultant General and Colorectal Surgeon



Sir Albert Cook operating in Mengo Hospital. His brother Jack faces the camera. Lady Cook is the anaesthetist.

A RETIRED MEDICAL DIRECTOR'S MEMORIES OF MENGO

Dr Rose Ntate Mutumba served as Medical Director at Mengo from 2014 until 2024. Trustees fo Friends of Mengo UK are grateful for the advice and friendship that Rose offered during her time in the role.

I grew up in Uganda, where my father was a civil servant and we lived in Entebbe. He joined the African Development Bank and then the United Nations and was posted to different countries. So, as a family he took us wherever he was posted. We lived in Ivory Coast, Senegal and Cameroon and this gave me a chance to learn French. I qualified as a doctor at Makerere University in 1985 and moved to Kenya to work at Nairobi Hospital and eventually got married to a Ugandan doctor in Nairobi. My husband was a physician specialising in nephrology but unfortunately, he passed away 20 years ago.

While living and working in Nairobi, I was sponsored to do Ophthalmology by DAAD, a German academic exchange organisation. I completed my Master of Medicine in Ophthalmology at the University of Nairobi in 1990.

I began doing surgery and found that I liked the results of cataract surgery. It has been wonderful to operate on someone bilaterally blind and the very next day when you take off the eye patches, the joy that patients have when they are able to see has been a great reward and is one reason why I picked ophthalmology as a specialty. You do need a steady hand to be able to operate but I've found it to be a lot of fun.

I eventually moved back to Uganda and in October 1993, I started work at Mengo Hospital. There, I joined Dr. Steve Mattas, an American ophthalmologist who used to work in Somalia, but CBM (Christian Blind Mission) moved him to Mengo Hospital after the war in Somalia started. He became my coach and mentor and was the source of most of what I know in ophthalmology today. We were the only two at that time in Mengo Hospital and worked in a small space between Luke and Katherine wards. The number of patients kept on growing and we were very grateful that CBM supported us in terms of equipment and financial support for staff salaries. When Dr. Mattas returned to the US at the end of his posting, I took over as head of the Eye Department.



Dr Rose Ntate Mutumba

Eventually Dr Christine Nabatanzi joined us along with other highly trained and dedicated doctors, nurses and clinical officers which led to a very good team in the Eye Department. With the number of eye patients growing in volume, CBM eventually helped us build a new Eye Department to serve them better. CBM's mission was to make quality eye care affordable and available and it still is today. Eventually I was able to do a fellowship in Paediatric Ophthalmology in Tanzania sponsored by CBM and then returned to Mengo. Over time as our services developed, Mengo became the premier place for patients with eye problems to go.

In 2014, the position of Medical Director became vacant and the Board recruited a new MD but they left soon after appointment. The Board then asked me to take on that role at short notice. I was reluctant at first and was worried about the size and challenges of the role. But I was persuaded by my father to take the job and I'm very grateful for his encouragement.

I served as MD for 10 years and in that time was able to take the hospital to new levels which included improving hospital services, developing new infrastructure and new services. The major projects that took place during my term include the development of an oxygen plant and the first private blood bank which was funded with the help of the Rotary Club.

When I started as MD, most outpatient services were run by clinical officers (non-doctor clinicians). So, I started to recruit more medical officers to undertake this critically important role. I also recruited excellent administrative and financial members of the management team. In addition, I led the digitalisation of the hospital finances which has been a key transition in the management of accounting and budgeting. My leadership motto became: professionalism, integrity and excellence. The great majority of the staff at Mengo now are composed of young people so I think I have demonstrated the dream of this motto to new generations of Mengo staff.

Donor confidence also increased over the last 10 years. CBM increased their funding and that's how we managed to build a new eye hospital recently. Our UK friends also increased their financial support which helped that partnership go from strength to strength. As a result of increased donor confidence, the hospital has grown in income and services which has enabled us to continue to offer specialised healthcare.

I praise God for the opportunity he gave me to serve in different roles at Mengo and I'm especially grateful for our Friend groups all over the world and the Rotary charity too. I think Mengo and other mission hospitals still have a big role to play in healthcare in Uganda. 40-50% of healthcare is provided in private hospitals including the former Mission 'Private Not For Profit' hospitals. These units tend to be well run and have high standards, yet their care is affordable to most people. I hope the new MD continues to lobby the Ministry of Health for financial support to be given to PNFP institutions to enable affordable quality healthcare at these places to continue. Currently, the Ministry of Health supports services in the community (outreach) offered by Mengo but we would welcome more support for hospital services too.

I retired in December 2023 and I now continue to do some clinical work elsewhere in Kampala. I'm pleased to have contributed to improving eye care in Uganda throughout my career. But I'm also proud to have reduced maternal and neonatal mortality at Mengo Hospital which led to Mengo Hospital winning an award for high quality Maternity Care in 2020 which in turn is an important part of what Mengo is known for.

I have three children - one son and two daughters, all of whom are married. Each of my children have two children which in turn means I have 6 grandchildren all between the ages of 8 and 1 years old. They give me a lot of joy. My mother is still alive and I'm pleased to be able to spend more time with her and the rest of my family. I'm very grateful for the support from all Friend groups and pray that it continues to enable health care to improve in Uganda.

Supporting Friends of Mengo with a Legacy

Over the last few years Friends of Mengo UK has received a number of generous legacies. Some from people who have supported Mengo for many years but some from people we have never heard of or know of any connection to the hospital.

A legacy is a wonderful way of ensuring that you can continue to support causes that are special to you after your death.

Please would you consider making a legacy to Friends of Mengo? This can be done when you make or update your Will or by the addition of a simple codicil.

INTEGRATED MENTAL HEALTH SUPPORT IN MENGO'S HIV CLINIC.

Dr. Edith Namulema MBCHB, MSc Epid, Dr.Phil IPH, Programs Manager HIV/AIDS reports on mental health work with HIV patients.

At the Mengo Hospital HIV Clinic, we are dedicated to enhancing the quality of life and survival of children, adolescents, and young people living with both mental health disorders and HIV. Our integrated approach focuses on providing comprehensive care that addresses both physical and mental health needs. By coordinating with mental health professionals, offering tailored counselling, home based care and ensuring adherence to antiretroviral therapy, we aim to create a supportive environment that promotes overall well-being and long-term health outcomes for these vulnerable populations.

The project supported by Friends of Mengo UK, is being implemented by a dedicated team led by the Program Manager, a Mental Health Clinical Psychiatric Officer, a Psychiatric Nurse, the HIV Clinic Manager, and a driver. This year, we have continued to provide mental health care services, with the team having received specialised training from the Ministry of Health.

Our interdisciplinary approach to mental health services has enabled us to screen, identify, and refer children, adolescents, and youth living with HIV who exhibit signs and symptoms of mental health problems during our Saturday Children and Adolescents clinics. The team conducts assessments for physical violence, gender-based violence, sexual violence, and depression, often resulting from factors such as lack of food, shelter, excessive alcohol consumption by caretakers, and the absence of parents due to death, abandonment, or imprisonment.

Additionally, affected children are continuing to receive treatment and are followed up in their homes to assess the home environment and understand the root causes of their problems.

For most children, we have documented the root cause of their mental health challenges. Parents and caretakers are actively involved in planning a holistic mental health and HIV care package, ensuring a comprehensive and supportive approach to their care.

Overall, 407 children, adolescents and young people were assessed for mental health problems. 224 were female, 183 were male and 59 scored above 6 on the screening tool, hence categorized as having mental health challenges. These were further re-assessed, counselled and 47 required the intervention of the psychiatrist. All 59 children have been visited in their homes with significant problems within the households being identified as contributing factors to their mental health issues. We continue to provide psychosocial support and counselling to children, and their caregivers by phone.

We are grateful for the kind donation of £4,625 from our friends in the UK, which has enabled us to execute this project.

October 2024



Staff outside the HIV Clinic

Memories of a Friend

I was delighted to receive Mengo Notes yesterday and catch up with the latest news and all that is going on there. It looks so smart! My husband, Stephen, died suddenly six years ago now. I know he would have been interested to hear about Mengo as well, partly because of the Mission background.

What I wanted to say is that our eldest son, Simon was born there. We drove up from Kabale in advance and he arrived two weeks later. He seemed to be alright but was not feeding well. Great care was taken by Mengo staff and he was constantly monitored.

It was then decided that he would have to move to the main hospital where a major operation was performed and showed that he had a tracheoesophageal-fistula which was corrected and he recovered slowly over the next month or so. Now in his mid 50s he is a strapping lad but is still a bit wary of how he eats.

Many years later we returned to Uganda and went back to see his name in the Mengo Hospital births book. There were two columns opposite the name - 'well' or 'unwell' - and there is his name in red, I think, in the 'unwell' column. All the care he had at Mengo I am sure helped him on his way.

We had a a very interesting and happy trip and one evening we had a lovely dinner outside with a group of Ugandans who we were supporting. We had to stand up and say our name and where we came from. When Simon stood up he said' my name is Simon Brazier and I was born in Kampala'. Eh, they all shouted, ' he's one of us!' It was such a lovely moment.

I wish you all well and look forward to hearing the next instalment of Mengo Hospital.

All good wishes, Pat Brazier.

FRIENDS OF MENGO UK



Started in 1959 when the first issue of Mengo Notes was printed and circulated to 1000 friends, supporters, employees and ex- employees. All those who responded became "friends". UK Friends of Mengo gained charity status in 1983 with the following aims:

- To advance the Christian religion in Uganda, and particularly at Mengo Hospital
- To provide medical and surgical advice and aid
- To provide training for nurses, midwives, and other medical workers in the prevention and cure of disease

TREASURER'S REPORT

For the year ending 31st March 2024:

Total Income:	Total Expenditure:	Closing balance:
£30,342.69	£70,383.79	£83,079.06

During this tax year (2023/24) the following funding was made available to the hospital:

- 15/05/23: £33,350 for the local purchase of laparoscopy equipment
- 11/07/23: £4,650 directed funding for the Mental Health Department
- 10/08/23: £26.485 for the local emergency replacement of theatre anesthetics

UK based Expenditure included:

- **02/10/23: £250 laparoscopy simulator carriage charge, preparing for export**
- **19/01/24: £5,000 laparoscopy equipment export charges**
- **Administration charges including bank costs, website maintenance and Mengo Notes printing costs: £673.79**

In addition, during the past 6 months:
Funding made available to the hospital included:

- Funding has been made available for a Laparoscopy Training Event, held within Mengo Hospital. Access was granted to previously received funding already held by the hospital for the water project which is currently still under review.

WHY DO YOU SUPPORT MENGO HOSPITAL?

Over the years that I have been the treasurer for Friends of Mengo, I have had some diverse and interesting conversations with you, our donors. Often a letter or email accompanies a donation going some way to explain what has led you do contribute to a hospital that is over 4000 miles away in East Africa.

You may have been born there or had a physical connection in visiting. You may know someone who has visited or been inspired by a speaker to your church with a copy of Mengo Notes in hand. Or you may simply have searched the Internet and found our website.

Whatever the reason we are very thankful for your commitment, both in prayer and funding, which helps us co-sponsor the vital work in and around Mengo.

We would like to explore this a little more and it would be great to hear from you as to why you have supported us in the past and perhaps what you would like to know more of in the future.

Please do get in touch and let us know.

It may even make an interesting piece in the next copy of Mengo Notes!

Help us support Mengo Hospital ...

If you would like to be a friend of Mengo Hospital, or if you would like to get more involved, please complete the form below, ticking the relevant boxes and return it to us or email John Dalton at **jawd2@cantab.net**. If you would like to make regular donations please also complete the Standing Order Mandate and return both forms to us.

Title: _____ Forename(s): _____ Surname _____

Address: _____

_____ Post Code: _____

Email: _____

- ☐ Please send me future issues of Mengo Notes by post/email (delete as applicable).
- ☐ I would like somebody from FOMH UK to contact me with information about organising a fundraising/awareness event.
- ☐ I want to make my donations go further, so please **Gift Aid this donation as well as all my future donations to Friends of Mengo Hospital UK (registered charity number 289737) and all donations I have made for the last four tax years**. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

Using Gift Aid means that for every pound you give, we receive an extra 25% from the Inland Revenue, helping your donations go further. This means that £10 can be turned into £12.50 just so long as donations are made through Gift Aid. Imagine what a difference that could make, and it doesn't cost you a thing.

giftaid it

Completed forms should be sent to: Friends of Mengo Hospital UK, 18 London Road, Great Shelford, Cambridgeshire, CB22 5DD or you can scan this form and email it to our Treasurer, Richard Oliver, at *oliver47@virginmedia.com.* To qualify for Gift Aid, what you pay in income tax or capital gains tax must at least equal the amount we will claim in the tax year.

Standing Order Mandate

To: the Manager of _____ (Bank / Building Society name)

Address: _____

_____ Post Code: _____

Customer Account name: _____

Sort code: _____ Account number: _____

Please set up the following Standing Order (cancelling any previous instructions regarding this payee) and debit my account accordingly:

Amount: £ _____ - ___ Amount in words: _____

Date of First Payment: ____/____/____ (dd/mm/yy)

Frequency: Monthly / Quarterly / Yearly thereafter on the same day. (Select as appropriate.)

Benificiary details:

Bank: CAF BANK Ltd, Kings Hill, Kent. Account name: Friends of Mengo Hospital

Account number: 00082896. Sort code: 40-52-40. Reference [for internal use]

Signed: _____ **Date:** ____/____/____ (dd/mm/yy)

IMPORTANT: Please return to Friends of Mengo Hospital UK and not to your bank.

Helping is simple...

There are plenty of ways in which you can help us support Mengo Hospital. Here are just a few suggestions:

- **pray** for us and for the needs of the hospital

- **join our mailing list**
  Send an email to John Dalton - **jawd2@cantab.net**

- **donate by post or via our website**
  Please make cheques payable to Friends of Mengo Hospital or make a BACS payment direct to our CAF bank account – details overleaf. There is also a gift aid form overleaf.

- **set up a regular payment**
  Simply fill out the standing order mandate overleaf.

- **organise a fundraising/awareness event**
  This can be anything ... how about a coffee morning at your church, a bring-and-buy sale or even a sponsored sky dive!

- **visit Mengo Hospital**
  Why not spend some time at the hospital? Even if you are not a doctor, nurse of medical student there are still ways you can help ... nothing beats seeing the hospital for yourself!

- **give through your will**
  A generous legacy could assist 100s if not 1000s of Ugandan patients.

- **shares**
  You can give shares and get exemption from capital gains tax, and that's not all, you get income tax relief on all your giving too!

www.mengofriends.org.uk

Contact us:
Treasurer: **Richard Oliver**
Call us on: **01223 844479**
UK Editor: **Anthony Oliver**
Email: **anthony@aoliver.co.uk**
Write to us at: **FOM UK**, 18 London Road, Great Shelford, Cambridge. CB22 5DD

Friends of Mengo Hospital UK is a registered charity under the Charities Act 1960 - No. 289737