



2025/2026

ROTARY CLUB OF KOLOLO-KAMPALA PROJECT MAGAZINE



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Editor's Note

Dear Reader,

Greetings from the Projects Desk!

If you're reading this, congratulations, you've just turned the first page of a magazine that took a couple of cups of coffee and a healthy dose of Rotary passion to put together. It's a testament to the teamwork, enthusiasm, and occasional panic that comes with trying to tell the story of service above self. But here we are and I'm glad you're here too.

In Rotary, projects aren't just what we do, they're who we are. They are our love language to the community, our way of giving hope where there was despair, clean water where there was thirst, and opportunity where there was only struggle.

And here at Kololo-Kampala, we've come to learn something rather profound, it's not the size of the project that matters, it's the size of the heart behind it. Whether it's a multi-million-shilling WASH initiative or a humble donation of medicines to the people in Rwampara, each act of service sends ripples of change that we sometimes underestimate.

Projects, in many ways, are Rotary's boots on the ground. You can recite the Four-Way Test, wear your pin daily, and attend all fellowships, but it's when we step into the community, armed with mosquito nets, chalk, borehole parts, or even just listening ears that Rotary comes alive.

Let me also pause here to say a big thank you to our ever-energetic Project contact persons and Director who somehow manage to juggle families, demanding jobs and still show up with a smile and a detailed budget. You are the real MVPs. Without your dedication, our impact would be just good intentions with no plan because someone out there now sleeps under a roof, has clean water, sees better after eye surgery, or now goes to school because of something we did together. That's pretty powerful.

Rotary projects matter because they aren't theoretical, they're touchable, measurable, and deeply human. And at the end of the day, it's not just about the funds raised or the number of volunteers, though those do help. It's about dignity restored, futures unlocked, and humanity shared.

So, whether you're a seasoned Rotarian or just learning the ropes, I hope this newsletter gives you a glimpse of the good we've done and the greatness we're still capable of. And the next time you're tempted to skip that early morning project visit, remember this, Somewhere, someone is waiting and Rotary is how we show up for them.

Until next issue, stay kind, stay curious, and keep doing the good work.

Happy reading,

Sharone Kirabo Nakimera

PUBLIC IMAGE CHAIR

ROTARY CLUB OF KOLOLO-KAMPALA

"Rotary projects matter because they aren't theoretical, they're touchable, measurable, and deeply human."

PRESIDENT'S MESSAGE.



Dear Rotarians, Partners, and Friends

It is with profound appreciation and humility that I extend warm greetings to all readers of this Projects Newsletter. It is a great honour to serve as President of the Rotary Club of Kololo-Kampala during a year in which our service projects have and will exemplify the true spirit of Rotary which is service above self.

This magazine presents a comprehensive overview of the work we have undertaken together, driven by a shared commitment to improve lives and strengthen communities. Through initiatives in maternal and child health, disease prevention, economic empowerment, water and sanitation, and education, we have responded to some of the most pressing needs within our society.

We take particular pride in the impact achieved through our collaborative efforts: the empowerment of women in Namutumba, the enhancement of maternal and child health services in Rwampara and Lumino, the rehabilitation of children with hearing impairment, and our long-standing support to the Naguru Children Reception Centre. Each project, whether large or small in scale, has been implemented with a clear vision and unwavering dedication to humanitarian service.

“Rotary projects matter because they aren’t theoretical, they’re touchable, measurable, and deeply human.”

As we look ahead, I call upon all of us to sustain this momentum. Let us continue to innovate, collaborate, and serve with integrity. The challenges are many, but so too are the opportunities to make a lasting difference.

I thank you all once again for your support, commitment, and dedication to the ideals of Rotary. May we remain steadfast in our resolve to create lasting change in our communities and beyond.

M.D James Africa Byekwaso

PRESIDENT, ROTARY CLUB OF KOLOLO-KAMPALA 2025/2026



MESSAGE FROM THE PROJECTS DIRECTOR.

Greetings Rotarians.

The Rotary Club of Kololo-Kampala is one known for service and we do this through undertaking projects in the communities that are not only impactful but create awareness about what Rotary is all about. This Rotary Year 2025-2026 we are going to do what we do best and continue the spirit of service.

I would like us to reflect on our ongoing projects so that we get knowledge about them and participate fully.

Namutumba Women's Economic Improvement and Health Intervention, a project where Namutumba Health Centre III was equipped with various medical equipment to improve the livelihoods of women, children and men. It has also empowered women by providing them with rice processing and packaging equipment. Our partners from RC Evanston will be here to tour what has been accomplished so far.

The Naguru Reception Centre, a project where we work with the Ministry of Gender to help children from broken families re-unite with their loved ones. We have also helped with construction of a cow shed and planting of leafy greens to improve on the children's feeding.

The Hearing aid and Biomedical Engineering Project, a project to support deaf and hard-of-hearing individuals in partnership with Hear His Voice Uganda and Makerere University Hospital.

Nyakinengo Health Centre, a project provided medical and non-medical equipment to the local church aided Health Centre III. It also empowered women by providing them with sewing machines, as well as training in tailoring.

Restoring Hope to Unemployed Youths, A vocational and economic empowerment project run in collaboration with Yimba Uganda to help youths develop their talents by singing and playing musical instruments.

Kitagwenda Water and Sanitation Project, a project that provides clean water by constructing bore holes and improve sanitation facilities in the Kitagwenda District.

The Rushoka Project, a project that aims to enhance healthcare services in the Rushoka area, particularly at the Rushoka Health Centre IV in Ntungamo District.

Nyamifura (BELEP): a project where a four-classroom block was constructed, computers provided to help the children study efficiently and supply of brass band equipment to develop extra curricular talents.

Kisaabwa Primary School Support: a project where we are providing resources and support to a government-aided primary school to improve the learning environment.

Kakatunda (Maternal and Child Health): The club provided an X-ray scan machine for the community Health Centre II.

Busabaga Primary School: a project where we equipped the computer lab, donated a variety of books to the school library, and organised a tree-planting activity.

We have also partnered with our Rotaract clubs of Kololo and Umu Nkozi University and will continue to support them accordingly.

Regards,

Deo Mutebi

DIRECTOR SERVICE PROJECTS

ROTARY CLUB OF KOLOLO-KAMPALA



COLOUR YOUR WORLD

OUR STRENGTH IS HINGED ON OUR DIVERSITY



WORLD DAY OF CULTURAL DIVERSITY



THE PROJECTS SHOWCASE



PROJECT ONE

ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

PROJECT: Namutumba Women Empowerment and Maternal Health Care.

GLOBAL GRANT NO.: GG/2349279

AREA OF FOCUS: Economic Empowerment and Disease Prevention.

BUDGET: USD 87,754

PROJECT PROGRESS: 95% completion

PRIMARY CONTACT: Rtn. Sam Farouk Mukasa

Economic empowerment of women means that they have the skills and resources to improve their economic status and make the effort to move out of poverty. In addition, it means that they will have the capacity to decide on how to utilize their income and other resources and make decisions affecting their lives.

The conceptualization of the women empowerment was viewed in two major dimensions: economic advancement, their ability to succeed and advance economically and possess the power to make and act on economic decisions. For economic empowerment, we considered their access to productive resources such as human capital (their numbers), financial capital (loans, savings), physical capital (land, machinery), and social capital (networks and mentors). The women of Namalemba have been armed to make and act on decisions regarding the distribution and control of resources and proceeds from their business ventures.

Economic community development will empower the women with capacity to earn money by processing their produce (rice and maize processing techniques) It will also increase awareness in Sustainable agriculture with a touch of economic empowerment; it will provide an electricity powered huller for processing rice and maize to a group of women that are presently growing rice and selling it unprocessed for a price less than a half of the processed rice. Where they attempt to process it, it takes them two days to process one sack, a process that will be reduced significantly. The powered huller will have a capacity to process more than 30 bags a day.

The project will contribute to the economic and social empowerment of women of Namalemba and improve the health environment of the Namutumba health centre III. It will improve the livelihood of women and their families and through trainings they will be enlightened in Business management. We are confident that this project will change their lives.



ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

Thanks to the donors below to the project:

-  Rotary Club of Kololo-Kampala
-  Rotary Club of Evanston Lighthouse
-  Rotary Club of Skokie Valley
-  Rotary Club of St. Charles Breakfast
-  District 9213, Uganda
-  Rotary Club of Barrington
-  Rotary Club of Wheaton
-  Rotary Club of Schaumburg-Hoffman Estates
-  Rotary Club of Bartlett
-  Rotary Club of Los Altos
-  District 6440, USA
-  Rotary Club of Delta Township (Lansing-Waverly)
-  Rotary Club of Arlington Heights
-  Rotary Club of Batavia
-  Rotary Club of Chicago
-  Rotary Club of Glenview
-  District 5170, USA

NAMUTUTUMBA HEALTH CENTRE III STATUS REPORT.

Namutumba Health Centre III is a government aided health Centre located in Namutumba town council, Namutumba district. It is supposed to serve a catchment population of 17395 from three parishes; that is Namutumba central ward, south ward and north ward. However, because of its central location and being along the highway, we serve a population that is almost double our capacity.

We offer both preventive and curative health services for example; antenatal health services, deliveries, postnatal care, emergency obstetric care, immunization, community and school health education, sexual and reproductive health services, inpatient care services, TB diagnosis and treatment, HIV/ HAART chronic care, diagnosis and treatment of non-communicable diseases like hypertension, diabetes mellitus, management of malnourished children, HIV counselling and testing and other laboratory tests, to mention but a few.



Rtn. Sam Farouk Mukasa

ROTARY CLUB OF KOLOLO-KAMPALA

The table below summarizes our staffing.

CARDER	NUMBER	PAYING BODY
Senior Clinical Officer	02	GOV'T
Clinical Officer	01	MJAP
Midwives	04	GOV'T
Health Inspector	01	GOV'T
Nurses	07	GOV'T
Data Clerks	01	GOV'T
	01	MJAP
Counsellors	01	MJAP
Linkages	05	MJAP
	05	VOLUNTARY
Cleaners	02	GOV'T
	02	PHC
Tricycle Ambulance Driver	01	PHC

The facility is managed by a senior Clinical Officer under direct supervision by the Health Sub-district In-charge.

ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

STATUS OF EQUIPMENT RECEIVED FROM ROTARY CLUB KOLOLO - KAMPALA.

During the previous years, the facility received a range of items from Rotary clubs. The table below summarizes the status of equipment received.

ITEM	QTY	DONOR	STATUS	IMPACT MADE
Public Address System	1	Rotary Club of Kololo	Functional, used during antennal and community sensitizations	Health workers communicate with ease to clients
100-seater Tent	1	Rotary Club of Kololo	Functional, used as OPD waiting shade	Currently solved waiting space challenges for outpatient's department
50-seater tent	1	Rotary Club of Kololo	Currently not in use, metallic pipes were damaged by storm	We have plans to repair it so that it serves as laboratory waiting area
Plastic chairs	150	Rotary Club of Kololo	In use	Solved siting difficulties
Delivery Coaches	3	Rotary Club of Kololo	In use, one was taken to Kagulu H/C III, one of the facilities that was referring mothers to deliver at this site as a way of functionalizing the delivery unit	Very good, though we have plans of adding more support down as a mitigation measure to falls.
Examination Coaches	4	Rotary Club of Kololo	In use	Solved examination challenges especially during our heavy antenatal clinics
Metallic Medicine Trolley	1	Rotary Club of Kololo	In use	Our medicine is safely kept with easy retrieval even during emergencies
Water Tanks	2	Rotary Club of Kololo	Functional, in use	Water available all the time, with less expenditure on national water bill payments
Doppler	2	Rotary Club of Kololo	In use	Foetal monitoring made easier
Citizen Blood Pressure Machines	3	Rotary Club of Kololo	Functional	Improved patient care through making appropriate diagnoses of hypertension
Neonatal Warmers	2	Rotary Club of Kololo	One was given to Nsinze H/C IV because there was demand in the Neonatal intensive care unit and it is our district referral health facility	Neonatal hypothermia solved especially in mothers who have challenges in getting baby clothes
Stretcher	2	Rotary Club of Kololo	One was taken to Kagulu H/C III due to need	Easier transportation of accident cases
Solar System	1	Rotary Club of Kololo	Functional, but output does not last for 12 hours	Facility lighting challenges had been solved. Will however need technical assessment to revamp its performance

We really appreciate the kind support you have always extended to our communities.

ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

PICTORIAL



ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

PERFORMANCE SUMMARY.

With the above help, we have been in position to register increase in a number of facility performance indicators as highlighted in the table for some selected indicators. Please note that the targets in the last column are our targets for next financial year.

Our performance for most indicators surpasses the targets just because there is good accessibility and utilization of our services.

INDICATOR	MARCH	APRIL	MAY	JUNE	Annual Target for Next FY (Catchment Pop'n=17395)
Total OPD Attendances	1518	1616	1348	1648	
Total Antenatal Attendances	751	672	817	639	870
Percentage of antenatal clients with a blood pressure measurement	100%	100%	100%	100%	
Total deliveries at the unit	113	120	126	155	835
Total number of children immunized	73	70	75	94	748
Total family planning users	54	50	172	53	2149
Antenatal mothers with haemoglobin estimation done	00	00	11	08	
Number of malaria suspects done MRDT	964	785	1218	1421	
Number of malaria suspects done microscopy	322	272	76	14	

We note however, that we still have poorly performing indicators; for example,

- 1 Hemoglobin estimation for everyone eligible with much emphasis to pregnant mothers as a way of assessing for their iron stores in preparation for increased demand during pregnancy as well as blood losses which occur during child birth. It is recommended that all pregnant mothers have this done at least once during antenatal. We, as a facility are unable to do this because we don't have a hemoglobin estimation machine.
- 2 The gold standard for diagnosing malaria is the use of microscopy. Our microscopy results are dwindling every proceeding month. This is because our microscope is faulty.
- 3 Family planning users are also still low because the commonly preferred method, which are the injectables are rampantly stocked out.

We are therefore requesting for your support in procuring a haemocoel and a binocular microscope.

Additionally, in February 2025, the ministry of health passed a directive of integrating HIV clinics into routine outpatient services. This followed uncertainties in funding by partners that was greatly affecting service delivery. As a way forward, the facility opted to embrace the mixed OPD approach. In this approach, the formally independent ART clinic was shifted into the general outpatient client side, where now, all clients share the same waiting area, clinical rooms and medicine distribution points. Because these are many clients being served at the same time, we have experienced structural challenges as below;

- 1 The former OPD waiting area became too small to accommodate the clients. We resorted to using our 100-seater tent as waiting area. This however, is temporally and has challenges like risk of damage due to stormy weather.

ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

2 People waiting for laboratory tests and results do not have a waiting space. During rainy season, work has to first stop.

It is therefore on that note that we are appealing to you to support us to erect a permanent structure; a waiting area for both OPD and laboratory waiting area.

Looking forward for your usual positive support.

Kyebajja Gorret

IN-CHARGE – NAMUTUMBA HEALTH CENTRE III.

EXECUTIVE SUMMARY – JUNE 2025 MATERNITY PERFORMANCE REPORT

NAMUTUMBA HEALTH CENTER II

In June 2025, Namutumba Health Center II recorded a notable improvement across all key maternity service indicators compared to June 2024. A total of **1,360** patients were attended to, marking a **29% increase** from the **1,054** patients seen the previous year.

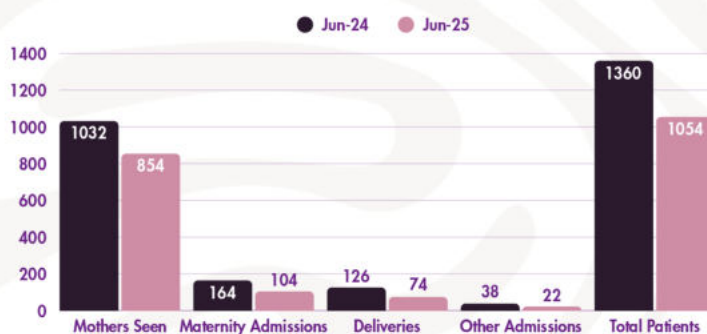
Mothers seen rose from **854** in June 2024 to **1,032** in June 2025, reflecting a **21% increase**, indicating greater health-seeking behavior among expectant mothers.

Maternity admissions increased by **58%**, rising from **104** to **164** cases, pointing to strengthened maternal healthcare engagement and referral systems.

Deliveries saw a significant **70% growth**, from **74** to **126**, highlighting improved community trust in facility-based deliveries and possibly enhanced midwifery services.

Other admissions, which include antenatal or obstetric complications, also surged by **73%**, from **22** to **38**, a possible reflection of better diagnostics or increased awareness.

These upward trends underscore the facility's growing capacity and utilization, suggesting the impact of improved outreach, community mobilization, and service delivery. Continued support in staffing, supplies, and infrastructure will be essential to sustain and build on this growth.



- Most mothers seen opt to have their babies at the facility because of the available space and delivery beds.
- Service delivery has improved since the donations because the systems are not more efficient as well as accurate.
- Other admissions mainly comprise of cases like malaria, urinary tract infections and typhoid.

Observed Improvements.

Reliable Water Supply

1. The water tank has significantly improved access to clean water for maternity and general healthcare services.
2. Hygiene standards have improved, especially in the labor ward and postnatal care areas, reducing the risk of infections.
3. Handwashing facilities are now functional throughout the day, enhancing infection prevention protocols.

ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

Stable Power Access

1. The solar system has ensured uninterrupted power, especially during night hours.
2. Night deliveries and emergency procedures can now be carried out safely with adequate lighting.
3. Refrigeration of vaccines and medical supplies is now more reliable, reducing wastage and ensuring cold chain continuity.

Increased Patient Confidence and Turnout

1. With better infrastructure and more reliable services, there has been a noticeable increase in patient numbers — as reflected in the June 2025 statistics, including a 70% increase in deliveries.

Enhanced Staff Morale

1. The improved working environment has positively affected staff motivation, retention, and responsiveness during emergencies. The tents are highly appreciated supporting the teams to work with comfortably in unfavorable conditions.

NAMALEMBA LADIES ASSOCIATION (THE MILL)

CURRENT CHALLENGE

Interrupted Operations due to Rice Shortage.

As of **June 2025**, the mill's operations have significantly slowed down due to a **lack of paddy rice supply**, exposing a key vulnerability in the enterprise's business model: **reliance on local harvests without a guaranteed supply chain**.

Key Contributing Factors:

- **Seasonal Shortages:** with no structured supplier agreements or bulk purchasing options, the group is at the mercy of seasonal harvest cycles, which has led to downtime during the current off-season.
- **Limited Market Integration:** despite earlier attempts, the association still lacks strong linkages with broader rice markets (e.g., Aggregators, cooperatives, or nearby rice-producing districts).
- **Storage Gaps:** there is no buffer stock or storage plan to maintain rice supply during low seasons, further limiting operations.
- **Cash flow Constraints:** with limited activity, cash flow has stalled, impacting the ability to manage mill maintenance, pay support staff, or contribute to the savings pool.

STRATEGIC INSIGHTS & RECOMMENDATIONS:

Supply Chain Strengthening

- Explore partnerships with neighboring rice-growing regions or cooperatives for off-season supply.
- Initiate contract farming or group purchasing models to ensure year-round access to raw materials.

Diversification

- Consider whether the mill can process other grains (e.g., Maize, millet) during rice off-seasons to maintain income and relevance.
- Offer additional value-added services like rice packaging, branding, or selling bran for animal feed.

Market Expansion

- Engage local leaders, ngos, or district agriculture offices for support in accessing broader markets.
- Link with government food programs or local institutions that need regular grain milling.

Savings and Risk Planning

- Establish a **resilience fund** to cover fixed costs during non-operational periods.
- Train members in **agriculture value chain thinking**, to anticipate and plan for fluctuations.

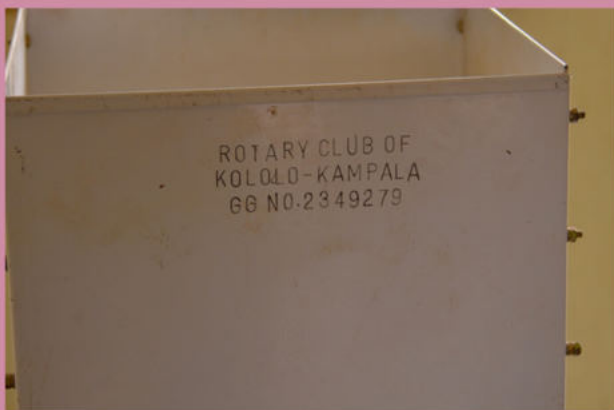
Conclusion

The Namalemba Ladies Association has demonstrated admirable resilience and capacity over the past year. However, the **current disruption due to lack of rice** presents a turning point. To sustain the mill and its impact, the group needs urgent support in **supply chain planning, diversification, and market engagement**. The story is far from over—the foundation is strong, but targeted intervention is now essential to preserve and scale the gains made.

Rotarian Sam Farouk Mukasa
ROTARY CLUB OF KOLOLO—KAMPALA.

ECONOMIC COMMUNITY EMPOWERMENT OF THE WOMEN OF NAMALEMBA IN NAMUTUMBA DISTRICT.

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PROJECT TWO UGANDA HEARING CLINIC (IN MEMORY OF DR. STUART IRWIN)

GLOBAL GRANT NO.: GG/1866567.

AREA OF FOCUS: Disease Prevention And Treatment.

BUDGET: USD 130,000

PROJECT PROGRESS: 90% completion

PRIMARY CONTACT: MD. Dominic Tumwesigye.

Hear His Voice Uganda has made remarkable strides in improving access to the ear and hearing care services in Uganda. The Rotary club of Kololo-Kampala caught wind of this unique contribution to humanity and was willing to partner with Hear His Voice Uganda in a groundbreaking project.

Dr. Sam Zaramba, a retired senior government official in the Ministry of Health and one of the first ENT surgeons in Uganda and a Rotarian in the Rotary Club of Kololo-Kampala was a good friend to Dr. Irwin Stewart who was a Rotarian in Westminster Vancouver and Dr. Brian Westerberg.

Thus, the Rotary Club of Kololo, in partnership with Rotary International and the Rotary Club of Westminster Vancouver, supported Hear His Voice Uganda to implement the Amaloboozi project in memory of the late Dr. Irwin Stewart, a respected ENT surgeon from Canada. Dr. Stewart's legacy continues to inspire a groundbreaking project aimed at transforming the landscape of ear and hearing care in the Sub-Saharan Africa region.

The project's core objectives included increasing access to affordable hearing tests and treatments, building local capacity for delivering quality services, enhancing speech re/habilitation access, promoting evidence-based advocacy and research, and establishing a one-stop centre for hearing and ear care in Kampala.

Thanks to the generous funding the rotary partners, an audiology clinic was established at Makerere University Hospital, along with the first-ever Temporal Bone Lab at the university, setting a new milestone in ontological research and training. Additionally, a state-of-the-art rehabilitation facility was established at Hear His Voice Uganda in Ntinda. These facilities have become key centres for high-quality, affordable ear and hearing care in the region.

Through a comprehensive training initiative, the project has also built local capacity by training over 100 teachers, 20 speech therapists, and more than 100 parents in Listening and Spoken Language (LSL) habilitation techniques. These training sessions have had a far-reaching impact, drawing participants from neighbouring countries such as Kenya and Tanzania.

This initiative not only strengthens Uganda's healthcare system but also serves as a model for regional collaboration in addressing hearing loss and speech challenges. The Rotary Club of Kololo is proud to continue advancing Dr. Stewart's vision, ensuring that more people have access to life-changing hearing services.

Eddie Mukwaya

**COCHLEAR IMPLANT CONSULTANT
FOUNDER, HEAR HIS VOICE UGANDA**

PROJECT THREE



REHABILITATION OF CHILDREN WITH HEARING IMPAIRMENT IN UGANDA.

GLOBAL GRANT NO.: GG/246129
AREA OF FOCUS: Disease Prevention And Treatment.
BUDGET: USD 59,000
PROJECT PROGRESS: 60%
PROJECT PARTNERS: Rotary Club of New Westminster and Hear His Voice Uganda.
PRIMARY CONTACT: MD. Dominic Tumwesigye.



MD. Dominic Tumwesigye.
ROTARY CLUB OF KOLOLO—
KAMPALA.

The Rotary Club of Kololo-Kampala has always been at the forefront of making a positive difference in the lives of vulnerable individuals, and one of its standout initiatives is the Rehabilitation of Children with Hearing Impairment project. This initiative is a beacon of hope for children facing hearing challenges in Uganda, as it seeks to provide the necessary support, education, and assistive devices to help them lead a more fulfilling life and integrate seamlessly into society.

Hearing impairment is a significant issue affecting many children in Uganda, particularly those from low-income families. The lack of early detection and adequate support systems often leads to social isolation, limited educational opportunities, and reduced quality of life for these children. In a society that often overlooks individuals with disabilities, the Rotary Club of Kololo-Kampala recognized the pressing need to address this gap and provide an avenue for these children to thrive.

By focusing on the rehabilitation of children with hearing impairments, the project aims to not only address their immediate needs but also to empower them for long-term success. The initiative targets children in both urban and rural areas of Uganda, where access to medical care and educational resources for those with hearing impairments is limited.

One of the core components of this project is the provision of high-quality assistive devices to children with hearing impairments. Hearing aids, cochlear implants, and other assistive listening devices are vital in ensuring that these children can access the world of sound, whether it's through classroom instruction or social interaction. By providing these devices, the project breaks down barriers to communication, enabling children to participate more actively in their learning and social environments.

REHABILITATION OF CHILDREN WITH HEARING IMPAIRMENT IN UGANDA.

The Rotary Club of Kololo-Kampala works closely with audiologists and hearing specialists to ensure that the devices are properly fitted and calibrated to meet the specific needs of each child. This personalized approach ensures that the children can maximize the benefits of the devices and improve their quality of life.

In addition to providing assistive devices, the project also emphasizes the importance of education and awareness. The Rotary Club of Kololo-Kampala has partnered with institutions for example Hear His Voice Uganda to create inclusive learning environments for children with hearing impairments. Teachers are trained to use specialized teaching methods and tools that cater to the needs of children with hearing challenges. This inclusive approach helps to ensure that these children receive a quality education alongside their peers.

Moreover, the project works to raise awareness about hearing impairments in the community. By educating families, caregivers, and the general public about the importance of early detection and intervention, the Rotary Club is helping to eliminate stigma and promote inclusion. Awareness campaigns and community outreach programs are integral in creating a more understanding and accepting society for children with hearing impairments.

A significant aspect of the project is the provision of speech and language therapy for children with hearing impairments. Speech therapists work with children to help them develop communication skills and overcome the challenges associated with hearing loss. This therapy is crucial for helping children achieve linguistic and cognitive milestones, which in turn enables them to succeed academically and socially.

Through consistent therapy sessions, children with hearing impairments gain confidence in their ability to communicate, express their thoughts, and connect with others. This aspect of the project ensures that children do not just rely on hearing aids or implants, but also develop their speech and language skills to function more independently in the world.

The Rotary Club of Kololo-Kampala understands that rehabilitation extends beyond the child, and the role of the family and caregivers is central to the success of the initiative. The project provides training and support to families to help them understand the challenges faced by -



- children with hearing impairments and how they can provide a supportive home environment. This includes guidance on how to use assistive devices, the importance of routine speech therapy, and strategies for fostering a child's emotional and social development.

The initiative also helps families connect with support groups, providing them with a sense of community and shared experiences. Empowering caregivers with knowledge and resources ensures that the rehabilitation process continues outside of the classroom or clinic, contributing to the child's overall development.

The Rehabilitation of Children with Hearing Impairment project is not just about addressing immediate needs but also about creating long-term change. By providing children with the tools, they need to succeed, the Rotary Club of Kololo-Kampala is helping to break the cycle of poverty and inequality that often accompanies disability. Children who receive the necessary rehabilitation and support are more likely to graduate from school, pursue further education or vocational training, and secure meaningful employment in the future.

Moreover, the project fosters a culture of inclusion and understanding that will benefit future generations. By promoting the rights and potential of children with hearing impairments, Rotary is helping to shape a more inclusive and compassionate society in Uganda.

The Rehabilitation of Children with Hearing Impairment project by the Rotary Club of Kololo-Kampala is a vital initiative that provides children with the opportunity to overcome the challenges of hearing loss. Through the provision of assistive devices, education, speech therapy, and family support, this project is ensuring that these children have the tools to succeed and lead fulfilling lives. The long-term impact of this initiative will be felt not just by the children, but by the entire community, as it works towards building a more inclusive and compassionate society for all.

UGANDA HEARING CLINIC (IN MEMORY OF DR. STUART IRWIN) PICTORIAL





PROJECT FOUR

THE ROTARY CLUB OF KOLOLO-KAMPALA CREATING HOPE FOR MOTHERS AND CHILDREN FOR NYAKARAMBI COMMUNITY.

PROJECT CONTACT PERSON: **MD ALEX MUHWEZI.**

BUDGET: **UGX 302,807,110/=**

The Rotary Club of Kololo-Kampala, in partnership with the Diocese of Kigezi and the community of Nyakarambi, has undertaken the crucial task of completing the maternity ward at the Nyakarambi HCII. This health facility, established in 2000, serves nearly 1,885 people across three villages and beyond, providing a range of healthcare services. The COVID pandemic severely impacted the facility, leaving the maternity ward incomplete, but this project seeks to rectify the situation.

The project is designed in collaboration with the Diocese of Kigezi and the Nyakarambi HCII Management Committee, ensuring community ownership and sustainability. Contributions from the community, Rotary Club of Kololo, and the Diocese will ensure long-term viability. The project will also create employment opportunities during the construction phase and strengthen local healthcare capacity.

The direct beneficiaries of this project include the 1,885 residents of Nyakarambi and surrounding villages, particularly expecting mothers who will benefit from improved maternity services. This project will increase access to safe delivery services, reduce maternal and infant mortality rates, and create a healthier community in the long term. Indirectly, the broader population will also benefit from improved healthcare services, outreach programs, and increased capacity for disease prevention.

The project has received a financial commitment of UGX 302,807,110, reflecting the seriousness of the Rotary Club of Kololo's commitment.

The project aligns with Rotary's Areas of Focus:

- 1. Maternal and Child Health** – The project directly addresses the lack of a proper maternity ward, enabling safe deliveries, postnatal care, and antenatal care.
- 2. Disease Prevention and Treatment** – The expanded facility will improve access to quality healthcare, particularly for expecting mothers and children.
- 3. Community Development** – The construction will empower the community with better health facilities and support sustainable development in the region.

In conclusion, the completion of the Maternity Ward at Nyakarambi HCII by the Rotary Club of Kololo will leave a lasting legacy in the healthcare sector of Rukungiri District. This high-impact project aligns with Rotary's core mission to improve communities' lives, and its sustainable impact will be felt for many years to come. This project's value, direct beneficiaries, and alignment with Rotary's Areas of Focus make it a strong contender for the Most Impactful Non-Global Grants Project Award.

THE ROTARY CLUB OF KOLOLO-KAMPALA CREATING HOPE FOR MOTHERS AND CHILDREN FOR NYAKARAMBI COMMUNITY.



MD. Alex Muhweezi.
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PROJECT FIVE.

IMPROVING REPRODUCTIVE HEALTH AND COMMUNITY ECONOMIC DEVELOPMENT – KINONI VILLAGE, RWAMPARA DISTRICT.

Area of Focus: Maternal and Community Health; Economic Development

Proposed Budget: USD 180,000

Progress: International Partners Secured

Primary Contact: AG Rtn. William Kaguma

This integrated project aims to address pressing maternal and child health challenges and promote economic development in the rural communities of Kinoni (Mbarara) and Kihihi (Kanungu District), Western Uganda. Both areas suffer from high rates of maternal and neonatal complications, low healthcare accessibility, poor infrastructure, and widespread economic vulnerability. The project responds to clearly identified community needs through field assessments, health facility surveys, and stakeholder consultations. By focusing on both health service improvement and community empowerment, the project offers a holistic approach to breaking the cycle of preventable illness and poverty.



IMPROVING REPRODUCTIVE HEALTH AND COMMUNITY ECONOMIC DEVELOPMENT – KINONI VILLAGE, RWAMPARA DISTRICT.

Project Objectives.

1 Enhance maternal and child health (MCH)

Outcomes by;

- Training Village Health Teams (VHTs)/Community Health Volunteers (CHVs) for early detection and referral.
- Equipping facilities with essential diagnostic tools, including fetal dopplers, ultrasounds, and oxygen concentrators.
- Strengthening the referral and emergency response systems, including sustainable communication networks.

2 Improve disability support and rehabilitation through:

- Providing physical therapy and surgical interventions for children and adults affected by preventable birth-related disabilities such as cerebral palsy and hydrocephalus.
- Introducing wheelchair production using local materials to aid mobility and create jobs.

3 Strengthen community health education and outreach via:

- Community wellness vans operated by trained midwives and CHVs.
- Radio campaigns, health talks, and digital tracking of antenatal care attendance and newborn health outcomes.

4 Promote local economic development by:

- Engaging unemployed trained midwives and CHVs in paid roles.
- Establishing micro-enterprises (e.g., wheelchair assembly, tailoring for medical kits, food demonstrations) linked to the health sector.

Expected Impact.

Health Impact

- Reduction in maternal and neonatal mortality and morbidity rates.
- Improved skilled birth attendance and antenatal/postnatal care coverage.
- Increased access to timely, high-quality care for high-risk pregnancies and newborns.

Disability Reduction

- Fewer cases of preventable disabilities through early medical interventions and better delivery practices.
- Enhanced mobility and integration for persons with disabilities through rehabilitation and assistive devices.

Economic Empowerment

- Strengthened capacity and employment for VHTs/CHVs and midwives.
- Community members trained and employed in supporting roles (e.g., equipment maintenance, wheelchair making).

System Strengthening

- Functional referral systems using mobile communication and linked electronic data systems.
- Facilities equipped with basic medical equipment necessary for safe deliveries and emergency response.

Project Sustainability.

Prior to designing this project, a thorough community needs assessment was conducted in Kanungu District (Kihiki Subcounty) and supplemented by observational visits in Mbarara (Kinoni). **The assessment included:**

- Community meetings with Village Health Teams (VHTs), health workers, midwives, and local leaders.
- Interviews with caregivers of children with disabilities.
- On-site facility visits to 13 health centers and hospitals.
- Data review from local health records and national health information systems.

Key findings from the assessment revealed;

A high number of children with disabilities stemming from preventable birth-related complications, often due to unsupervised home deliveries. limited antenatal care attendance and widespread reliance on traditional birthing –



– attendants (TBAs). health facilities lacked critical medical equipment (e.g., ultrasound machines, fetal dopplers, oxygen). referral systems were fragmented and paper-based, leading to treatment delays. transport systems (ambulances, tuktuks) were often nonfunctional due to lack of fuel, maintenance, or proper coordination, community health workers (CHVs/VHTs) were underutilized, undertrained, and poorly equipped, Midwives were unemployed despite their training, and motivated to work if engaged meaningfully, economic insecurity severely limited community members' ability to seek or sustain healthcare.

These gaps validated the urgent need for a holistic intervention that could sustainably strengthen maternal and child health, while building community capacity and resilience.

Sustainability Strategy.

Building on the needs assessment findings, the project is designed for long-term viability through the following mechanisms:

1 Policy Alignment and Government Integration

- The project adheres to Uganda's **National Community Health Strategy** and the **Parish Development Model**, ensuring alignment with national priorities and future governmental ownership.
- It supports district-level goals for improving maternal and child health indicators through structured community engagement and facility strengthening.

2 Empowerment and Engagement of Local Health Workers

- VHTs/CHVs will be retrained, digitally empowered (via tablets), and equipped with referral protocols, enabling them to function as the first line of care and community mobilizers.

- **Unemployed trained midwives** will be integrated into outreach and wellness van initiatives, creating sustainable job opportunities and retaining talent in underserved areas.

3 Infrastructure and Systems Strengthening

- A **coordinated electronic referral and communication system** will replace manual paper-based processes, improving speed and accuracy in patient care transitions.
- **Health facilities** will be equipped with durable, essential equipment and linked to one another and to CHVs via mobile technology to sustain a feedback loop in maternal-child health management.



4 Economic Inclusion and Local Production

- Initiatives such as **wheelchair manufacturing using local materials**, food demonstration gardens, and other community-centered micro-enterprises will boost incomes while addressing real needs.
- These enterprises are intended to support both direct project goals (mobility, nutrition) and broader community livelihoods.

5 Community Ownership and Behavioural Change

- Through local training, awareness campaigns, and consistent VHT/CHV engagement, communities will build a culture of **proactive healthcare-seeking behavior and support for local health systems**.

6 Community members and leaders will participate in regular monitoring, giving feedback and adjusting approaches for maximum impact. Rotary and Partner Continuity

IMPROVING REPRODUCTIVE HEALTH AND COMMUNITY ECONOMIC DEVELOPMENT – KINONI VILLAGE, RWAMPARA DISTRICT.

- Rotary Clubs (e.g., Cupertino and future collaborating clubs) will maintain oversight during project rollout and the pilot phase.
- The project will also seek further partnerships with entities like the Kihiki Lions Club, district hospitals, and national agencies for scale-up and technical support.

7 Beneficiary Participation, Strengths, and Assets

- Beneficiaries, including women of reproductive age, caregivers of children with disabilities, CHVs, and midwives, participated actively in needs assessment meetings and community consultations.
- Communities have demonstrated commitment through mobilization, willingness to volunteer, and contribution of local knowledge and leadership.
- Local strengths include an existing network of VHTs/CHVs with basic training, functioning health centers with dedicated staff, strong community leadership structures, good cellular network coverage for communication, and non-profit hospitals with rehabilitation expertise.
- These assets will be harnessed to ensure full engagement in project implementation, facilitate rapid uptake of services, and foster local ownership and sustainability of interventions.



PROJECT SIX

35 YEARS OF PARTNERSHIP: THE STORY OF ROTARY CLUB OF KOLOLO-KAMPALA'S SUPPORT NAGURU CHILDREN RECEPTION CENTRE: FROM 1990-2025.



PRIMARY CONTACT: Rtn. Charles Turyamureeba.

Naguru Children's Reception Centre (NCRC) is the Rotary Club of Kololo's flagbearer project. It is not only the second oldest project the Club has undertaken, but also it is so strategically located within the Club's local environs, making it easy for every member of the club to physically participate in club activities at the centre every year.

Naguru Children Reception Centre (NRC) is a central government of Uganda facility administered under the Ministry of Gender, Labour and Social Development. It was primarily set up to look after abandoned children.

NCRC was established by SAVE THE CHILDREN UK FUND during the year 1959. The UK FUND managed and operated the centre from 1960 up to the year 1973 when it was handed over to the government of Uganda.

Due to poor funding thereafter, the centre uncouneted several challenges and the in charge started approaching various institutions for possible support.

RC KOLOLO- KAMPALA INVOLVEMENT AND ACHIEVEMENTS: -

During the Rotary year 1989/1990, Ms Christine Kajumba who was the newly appointed in-charge of NCRC, approached RC Kololo with a request for support to the centre. Under the leadership of the seating club President, the late Rtn. Pascal Mukasa, the board and the entire club membership agreed to support the centre. This was the beginning of the long relationship between the Club and NCRC, which has been maintained up to the present day.

Over the years, the Rotary Club of Kololo-Kampala has carried out various projects in order to improve on the condition and welfare of the children at the Centre. The major interventions are outlined below.

1 Centennial Block- This is the biggest stand-alone project implemented by the club at NCRC. To mark 100 years of Rotary's excellent service to humanity, the Rotary Club of Kololo under the leadership of PP Patrick Byabakama who was the Club President during Rotary year 2003/04, initiated a project to construct a sickbay block at Naguru Children Reception Centre, at a cost of approximately USD 80,000. This ambitious project was to be funded locally from contributions of Rotarians and well-wishers. Actual construction started in Rotary year 2004/05 during the presidency of Rtn. Wamala Wanale (RIP) after the Club had mobilized enough money to launch to start on the foundation.



35 YEARS OF PARTNERSHIP: THE STORY OF ROTARY CLUB OF KOLOLO-KAMPALA'S SUPPORT NAGURU CHILDREN RECEPTION CENTRE: FROM 1990-2025.

- 1** The project took six years to complete because the finances and other resources were marshalled incrementally from year to year. The project was officially completed and handed over to the government of Uganda – Ministry of Labor, Gender and Social Services, on Tue 23rd August 2011.

However, owing to lack of adequate accommodation especially for girls, management of the Centre subsequently decided to convert this facility into a dormitory for girls who were originally sharing the same block with boys.



- 2 Pit latrine** - A 4 stance pit latrine was constructed, with separate rooms for boys and girls at a cost of UGX 7,000,00/=.
- 3 Poultry Project** - A poultry house was constructed. To start the poultry farming, 100 broilers and 300 layers were donated to the center, to improve the nutrition of children. The project also provides “hands-on” vocational training experience in poultry farming to the older children. The project cost was UGX 8,500,000/=.
- 4 Heifer Project** – A new cow-shed was constructed and installed with the necessary water accessories for watering the heifers. Four (4) in-calf Heifers were provided for Zero grazing. These cows have been able to multiply over the years, providing milk to the children and income for the center. Again, this project provides very useful hands-on vocational training in cattle farming, especially to the teenage youngsters.
- 5 Perimeter fence wall** - A new perimeter wall fence was constructed on the western end (one quarter) where the old fence had collapsed. The project cost was approximately UGX 20,000,000/=.

- 6 Play Facilities** - Repaired the then existing swings in the playground and provided a new sliding board for children to play.



- 7 Repainting** - During the year 2003 the club repainted the main block house which accommodates administration offices, dining room, stores and other facilities.
- 8 Re-roofing** – Starting from the year 2004, the club started re-roofing buildings at the NCRC by replacing obsolete asbestos roofing sheets with galvanized iron sheets. It started with the children’s dormitory, followed by the Main Administration block in 2006. The Warden’s house re-roofed in 2009. The remaining asbestos roofs were re-roofed in RY 2013/14. Total cost was over UGX 35,000,000/=.



- 9 Beds, Blankets and Bed sheets** – Initially the club supplied 50 beds complete with 100pcs of blankets and 50 pairs bedsheets plus 50pcs bath towels. The club has continued to supply more beds and mattresses and Mackintosh covers to replace the worn-out ones, from time to time.
- 10 Tables and Chairs** - Supplying 20pcs Nursery tables and 50pcs chairs. The Centre runs Nursery classes for NURSERY AGE going children. Before these items were supplied, children used to seat on the floor while learning.

35 YEARS OF PARTNERSHIP: THE STORY OF ROTARY CLUB OF KOLOLO-KAMPALA'S SUPPORT NAGURU CHILDREN RECEPTION CENTRE: FROM 1990-2025.

11 Kitchen Retooling: The club refurbished the kitchen, replaced cook-stoves, painted the walls and supplied one big kitchen cupboard to keep and safeguard kitchen utensils.

12 Bathing cubicles – The club constructed a small block of ablutions serviced with solar-hot water system so that the children should always enjoy a hot shower. Two separate bathing cubicles were put in place.

13 Reconstruction of cow-shed: The club reconstructed the cow-shed in RY 2023-24 at a cost of UGX 10,000,000/=.



14 Christmas Parties - In December 1996, The Rotary Club of Kololo organized the first Christmas/End of year party for both children and staff at the NCRC. This practice continued to be an annual event up to this day. Rotarians always contribute money and goods in kind to cater for the parties in which the Club members join in merry-making and these arrangements have been going on every year to date. In addition to the end-of-year celebrations, the club normally gives a notable gift to the center which is selected depending on the need at the time.



15 Vegetable Garden: During RY 2024-25, the club has planned to establish a vegetable garden, install a few solar lights in the compound for security purposes, repair water drainage channels, provide one extra heifer, and repaint the buildings in corroboration with Plascon Paints Ltd. The whole undertaking may cost approximately UGX 25,000,000/=.

International Partnerships.

While a substantial number of projects at the NCRC have been funded locally by Rotarians and well-wishers, the club has also solicited for funding intervention from international partners, including Rotary International. During the Rotary year 1998/1999 the club received a matching grant worth \$17,600 which the club used for the interventions below: -

1. Refurbish children's dormitories by providing new mattresses, new beddings, and repainting the buildings.
2. Children's Play facilities (i.e. swings etc.)
3. Furniture and a TV set for children dining room.
4. The kitchen utensils including a new deep freezer to preserve foodstuffs.
5. A new cow-shed and 4 heifers

Club Project Undertakings At Naguru Children Reception Centre During The Rotary Year 2024/2025.

As per the club Rotary Year 2024/25 projections under the projects committee, we were able to undertake the following tasks to completion as indicated below;

COW SHADE: The cow shade was given a new structure including roofing, supporting structure and repaired the floor. Unfortunately, the only cow at the centre died after a short illness. Plans are underway to replace it.

35 YEARS OF PARTNERSHIP: THE STORY OF ROTARY CLUB OF KOLOLO-KAMPALA'S SUPPORT NAGURU CHILDREN RECEPTION CENTRE: FROM 1990-2025.

DRAINAGE: The drainage runner away channel was given a facelift to allow both dirty and rain water to flow easily. Previously it was a nightmare.

FENCING VEGETABLE GARDEN: In order to protect vegetables grown within the centre, a chain link fence was erected around the garden. It should be noted that the management of the centre grows various vegetables in order to enhance food diet for the children.

INSTALLATION OF SOLAR LIGHTS: In order to enhance visibility of the centre at night, more solar lights were installed within the compound. This measure also enhances the security of the centre.

END OF THE YEAR AND CHRISTMAS PARTY: Being the tradition of the club since the year 1990, once again a befitting party was organised mid-month of December 2024 and it was graced by the sitting District Governor Madam Nkutu and among other invited Rotarians and guests.



REPAINTING OF THE CENTRE: Among the goals and projections of the club was to repaint the entire centre building with support from M/S Plascon Uganda Ltd one of the companies in the country that has previously partnered with the club towards this undertaking.

The company was not able to fulfil their promise as planned hence the repainting was not done as per schedule. But on a happy note, during the month of June, 2025, all the painting materials worth more than 25 million were supplied and delivered at the centre and hopefully painting works by the same Plascon people /workers will start soon.

FUNDING AND COSTS:

For all the accomplished undertakings as mentioned above, the Club was able to spend a sum total of Uganda shillings; 18,056,600/= contributed mainly by Rotarians from the Club and well-wishers.



As the contact person of the centre during the Rotary year 2024/2025, I wish to thank all Rotarians who contributed money and participated in all undertakings accomplished as mentioned above. Thank you, Magic President IPP MD William Kaguma, for your able leadership and focusing on Rotary Ideals during your term of Service.

In conclusion, by the end of this Rotary year 2025/2026, the Club will have spent more than **UGX 407,000,000/=** in support of Naguru Children's Reception Centre, "The signature project for the Rotary Club of Kololo Kampala". I wish to thank the entire Club membership for the services extended to the centre over the years.

THANK YOU



PP MD Turyamureba Charles
CHARTER MEMBER
ROTARY CLUB OF KOLOLO-KAMPALA.

PROJECT SEVEN WATER, HYGIENE AND SANITATION – NYAKABUNGO GIRLS SECONDARY SCHOOL, KANUNGU.



AREA OF FOCUS: Water, Sanitation and Hygiene (WASH).

PROPOSED BUDGET: USD 124,000

PROGRESS: International Partners Secured; Awaiting Global Grant Approval.

PRIMARY CONTACT: Rtn. Anna Gamurorwa.

INTRODUCTION

Kanungu district is found on the southwestern corner of Uganda and borders the Democratic Republic of Congo with high influx of refugees fleeing the DRC. It is one of the districts that were highly affected by HIH/AIDS from 1980's, and COVID19 in the 2020's. These have resulted in poverty, child headed households and teenage pregnancies. Women have suffered more than men in this with more women living on subsistence agriculture (75%) more than the men (57%).

Kanungu district in Uganda faces challenges in its Water, Sanitation, and Hygiene (WASH) sector, particularly regarding water access and water quality. While the district has water points, access rates vary significantly between sub-counties, and a considerable number of points are non-functional. Water pollution from mining, waste disposal, and contamination from animal and human waste in rivers poses a significant threat, resulting in disease and poor health.

Nyakabungo Girls Boarding Secondary school was started in 42 years ago by concerned parents, supported by the Dioceses of Kinkiizi to give girls better education, protection and a good learning environment. Though it receives some government subsidies, these are very limited. Currently, it has a population of 350 girls.

WASH infrastructure and services in schools are critical to ensure a safe and healthy learning –

– environment where all children are envisaged to reach their educational potential. The degree of impact that safe Water, Sanitation, and Hygiene has on a child's health, retention and school performance is profound. (UNICEF, 2016)

Outcome of the Assessment established the following challenges;

Sanitation Facilities:

- The school has two 3-stanchioned unimproved pit latrines. The student-to-staff ratio is therefore 58:1, far above the acceptable number of 20:1. The current shortage is therefore 12 latrine stances.
- There is no single waterborne toilet. Implying that all the students and non-students, as well as the staff and support staff, lose time tracking to the latrines. A matter that also affects governance and the dignity of the senior staff.

Clean Water Access:

- The school largely depends on a protected spring, which is not clean and is about one kilometre away from school, shared with the community and the girls have to carry the water on their heads. In addition, it has two rainwater harvesting tanks but this is unreliable. The water per capita is about 5L/student, which is far below the recommended 11 litres per student.

WATER, HYGIENE AND SANITATION – NYAKABUNGO GIRLS SECONDARY SCHOOL, KANUNGU.

Hygiene and Solid Waste Management

- The school has one incinerator, which is shared by students, teaching, and nonteaching female staff; this is inadequate. The students use poorly constructed washrooms and latrines which compromise dignity and limits hygiene. There are inadequate hand-washing facilities. These factors contribute to health risks and environmental problems.

GENERAL OBJECTIVES

The general objective is to reduce illness, improve hygiene practices, increase school attendance, enrollment and retention; improve academic outcomes; and self-esteem and reduced bullying.

Specific Objectives:

In line with the Rotary International pillars and the SDGs include;

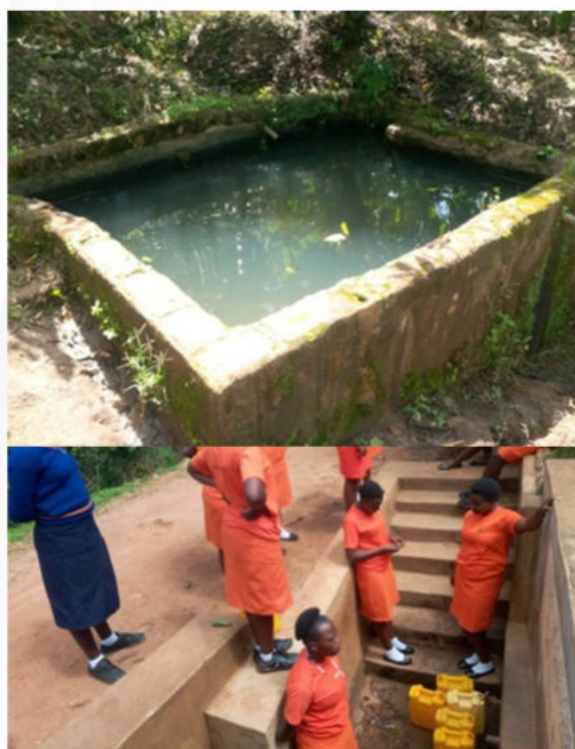
- Fighting Disease,
- Providing Clean Water,
- Improving Sanitation and Hygiene
- Supporting Education.
- Contributing to quality education, and
- Contributing to Gender equality

No.	Particulars	USD
1	Providing Safe Drinking Water infrastructure, i.e., a deep well, installing Solar pumps, pump house, transmission, storage, and distribution of the water.	25,000
2	Sanitation: drainable three 6-stance VIP latrines, incinerators, two, 3-stance water borne toilets	50,000
3	Hygiene Promotion: concrete open roof showers, handwashing areas,	30,000

No.	Particulars	USD
4	Community Engagement: Local communities around school	4,000
5	Hygiene Education and Promotion: Training learners and staff, hygiene materials, Menstrual hygiene education and materials, Monitoring and evaluation	15,000
124,000		

MAIN PROJECT IMPACT:

- Reduced absenteeism.
- Improved hygiene practices.
- Increased school attendance.
- Improved academic outcomes.
- Increased enrollment and retention.
- Improved self-esteem and reduced bullying.
- Economic development.





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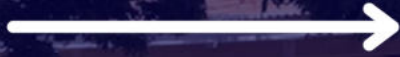
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PROJECT EIGHT



LUMINO MATERNAL AND CHILD HEALTH PROJECT: IMPROVING MATERNAL AND CHILD HEALTH IN LUMINO PARISH AND THE ENVIRONS.



AREA OF FOCUS: Maternal and Child Health.

PROPOSED BUDGET: USD 101,509.

PROJECT PROGRESS:

Project in planning stage.

PRIMARY

CONTACT: Rtn. Nasinyama Patrick.

The Rotary Club of Kololo is part of Rotary International, a global network of over 1.2 million neighbours, friends, leaders, and problem-solvers who are committed to creating lasting change in the world, in our communities, and in ourselves. The club has 80 members, 60% of whom are Paul Harris Fellows (PHF). Meetings are held every Tuesday from 6:00 PM to 7:00 PM at Hotel Africana. The Rotary Club of Kololo, Kampala, operates as a corporate body.

The Rotary Club of Kololo has developed and implemented numerous projects focused on improving communities in the areas of health, sanitation, the environment, and social development. In this regard, the Club, working in collaboration with the Archdiocese of Tororo and the local community, has planned an initiative to enhance maternal and child health services at Lumino Health Centre in Busia District.

By focusing on the rehabilitation of children with hearing impairments, the project aims to not only address their immediate needs but also to empower them for long-term success. The initiative targets children in both urban and rural areas of Uganda, where access to medical care and educational resources for those with hearing impairments is limited.

1.1 Identified Problem

Uganda has made significant progress over the past decades in reducing maternal, newborn, and under-five mortality. However, substantial disparities in health outcomes and access to essential healthcare services persist across different regions. Pregnancy-related mortality remains a critical indicator of both public health and societal development. According to the Uganda Demographic and Health Survey (2016), the maternal mortality rate stood at 368 deaths per 100,000 live births, equivalent to nearly 4 maternal deaths for every 1,000 births. Maternal deaths accounted for 16% of all deaths among women aged 15 to 49 in the 12 months preceding the survey, underscoring the urgent need for targeted interventions.

LUMINO MATERNAL AND CHILD HEALTH PROJECT: IMPROVING MATERNAL AND CHILD HEALTH IN LUMINO PARISH AND THE ENVIRONS.

Similarly, child mortality is a core indicator of child health and well-being. The Sustainable Development Goal 3 (target 3.2) is committed to the health of the world's children aiming to reduce neonatal mortality to at least 12 deaths per 1,000 live births and under-five mortality to at least 25 deaths per 1,000 live births. The national data, however, shows that the probability of dying before the first birthday (IMR) in 2014 was 50 per 1,000 live births while for Busia District, this was 49-60 per 1,000 live births. Under Five Mortality rates was 74 deaths per 1,000 live births nationally while Busia District registered 73-90 deaths per 1,000 live births, respectively. This is an indication that the health outcomes for infants and children below five years are still higher than the country's average and not near the SDGs benchmark when Busia district data is taken as a proxy for the catchment area of Lumino Health centre. Therefore, more efforts are still required to achieve the national target of 44 (for infants) and 55 (for under five) deaths per 1,000 live births as set in the current NDP; as well as SDG target number 3.2 (UBOS 2017).

Lumino Health Centre is a Private not-for-profit Health Facility accredited by the Uganda Catholic Medical Bureau (UCMB), and registered and licensed by the Ministry of Health (MoH). It was founded in 1975 by Fr. James Daley to cater for the maternal and child health needs of the people of greater Lumino and the surrounding areas. The health centre was established to address the increasing need to access high quality and affordable health services in a friendly Christian environment especially the less privileged in the community. Prior to its establishment, patients had to walk for 15kms or more to access health services at Dabani Hospital. Over the years, the health centre has striven to carry out its mission to the best of its ability.

The health centre's operations cover six sub counties and a town council, and even serves a catchment population that spans both the Ugandan and Kenyan side of the border. In Uganda, the catchment covers 20,225 households with a population of 102,600 of which 52.1% are female. Economically, the livelihoods of these households are hinged largely on subsistence agricultural farming. The number of villages covered by the Health Centre catchment is over 314. The Rainfall is bimodal (March-May and August-October) with an annual average of 1,300 – 1,450 mm. The topography is generally medium hilly with altitudes ranging between 1,101 – 1,300 m above sea level.

The catchment area borders the vast Lake Victoria to the south that lies at an altitude of 1,101 m above sea level.



1.2 Main Objective of the Project

The project aims to enhance the accessibility, quality, and utilization of maternal and child health services for the catchment population of Lumino Health Centre, thereby improving health outcomes for mothers and children.

1.3 Specific objectives include the following: -

1. To increase access to quality maternal and child health services in the catchment area of Lumino Health Centre.
2. To reduce pregnancy-associated maternal health complications and mortality in the catchment area of Lumino Health Centre.
3. To reduce the mortality of children below 5 years in the catchment area of Lumino Health Centre.
4. To equip the maternity and child health unit of Lumino Health Centre with state-of-the-art equipment.

1.4 Justification of the Project.

Lumino Health Centre has been operating as a Health centre II, which is being phased out by the Ministry of Health unless it transforms into a Health Centre III. There is truly an urgent need for expansion of the health unit by constructing and equipping a modern Maternal and Child Health unit to enable it fulfil its mandate effectively and efficiently. The very much needed improved health service delivery to the less privileged, the poor and growing community demands that the health centre be expanded and accessibility and quality of services improved. But with the current meagre resources generated by the health centre, it will take very long to enable it do so. A concerted effort is, therefore, urgently required to support the transformation of the current facility into a **Health Centre III** to offer quality health services that are affordable and accessible to all especially the less privileged of our community especially women and children.

LUMINO MATERNAL AND CHILD HEALTH PROJECT: IMPROVING MATERNAL AND CHILD HEALTH IN LUMINO PARISH AND THE ENVIRONS.

The health unit commenced on plans to transform into a Health Centre III by marshalling efforts and is constructing a modern Maternity and Paediatric unit but needs a shot in the arm Figure 1 shows the incomplete structure to house the Maternal and Child Health under construction by the community.



The New uncompleted Maternal and Child Health unit constructed by the Community of Lumino.

2.1 Project Target Group

No.	Objective	Target Group	Target Number per Year
1	To increase access to quality maternal and child health services	Pregnant mothers and children below 5 years old	25,000
2	To reduce pregnancy associated maternal health complications and mortality	Pregnant mothers	5000
3	To reduce mortality of children below 5 years	All Children below 5 years	6,000
4	To equip the maternity and child health unit	Building under construction and needs completion and installation of state-of-the-art equipment	(see Annex 3)

2.2 Summary of Project Activities and Outputs

Specific Objective	Activities	Outputs
Increase access to quality maternal and child health services in the catchment area of Lumino Health Centre.	Conduct weekly home visits for mothers after delivery (post-natal) to assess, offer support and treat complications.	Post-natal complications reduced
	Conduct home visits by Village Health Team personnel (VHTs) for mothers before delivery (ante-natal) to assess, offer support and advice to attend ante-natal clinics	Attendance at ante-natal care services increased Complications at birth reduced
	Conduct home visits by Village Health Team personnel (VHTs) to identify children under five having any health conditions and refer them to the health centre for care	Morbidity and mortality of children under five reduced

LUMINO MATERNAL AND CHILD HEALTH PROJECT: IMPROVING MATERNAL AND CHILD HEALTH IN LUMINO PARISH AND THE ENVIRONS.

2.2 Summary of Project Activities and Outputs

Specific Objective	Activities	Outputs
Increase access to quality maternal and child health services in the catchment area of Lumino Health Centre.	Holding a major Medical Camp at the health facility to demonstrate the kind of services expected when the MCH unit is completed and functional	Increased community awareness and trust in maternal and child health services, demonstrated by a rise in attendance at the medical camp and expressed demand for similar services expected in the upcoming MCH unit
	Completing of the proposed Maternal and Child Health unit under construction	A newly constructed Maternal and Child Health (MCH) unit at Lumino Health Centre, structurally complete and ready for equipping and operationalization
Reduce pregnancy associated maternal health complications and mortality in the catchment area of Lumino Health Centre	Sensitise women in the catchment area to attend Ante-natal clinics.	Awareness of women about the importance of ante-natal clinics increased
		Pregnancy associated complications reduced
		Number of pregnant women giving birth at the health center increased
Reduce mortality of children below 5 years	Refresher trainings to VHTs	Knowledge, skills and abilities of the VHTs in Child health improved
	Lobbying for increased vaccine supply through the Ministry of Health to combat communicable diseases.	Medical care expenses due to access to VHTs reduced
	Training the community about the prevention and treatment of malaria and other communicable diseases, including planting Mosquito repellent plants and trees.	Mortality of children from communicable diseases and malaria reduced.
	Sensitize the community about good sanitation practices in homesteads	Sanitation-related diseases including malaria reduced
To equip the maternity and child health unit of Lumino Health Centre with state-of-the-art equipment	Procuring and installing of the state-of-the-art equipment in the health centre	State-of-the-art maternal and child health equipment—such as delivery beds,

2.2 Summary of Project Activities and Outputs

Specific Objective	Activities	Outputs
To equip the maternity and child health unit of Lumino Health Centre with state-of-the-art equipment		ultrasound machines, newborn resuscitation kits, and diagnostic tools procured, installed, and tested at Lumino Health Centre, ensuring readiness for high-quality service delivery

2.3 Summary of Project Output Measures

Means of verification and Data collection methods to measure the outputs are outlined in Tables 2.1 – 2.2

Table 3.1 Measures To Increase Access To Quality Maternal And Child Health Services

Output	Means of Verification	Method of Data Collection
Post-natal complications reduced	No. of post-natal complications at the health centre	Document review of post-natal delivery records
Attendance at ante-natal care services increased	No. of antenatal visits by pregnant mothers	Document review of ante-natal records
Complications at birth reduced	No. of deliveries with or without complications at the health centre	Document review of delivery records
Morbidity and mortality of children under five reduced	No. of sick children handled at the health centre	Document review of patient attendance records
	No. of children handled at health centre and die	Document review of children mortality records
Increased community awareness and trust in maternal and child health services, demonstrated by a rise in attendance at the medical camp and expressed demand for similar services expected in the upcoming MCH unit	Number of individuals (disaggregated by age and gender) who attended the camp.	Medical Camp attendance register
	Changes in awareness, perception, and trust in maternal and child health services.	Pre- and post-camp community feedback surveys or interviews
	Number of ANC check-ups, immunizations, child consultations, cervical cancer screening, among others provided during the camp.	Medical Camp service utilization records
	Documentation showing community participation and engagement.	Photos, videos and media coverage
A newly constructed Maternal and Child Health (MCH) unit at Lumino Health Centre, structurally complete and ready for equipping and operationalization	Documentation issued by the contractor and verified by the project supervisor confirming phase completion.	Phase completion certificates
	Signed document between contractor and project management confirming handover of the completed building.	Handover report

Table 3.2: Measures To Reduce Pregnancy-Associated Health Complications

Output	Means of Verification	Method of Data Collection
Awareness of women about the importance of ante-natal clinics increased	No. of women that attend Ante-natal clinics	Document review of ante-natal clinic records
Pregnancy associated complications reduced	No. of pregnancy associated complications received at the health centre	Document review of ante-natal records
Number of pregnant women giving birth at the health centre increased	Refresher trainings to VHTs	Document review of delivery records

Table 3.4 Measures To Equip The Maternity And Child Health Unit With State-Of-The-Art Equipment

Output	Means of Verification	Method of Data Collection
Laboratory tests aiding better diagnosis of patients improved	No. of laboratory tests carried out	Document review of laboratory records
Care of ante-natal and post-natal mothers improved	No. of patients successfully treated	Document review of health centre patient records
Infant mortality rate significantly reduced	Infant mortality rate significantly reduced	Document review of patient records
State-of-the-art maternal and child health equipment—such as delivery beds, ultrasound machines, newborn resuscitation kits, and diagnostic tools procured, installed, and tested at Lumino Health Centre, ensuring readiness for high-quality service delivery	Documents showing the type, quantity, and date of delivery to the facility	Equipment delivery documents
	Updated health centre inventory listing all equipment received and tagged	Asset register
	Documents signed by technical staff or engineers confirming that equipment is installed and functioning properly	Equipment installation and testing reports
	Photographs of installed and operational equipment in designated rooms (e.g., delivery suite, ANC room).	Photographic evidence
	Documentation of staff trained to operate the equipment	Training records

Conclusion

The implementation of the above proposal will lead to improvement in the health outcomes of women, especially mothers and children in the catchment area of Lumino Health centre, Busia District – Uganda, leading to development of the communities.

Rtn Patrick Nasinyama

ROTARY CLUB OF KOLOLO-KAMPALA



PROJECT CONTACT PERSON: Rtn. Benard Arinaitwe

Project Overview.

The Rotary Club of Kololo-Kampala has executed a landmark community health initiative: the Maternal Health Project for Kakatunda Health Centre. This project was designed to address a pressing healthcare gap—specifically, the lack of diagnostic imaging for maternal care—by procuring and installing a modern ultrasound machine. The project demonstrates the club's commitment to impactful, non-global grant projects that directly serve local needs.

Project Objectives.

- **Enhance Maternal and Neonatal Health:** Improve pregnancy management, reduce maternal and neonatal deaths, and provide early detection of complications.
- **Increase Access to Quality Healthcare:** Serve a catchment population of approximately 500,000 people, ensuring that pregnant women and their families receive timely and effective care.
- **Support Community Economic Development:** Minimize travel costs and time for families, who previously had to travel 40 km to Kabale town for ultrasound services.

Financial Investment

- **Total Project Cost:** UGX 38,000,000
- This substantial financial commitment underscores the club's dedication to impactful, self-funded community interventions.

Beneficiary Impact

- **Direct Beneficiaries:** Pregnant women and newborns receiving care at Kakatunda Health Centre.

- **Indirect Beneficiaries:** The broader community of approximately 500,000 people, who rely on the centre for various health services.
- **Financial Relief:** Families save significant costs and time by accessing services locally rather than traveling long distances

Sustainability Plan.

A key strength of the project is its robust sustainability approach:

- **Reliable Power Supply:** The health centre has a stable, reliable electricity supply to support continuous operation of the ultrasound machine.
- **Dedicated Space and Staffing:** A specific space within the facility was allocated for the machine, and a qualified sonographer was hired, ensuring ongoing service provision.
- **Community Stakeholder Engagement:** Active support from local religious leaders (including the Bishop and Parish Priest), the Village Health Team, and district health authorities ensures strong community ownership and long-term sustainability.

Rotary Areas of Focus.

The project aligns with three Rotary Areas of Focus:

Maternal & Child Health:

- Offers advanced diagnostic support
- Reduces preventable deaths of mothers and newborns

Disease Prevention & Treatment:

- Enables early detection and intervention
- Enhances overall healthcare quality

KAKATUNDA HEALTH CENTRE

Community Economic Development:

- Reduces healthcare-related financial burdens
- Improves productivity and well-being by ensuring healthy families

Implementation & Handover.

- **Collaboration:** The project was executed in partnership with hospital management, community, and religious leaders, ensuring broad-based support and buy-in.
- **Official Handover:** The ultrasound machine and related resources were officially handed over to Kakatunda Health Centre on 30th May 2025, with the ceremony presided over by Rotary Club President, William Kaguma.

Conclusion.

The Kakatunda Health Centre - Maternal Health Project is a testament to the Rotary Club of Kololo-Kampala's commitment to sustainable, high-impact community service. By empowering local healthcare systems, reducing maternal and neonatal risks, and fostering community-driven development, the club has set a benchmark for effective grassroots healthcare interventions. This initiative not only elevates maternal and child health standards but also enhances the socio-economic resilience of the entire community.





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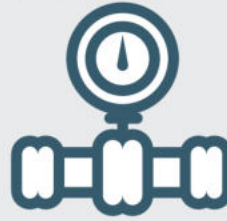
PROJECTS IN THE PIPELINE.

Area of Focus: Disease Prevention and Treatment.

Proposed Budget: USD 45,736

Progress: Final Stages Of Global Grant Approval

Primary Contact: Rtn. Dominic Tumwesigye.



SUMMARY OF THE CLUB PROJECTS.

RC KOLOLO SERVICE PROJECTS.

One of the hallmarks of an effective club is service Projects. In July 1989, the club started by embarking on its first project, by sponsoring the construction of a small bus-stopshelter on Jinja road at the current Centenary Park side of the road and opposite the Electoral Commission Offices.

That small shelter which cost the club only UGX 750, which was equivalent to about US\$ 54 at the then going exchange rate of UGX 14 to the dollar. The Club has since then done much bigger projects financed both locally and in conjunction with Rotary International Partners.

Below is a summary of some of the projects implemented by the club.

No	Project Name	Cost (USD)	Period	Remarks
1	Jinja Road Bus Stop Shelter	54	1989	Fully funded by the club
2	Naguru Children's Reception Centre	30,600	1990-2013	This is the club's flag bearer. The club continues to support the reception centre annually based on current needs. Interventions by the club have included construction of a pit latrine, poultry house, perimeter wall fence, playground, repainting, reroofing the dormitory, administration block and warden's house, Heifers, Cow shed, sick bay, Annual children's Christmas Parties, etc.
3	Polio Immunization		1996-ongoing	Initially this immunization support program was carried out at Naguru KCC Clinic. Today the immunization takes place at quarters Kireka. Cost for routine monthly vaccinations was not compiled.

SUMMARY OF THE CLUB PROJECTS.

No	Project Name	Cost (USD)	Period	Remarks
16	St Stevens Hospital COU Mpererwe - GG1863665	53,500	2018-19	A new ambulance, neonatal lifesaving equipment (infant warmers, Sonic aid Doppler), Training, community outreach
17	Masaka Hospital VTT-specialized medical services and skills transfer - GG1875158	97,000	2018	Specialized Theater Operations- Ophthalmology, Ear Nose and Throat, Dental and Orthopedics; skills transfer, equipment
18	Lugo Adopt a Village project- GG1754735	89,272	2017-2019	Women Economic Empowerment (heifers), Youth Skilling (tailoring, sewing machines), Education support (text books, desks, etc.), Water and sanitation
19	North Kigezi Health Center IV- GG1985386	78,361	2019-20	Improving Reproductive Health Services, Maternal services and Child health Center, Ambulance, Neonate life support equipment, Medicines, Medical outreach, Medical Training, Youth skilling (sewing machines and tailoring)
20	Equipping Rushoka Maternity Ward - GG2015340	65,006	2020-21	Ambulance, Maternity ward equipment (autoclave, multi-parameters patient monitors, theater equipment, neonatal lifesaving equipment, etc.
21	Makindye Youth Empowerment Project (YIMBA) -GG1988328	70,262	2020-2023	Youth skilling (tailoring, fashion and design; music talent promotion/ mentorship); Entrepreneurship training, music equipment; sewing machines, School girls Hygiene (pads, training)
22	Amaloboozi- Uganda hearing Center in memory of Dr, Irwin Stewart - GG1866567	130,000	2021-2023	Establish a hearing restoration center, provide equipment (sound booths, Temporal bone operation equipment, training health professionals
23	Kitagwenda WATSAN project - GG2014247	130,000	2022-23	Boreholes, Rain water harvesting tanks, Ecosan toilets, Sanitation and hygiene training
24	Basic Education and Literacy Projects (BELEP)	41,000	2022-23	Busabaga Primary School Text Books and Digital Library, Nyamifura Primary School Classroom Block
25	Kisaabwa Primary School Project	7,600	2020-21	Classroom block renovation
26	Bukomansimbi Medical Camp	6,100	2019	2-day medical comp - 1500 patients treated
27	Namutumba women economic improvement and health intervention - GG2349279	87,754	2024	Rice processing equipment (hullers), Medicines, Hospital solar equipment, hospital medical equipment, adolescence health awareness (covering MCH), Training
TOTAL			USD 1,470,819	

SUMMARY OF THE CLUB PROJECTS.

No	Project Name	Cost (USD)	Period	Remarks
4	St. Stephen's Hospital Mpererwe	42,000	2013	Medical equipment
5	Mpererwe Women's Heifer Project	175,000	1999 -2008	Implemented in partnership with Heifer international
6	Bulegeni Heifer Project	29,849	2009	Particularly targeted people with disabilities
7	Kizinda Farmers Society	41,750	1996-2013	Heifer project and microfinance. The society has one of the most successful microfinances saccos in the country
8	Entebbe Grade B Hospital	28,780	2007	Beds, Mattresses, examination couches,
9	Prevention of Mother to Child HIV transmission- Kayunga	59,934	2008-2009	Vehicle, motorcycle, computers, photocopier, training
10	Handicapped and abandoned children support project	44,550	2008	Supported the physically handicapped, visually impaired, orphans and abandoned children in three (3) schools located in Mukono District and Mengo in Kampala City in Uganda
11	Furniture for St Paul High School - Rushooka	4,750	2007	Donated Desks, chairs and dormitory beds to the school
12	Early conflict warning and early response for coexistence	49,550	2011-2012	With Joint Christian Council, involved building capacity for mediation and peaceful conflict resolution in 4 hot spot districts
13	Omukabaare Heifer Plus Project	110,901	2013-2017	Provision of heifers, biogas and piped water supply to rural women of Omukabaare, Isingiro
14	Hearing Project & Biomedical engineer training	70,000	1998-2017	Hearing health care, biomedical engineering training and Mbarara University and hospital equipment
15	Nyakinengo Health Project	15,000	2016-17	Health center - Construction and equipping the health Centre.

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