



Thus far the Lord has helped us

Celebrating
A Centenary of
Glory, Gloom
and Glow
27th November 2022



“..... abu eoŋ kabu tetere ejaunete kaijar, ejaunete da kanaedeparit.” - Yokana 10:10.



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NGORA FREDA CARR HOSPITAL



Thus far the Lord has helped us
(1 Samuel 7:12)

Celebrating
**A Centenary of
Glory, Gloom and Glow**

Sunday 27th November 2022

Editor and Design: **JONATHAN MARAKA** (born in this Hospital Monday 15th August 1960)

A publication of Ngora Freda Carr Hospital
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Welcome to the Centenary (1922-2022) Celebrations of Ngora Freda Carr Hospital



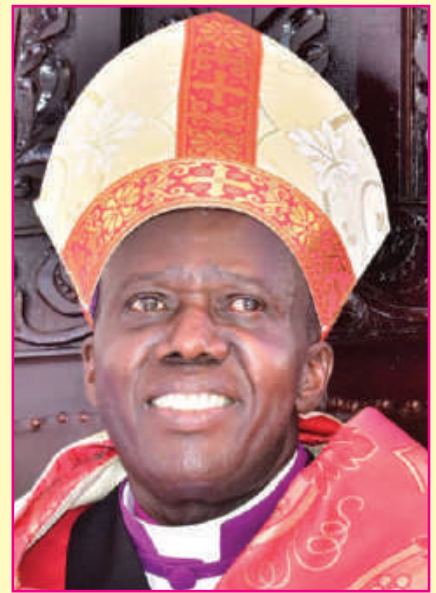
CHIEF GUEST:

Vice President of the Republic of Uganda,
Her Excellency Maj. (Rtd) Jessica Rose Alupo



MAIN CELEBRANT:

The Archbishop of the Province of the
Church of Uganda,
His Grace The Most Rev. Dr. Stephen Samuel
Kaziimba Mugalu



CHIEF HOST:

Diocesan Bishop Church of Uganda
Diocese of Kumi
Rt. Rev. Michael Okwii Esakhan

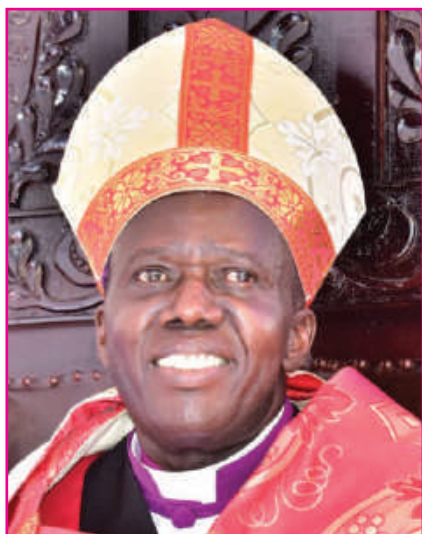
CENTENARY CELEBRATIONS & FUNDRAISING PROGRAM 27th November 2022

TIME	ACTIVITY
8:00 am	Arrival and Congregation of Christians
8:30 am	Arrival of Lay Readers and Clergy
9:00 am	Arrival of Invited Guests
9:15 am	Arrival of the Archbishop of the Province of Church of Uganda, Bishop of Diocese of Kumi & other Ministers of the Gospel
9:30 am	Archbishop, Bishops, Clergy & Lay Readers Robe and Process
9:45 am	Arrival of the Chief Guest and Singing of the National Anthem
9:50 - 10:10 am	Commissioning and unveiling of Gifts, New Chapel, Monument of Freda Carr
10:10 - 12:10 pm	Holy Communion Service
12:10 - 12:15 pm	Music Interlude
12:15 - 12:17 pm	Board Chair
12:17 - 12:19 pm	LCI Chairperson
12:19 - 12:25 pm	Remarks by the Medical Director
12:25 - 12:27 pm	UPMB
12:27 - 12:30 pm	Ministry of Health
12:30 - 12:40 pm	Remarks by the Area MP
12:40 - 12:45 pm	Welcome Remarks by the Bishop of Diocese of Kumi
12:45 - 12:55 pm	His Grace the Archbishop Remarks and Welcomes the Chief Guest
12:55 - 2:55 pm	Chief Guest Address, Fundraising and Strategic Plan Launch
3:00 - 3:30 pm	Lunch
3:30 pm	Departure at Leisure.

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Welcome, and be a blessing to Ngora Hospital



Rt. Rev. Michael Okwii Esakhan
Diocesan Bishop Church of Uganda
Diocese of Kumi

Beloved people of God Almighty, I am privileged, happy and excited to write this foreword in this special magazine as we celebrate 100 years of the uninterrupted existence and provision of full health care services (John 10:10) by Ngora Freda Carr Hospital (NFCH), and also fundraise for resources in order to rebuild, rebrand and revive NFCH for our people. Halleluia! This is how far God Almighty has helped us (Isaiah 7:12).

NFCH is the first health care missionary hospital to ever be built in Teso in 1922, second to Mengo Missionary Hospital in Uganda. This hospital is our Church of Uganda founded Hospital. We thank Mr. Ernest Carr, who hatched the vision in memory of his beloved daughter, Freda who died of malaria in Nairobi Hospital, Kenya. Today, Sunday 27th November 2022, the first Sunday of Advent 2022, we unveil a memorial monument in honour of Freda, marking a memorial of health care ministry of "Glory, Gloom and Glow", quoting the editor's words on the account of Ngora Freda Carr Hospital by the Chair of this Centenary Celebrations Organizing Committee, Papa Dan Agwelakwap Ogelan's.

We thank God Almighty for the great service of great people, from Dr. E.V. Hunter the first Medical Superintendent, Dr. John Mackenzie Maitland, Dr. Stephen Ecookit, Dr. (now Prof.) Francis Omaswa to Dr. Amos Odiit the current Medical Director, the Hospital Unit heads and all the dedicated medical and support staff who have served this great historical hospital. We

equally thank the Ministry of Health, our external and local partners who have supported and blessed us in all these years. We particularly recognize the 47 years of illustrious service of Miss Judith Grace Ikilai, who has faithfully offered secretarial services. We, too, appreciate Mzee George Oleico for his faithful service as a dresser. He is now aged 96.

As Prof. Francis Omaswa rightly observed, 'Ngora was an excellent model for surgery in East and Central Africa!' In his words, he further states: "With respect to Heart and Thoracic surgery, Ngora became the national referral hospital, with patients referred from Mulago and other parts of the country!" However, due to the wars and cattle raids that have ensued in Teso and the hard economic situations, NFCH, like many other hospitals in our country, is struggling and needs our support. Can you imagine we have just one old ambulance to run all the errands in Ngora, which was provided by Jersey friends a long time ago! There is need for a) two ambulances each to cover the two old sub counties Ngora and Kobuin; Mukura and Kapir b) two double cabin pickups also to cover the same old sub counties. We appeal to you our Chief Guest and the Speaker of the 11th Parliament of Uganda (our daughters of the soil) using your God-given great offices to lobby for the same for effective service delivery among our people.

NFCH, when it was blossoming, had a number of consultants – surgeons and interns and a thriving nursing and midwifery training school, and many of our people benefitted immensely. Today, we are in dire need of at least four consultants (surgeons); paediatricians (children diseases specialists), general surgeon, gynaecologist and a specialist in adult medicare (physician). The availability of the said consultants would attract interns and increase our areas of health care services delivery and bring services closer to our people at affordable costs.

We appeal to the Government of Uganda, Your Excellency Maj. (Rtd) Jessica Rose Epel Alupo our Chief Guest today, to kindly convey our message and appeal to His Excellency the President of the Republic of Uganda, General (Rtd) Yoweri Kaguta Museveni and the Ministry of Health our request and appeal for secondment of the above stated and critically needed medical consultants and surgeons.

We equally appeal to our sons and daughters of the soil, who have the above stated specialties, to consider the possibility of coming back home to render the much needed service to our people.

Despite the glaringly seen challenges, the Grace of the Lord is clearly evident in NFCH. That is why it is still resiliently standing tall in Teso as a competitive health care provider. We can still revive NFCH and it becomes the centre of excellence for health care provision. Amidst the conspicuous challenges, we believe that our God is able to do exceedingly abundantly above all we ask for or think (**Eph. 3:20, NIV**). We pray that today, as we as well fundraise for the renovations of some archaic facilities and procurement of some medical equipment, He shall use us to make Ephesians 3:20 become real as we generously contribute.

This hospital treats all patients without segregation in terms of religion, political affiliation, etc. This hospital is non-partisan. I was privileged to have been born here in 1965, according to the records my parents; the late Christopher Okwii and the late Phoebe Agwang availed to me. I know of my Catholic, Muslim and Pentecostal friends who were also born in this hospital. This is, therefore, our hospital for all faiths, beliefs and creeds. Together, we can make it better again. We pray that we put our hands together and do something about its revamping for sustainable service and growth (Ephesians 4:3-14). We pray for unity of purpose.

I thank my predecessors post-houmously; Bishop Alexander Kitching, Bishop Usher Wilson, Bishop Asanasio Maraka, Bishop Geresom Ilukor and Bishop Charles Obaikol, Bishop Thomas Edison Irigei, Bishop Emeritus John Charles Odurkami our former caretaker Bishop; for the effective oversight role they played and attracted great friends; from the United Kingdom (UK), some from Jersey Islands and, of recent, the Rotary Club International, for their great support offered to make NFCH great. We, too, thank the local partners, Papa Stephen Besweri Akabway, who has started single-handedly to reconstruct Dr. Hunter Ward; Dr. Amos Odiit who donated his birthday celebrations as a gift fundraising to renovate the first theatre. Thank you beloved!

I, too, dearly thank the wise people who mooted the idea of 100 years celebration of NFCH great service to our people and We Michael Kumi thank the Chair and Vice Chair of the Centenary Celebrations Committee and all the committee members for the great work done. We recognize the great effort and support given by my dear friend, Hon. Musa Ecweru the Minister of State for Works and Transport, for all he has given in order to facilitate and enable this day. We equally recognize my Diocesan Public Relations Manager, Jonathan Maraka, for the great work done to produce this special magazine for this momentous celebrations.

To all who have contributed in one way or another,

thank you. May God Almighty bless the work of your hands (Psalm 90:17). We pray for further cordial and magnanimous relationship as we purpose to revamp Ngora Freda Carr Hospital for the better. We appeal for further support, connections and friends to come to our rescue to redeem the giant medical healthcare provider in Teso and Uganda.

To God Almighty be the glory for our Chief Guest, Her Excellency the Vice President of the Republic of Uganda, Hon. Maj. (Rtd) Jessica Rose Epel Alupo, who is also the Woman Member of Parliament for Katakwi District; and the gracious presence of His Grace the 9th Archbishop of the Province of Church of Uganda, the Most Reverend Dr. Stephen Samuel Kazimba Mugalu and all the great people of God present. Thank you for graciously blessing us with your presence and participation and contributions as we together rebuild, reconstruct, revamp and rebrand NFCH and the Diocese of Kumi for Christ, and improve the health and livelihoods of our people. Together we can say "this is how far the Lord has helped us" (2 Sam. 7:12) and today we are moving forward to launch a five year strategic development plan and to gift the hospital with: a modern St. Luke's Chapel, a modern neo-natal unit, and a monument in memory of Freda and cause the renovation of some of other old looking facilities and procure equipment for our dear NFCH as we donate whatever the Lord has provided you with, for **God loves a cheerful giver** (2 Cor. 9:6-8, NIV)

Finally, to our dear staff, when everything is done, we shall only return Ngora Freda Carr Hospital to its glorious days when you review your relationship with Christ and adopt new positive attitudes towards work, and when management places the right people in right offices at the right time. You ought to delink yourselves from corruption tendencies, manage resources well and efficiently, be content with your pay and when you cultivate the culture of good stewardship: faithfulness (1 Cor. 4:2) and the timely maintenance of God's property under your care; only then shall the days of Glory be retrieved from the archives of NFCH.

Welcome and be a blessing to NFCH, In the Name of God Almighty, the Father, the Son and the Holy Spirit. Amen!

Thank you.

Yours Diocesan Christ's Ministry Team Leader,
Blessings!

The Rt. Rev. Michael Okwii Esakhan
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NFCH was Centre of excellence for surgery



Dr. Apollo .O. Epuatt, Chairperson of the Board of Governors

Greetings and thanks to you all for joining Ngora Freda Carr Hospital (NFCH) to celebrate 100 years of uninterrupted existing and service! NFCH tops the list of historically developmental institutions, not only in Teso, but in Uganda and East Africa. Today, NFCH stands tall among the top three star institutions of Teso - Ngora High School and Teso College Aloet. Nationally, Ngora FCH comes second to Mengo (which gave birth to Mulago National Referral Hospital and Makerere University College Of Health Science) as a pioneer health service and health professionals training institution in Uganda. NFCH boasts of a long list of prominent and known Teso children who were born in and attended by the caring hands of the midwives of the hospital.

The hospital has contributed greatly to the health work force in Uganda through the Nurses & Midwives Training School which has over the years produced a high-quality cadre of badly needed nurses and midwives for the country. It has also been an internship training site for newly qualified doctors. Unfortunately, this is no longer so, for reasons dating back to the insurgency in Teso, and other factors. NFCH was for a while a near centre of excellence for surgery, including heart surgery, and a service destination centre for flying doctors.

However, for reasons of insurgency and other na-

tional health demands, NFCH had to sacrifice two of their best qualified and performing doctors, Prof. Francis Omaswa and Dr Catherine Nyapidi Omaswa, to higher national health service.

After years of pioneering glorious service, it can be said with all honesty, that NFCH is no longer the same. We celebrate 100 years of existence or survival for a glorious institution that has been left by stakeholders to retrogress.

Today we can all join hands to rehabilitate NFCH to a top model subregional institution to deliver much needed and required services by the Teso and neighbouring communities, by supporting or contributing to the acquisition of the following:

- Infrastructure and equipment - appropriate and adequate to house and effect various services suitable for staff and students' accommodation;
- Recruiting, developing, paying, and retraining adequate qualified staff for the various roles in departments in the hospital and training school;
- Reconnect NFCH to the chain of resource centers of excellence for health care and health professional training in the country - for community health education and literacy for health promotion, school health, medical clinical training, medical internship, specialist nursing, medical research, etc.

This is achievable through your/our continued interest and partnership - as institutions, organizations, or individuals, present and represented here.

Finally, I register my deepest appreciation, and of the NFCH BOG and fraternity to the founders and caretakers of NFCH - the Province of the Church of Uganda (COU), supporting institutions including Soroti and later Kumi Dioceses, the Bishops, and UPMB. We greatly appreciate the contribution of the Government of Uganda, the Ministry of Health, Ngora District Local Government, the communities, Members of Parliament and local councils of Teso. We treasure the role played by the former and current BOGs, and the Medical Director and Management, the ground Team of Staff, our students who bring a refreshing and cheering presence of youth, and their parents, our patients and clients who give us relevance, and all of you friends and partners standing together to promote NFCH. Never stop!

Dr Apollo O. Epuwatt, FCP (ECSA)
Chairman Board Of Governors Ngora FCH.

We are offering the Hospital 'Birthday' gifts



*Mr. Dan Ogelan,
Chairperson Centenary Organizing Committee,*

The idea to celebrate the Ngora Freda Carr Hospital (NFCH) centenary was mooted by some elders following the Ngora High School centenary celebrations in 2014 at St. Phillip's Cathedral Ngora. The elders who attended the school's centenary celebrations were inspired to do the same for the hospital come 2022.

In 2019 the hospital administration convened a general meeting attended by very many people to prepare the facility's 100 years of dedicated and excellent services. The meeting selected the steering committee to organize the celebrations. I was elected the Chairperson of the executive committee, with Bishop (Rtd) Charles Bernard Obaikol as the vice chairperson, the Medical Director – Dr. Amos Odiit as secretary, Sr. Margaret Arionget Lima the treasurer, David Ebajut the secretary for publicity, plus other five committee members.

The committee developed three objectives for the centenary celebrations. First, to thank God for the gift of the hospital and the 100 years it has served people in Teso, Bugisu, Bukedi, Karamoja, Lango, and other parts of Uganda.

The second objective was to give gifts to the hospital. We identified three major gifts. First, to build a larger and modern Chapel in line with the first objective and to cater for the growing community. The second was to renovate the old dilapidated chapel

which was built as a gift from the UK Christians. We do not want to lose the unique architectural design and history of this old chapel. We will use it as a resource centre where our archives will be kept.

The third gift is to build a Neo-natal unit in the hospital to provide specialized medical care to the steadily growing number of babies born with complications. Also, infant mortality is still high in our country while pre-mature babies born in this hospital are usually taken to Soroti Regional Referral Hospital or Mbale Regional Hospital. Gift number four was to erect a sculpture in memory of Freda, the daughter of Mr. Ernest Carr who donated money to the CMS to establish a mission hospital in Ngora. Ernest was a resident in Nairobi, Kenya. He lost that daughter in Nairobi due to malaria.

While there are shortcomings in almost all areas of health service delivery in the hospital – infrastructure, equipment, personnel and others, we chose the four gifts keeping in mind our capacity to mobilize funds to deliver them. We drew a budget of UGX1.3 billion, which we had to raise for the whole centenary celebrations. Strategies to raise the funds involved directly approaching people of good will and making appeals through radio, mass media, and meetings.

Two walks and runs affordable to everyone in the community were conducted. We had support from friends in the UK, such as Sr. Elizabeth Swarbrick who was once a Health Tutor in Ngora Nurses Training School. We sold materials such as printed T-shirts, diaries, umbrellas, bed-sheets and many other items to get profit to invest in the celebrations.

Other successful fundraising activities were held. In Ngora a fundraising dinner was held in honour of the Medical Director, Dr. Amos Odiit's birthday at Galaxy Hotel. It was attended by people from as far as Kampala, Soroti and Kumi and raised over UGX12 million.

The hospital's Board of Governors contributed much money and other support.

Much as we celebrate success in our strategies, we experienced several challenges. The biggest challenge was COVID-19 which caused the lockdown that held back our preparations for almost two years.

That is why we had to postpone this celebration from June to November.

There were many other challenges, but we do not want to 'spoil the party' by including them here. Despite the challenges, we strived to achieve our objectives and what we might not have achieved now will be carried forward after this celebration.

I thank all people and institutions that supported us in the preparations for this celebration. The Church of Uganda Diocese of Kumi, especially the Diocesan Bishop, Rt. Rev. Michael Okwii Esakhan, guided us a lot. The hospital board and management teams, UK friends, Government of Uganda, Ngara District and other local governments were very supportive. Some elders made tremendous contribution. Notably, Mzee Dr. Stephen Besweri Akabwai the former Chairperson of the Electoral Commission committed his personal resources to reconstruct Hunter Ward - the first ward built in 1922 and to clean the compound, together with Mr. Leornard Isodo.

We acknowledge contributions from our MPs; Hon. Juliet Achayo Lodou, Hon. Dr. Abraham Isamat and Hon. Stella Apolot Isodo, and Kumi Hospital - Ongino, as well as Kumi Orthopaedic Center.

Institutions, especially the Church of Uganda founded schools, notably Ngara High School, Ngara Girls Secondary School and BKC Dem. Primary School made a tremendous contribution. Non-governmental organizations like Vision TERUDO provided invaluable support. We recognize the community - with all the challenges they face; they contributed whatever little they had and made this celebration a success.

"The third gift is to build a Neo-natal unit in the hospital to provide specialized medical care to the steadily growing number of babies born with complications"

We also appreciate the contribution from some of the people who were born in Ngara Freda Carr Hospital and the Kampala Sub-committee headed by Dr. Tom Okurut. Mr. Godfrey Epodoi did a lot of mobilization here in Ngara and Kampala.

Finally, I pay great tribute to the members of the organizing committee. They did very well and were really good. Very earnestly, I appeal to people of good will to contribute generously to the rehabilitation of Ngara Freda Carr Hospital. We would like to see the glory which was prevalent during the time when Prof. Francis Omaswa was the hospital's Medical Superintendent. During her glorious time, the hospital attracted patients from as far as Masaka, Kampala, Busoga (including Dr. Specioza Wandira Kazibwe the former Vice President of Uganda), and even Kenya.

We hope all the guests present in today's celebrations will appreciate and enjoy the fruits of the organizing committee's labour. Thanks to you all who have come to attend the celebration.

Photo by JONATHAN MARAKA



ONE OF THE GIFTS: The New St. Luke's Chapel, Ngara Freda Carr Hospital

Very slow rise of patients' numbers

Having worked in Ngora Freda Carr Hospital as an intern in 1988, I came back here after 29 years (at the end of 2017), this time as the Medical Director. There were two doctors, the Senior of them was a Surgeon also doubling as the Acting Medical Director, while the other was a junior Medical Officer. There were 27 nurses, only five had diploma while 22 were certificate nurses. To date nurses remain 27, of them only six possess diploma, owing to the hospital's inability to pay competitive salaries.

Though most of the buildings were old, good samaritans represented by the Rotary Club of Kampala Central and different Rotary Clubs of England through the Rotary Grant renovated the surgical theatre and maternity. That grant was processed by Dr. Jim McWhirtter a UK Obstetrician/Gynaecologist.

Other good Samaritans, Voucher Plus USAID Program paid the bills for mothers from within five kilometres from the hospital. That gave regular income to the hospital. TASO financed the hospital HIV services - the largest in Ngora District; while Uganda Protestant Medical Bureau did many supportive activities, including sponsoring staff for human resource development.

When the Rotary Club of Kampala Central completed refurbishing the theatre and maternity, they asked; "What else do you think is urgent?" I pointed at the floors of the outpatient department and clinical rooms which were pathetic with 'potholes'. They took it up and tiled it.

A program from Government of Uganda and donors called Results Based Financing came along. With RBF we received direct support supervision and financial rewards from Ministry of Health and were able to renovate and expand our emergency room, and to repair the lane connecting the OPD. The lane had not seen maintenance for decades.

We sunk toilets for staff, and bought solar equipment to enable oxygen concentrators function at the high dependency area work when mains electricity would suddenly black out - a frequent occurrence, especially during the rainy season.

- The Hospital currently provides the following services, of which we have noted considerable



Dr. Amos Odiit - Medical Director

increase in utilization:

- General outpatient and inpatient services: primary health care services in an integrated way (immunization, health education, school health, MCH/FP, disease surveillance - TB, epidemic causing diseases);
- STD/HIV/AIDS control (case diagnosis, treatment, etc.);
- Voluntary Counselling and Testing (VCT) for HIV/AIDS – with support from The Aids Support Organization (TASO);
- Malaria Control by promotion of use of insecticide treated materials (ITM); integrated management of childhood illnesses (IMCI); use of Coartem;
- Training of enrolled nurses and midwives (certificate level); and diplomas in nursing and midwifery;
- Investigation services (ultrasound scanning, clinical laboratory tests, electrocardiogram, X-ray services);
- Dental services; and
- HIV/AIDS Testing and treatment activities.

Few hospital performance indicators are worth noting:

- Five year Antenatal Care trend shows a modest rise from 753 in 2017 to 1,158 in 2021;
- The average annual total out-patient department (OPD) attendance for the last five years was 9,811.8 with a very slow rise in 2019 and 2020, but a slight drop occurred in 2021. The long drawn COVID-19 pandemic is a possible explanation for the 2021 drop in total OPD attendance.

- Annual inpatient numbers have remained rather below the 2017 level having hit the lowest level of 2,498 in 2018 and has slightly risen from that to 3,472 in 2021.

In 2017 there were 268 students for only certificate courses for nursing and midwifery. From 2017, the school introduced diploma extension courses. This is helping the hospital and all other health facilities to upgrade the level of nursing training.


Our current wish list is all in the Five-year Strategic Plan. The urgent ones are a fence around the hospital which would cut down on trespassing and improve security; acquisition of laboratory equipment - CBC machine, and an electrolyte machine; accommodation for intern doctors as we plan to resume partnership; and lecture space and dormitory space for the School of Nursing & Midwifery.

Dr Amos Odiit - Medical Director

Photo by JONATHAN MARAKA



Ultrasound Scanning is one of the services provided by the hospital



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Ngora was excellent model for surgery in East & Central Africa



By Prof. Francis Omaswa

In December 1980, The Association of Surgeons of East Africa (ASEA) held a symposium in Mombasa, Kenya where it was decided to select one hospital to demonstrate how to deliver cost effective surgical services in rural Africa. On 5th April, 1981, the ASEA held one of its quarterly Council and Scientific meetings at Ngora Hospital and were impressed by the reception that they received from the community and the support that the hospital enjoyed from the government. I attended the symposium in Mombasa and coordinated this visit by ASEA to Ngora.

Later, when the surgeons were selecting the site for their demonstration project on cost-effective rural surgery, I made an offer to lead the implementation of this project on condition that it was located at Ngora hospital and the surgeons agreed.

I moved from Nairobi where I was Head of Cardio-thoracic Surgery at Kenyatta National Hospital and the University of Nairobi to Ngora at the end of 1981. My wife Dr. Catherine Omaswa who was also a Consultant Anaesthetist in Nairobi and our children

“With respect to Heart and Thoracic surgery, Ngora became the national referral hospital with patients referred from Mulago and other parts of the country.”

joined me at the beginning of 1982.

The objective of the Ngora Hospital project was to use this rural hospital for demonstration and learning as a place where sets of surgical procedures are performed competently and efficiently near the homes of the patients in well thought out surroundings. The project had ambitious plans to construct a new operating theatre designed by the surgeons and to establish appropriate laboratory and X-Ray services. The plan also included installing radio call communication services for consultation and referral of patients as well as an airfield for surgical specialists to fly in, bringing specialized services to the local people.

It is gratifying to note that all the planned activities were achieved. The new operating theatre was completed and its plan has now become the model for all Health Center IV operating theatres in Uganda. Other countries in Africa have also copied this design. The radio call service was donated and managed by AMREF, thus connecting Ngora with the rest of the world. The service was used for consultation and organizing the travel of the flying doctors.

It should be noted that during the war to overthrow the Obote II government in 1986, this radio call service became the only communication channel with the rest of the world as telephones were switched off and there was no transport out of the region.

The Radio Call was used to send messages via Nairobi to Radio Uganda in Kampala to make announcements that helped us to get in contact with soldiers from the area who had left the army to as-

Courtesy Photo by PROF. FRANCIS OMASWA



Council members and some delegates of the Association of Surgeons of East Africa at Ngora on 5th April 1981

semble in one place in Ngora from where they were organized to establish a security system in the area.

The type of X-Ray machine, known as the Basic Radiological System, that was recommended by the Mombasa symposium took long to acquire, but was installed by 1985 and the laboratory was improved to include capability for bacterial culture and sensitivity on top of the services which existed already.

The most notable achievements were in human resources and the huge volume and diverse range of health services that the hospital was providing by 1987 when I left Ngora hospital. When I arrived in 1982, there were three doctors, namely; Dr. Stephen Ecookit who was a consultant surgeon; Dr. Moses Ejumu and Dr. Richard Stockley as medical officers.

When I left, there were four surgeons, namely; Dr. Stephen Ecookit, Dr. Alex Upoki, Dr. Francis Omaswa and Moses Ejumu who had since qualified as a surgeon sponsored by Ngora Hospital and returned to Ngora. There was also one Obstetrician and Gynaecologist, Dr. Philip Opio-Kabete.

In addition, there were a number of Medical Officers such Dr. David Okello and Dr. Charles Echelu among others. Medical students started to come to spend their holidays at the hospital, such as John Omagino, Sam Omoding, Valentine Aruo, Angoyaar, Amos Odiit, among others. These students qualified

and came back to Ngora Hospital to work as Surgical Interns under training and were replaced by many others including Dr. Ojilong Albert on 6-month rotations.

It was at this time that I became convinced that the best place to train surgery and other medical specialists was in hospitals where there is a heavy work load with competent adequate supervision. I subsequently advocated for this approach to training specialists until it was adopted by the ASEA which in 2000, created the College of Surgeons of East Central and Southern Africa (COSECSA) and I was elected as the founding President of this College. This is now the largest surgical college in Africa and this model has been adopted by all other major specialties as well with its head office in Arusha, Tanzania.

With respect to Heart and Thoracic surgery, Ngora hospital became the national referral hospital with patients being referred from Mulago and other parts of the country. This was possible because Dr. Catherine Omaswa provided specialist anaesthetic services while I carried out the surgery. Post-operative care was supervised by Dr. Vera Lewis an American Nurse with a PHD in Nursing.

There were also regular visits by flying doctors led by Dr. Waddel providing surgical camps for Eye surgery several times annually. There were other visiting surgeons in orthopaedics and general surgery. There

was a vibrant Community Health Program covering Ngora and Serere Counties at the time, in partnership with the districts of Kumi and Soroti. Dr. Waddel flew in several times to carry out Eye surgery camps. Individual surgeons made contributions to my salary through Dr. John Craven and the hospital.

Appreciation for all these achievements goes to many. The ASEA was exceptional in providing moral support; coming to paint the new operating theatre themselves, visiting regularly, especially Dr. Imre Loeffler from Nairobi and John Jellis from Zambia. Each of them owned a personal light aircraft.

The Board of Governors Chaired by Mr. William Opit and Bishop Geresom Ilukor were very supportive. For example, they allowed doctors to take turns to run our private clinic in Soroti in order to supplement our salaries.

We also created the Ngora Consultative Committee of Heads of institutions in Ngora and we had a social club in one of the houses provided by the hospital for

playing sports and passing time.

We owe much gratitude to The Friends of Ngora Hospital in the UK led by Dr. John Maitland who mobilized supplies and above all brought the support from the Government of the States of Jersey who sent builders twice led by Dennis Troy to come and construct the operating theatre and the Jersey Ward as a Private facility. I made several trips to Jersey.

Last but not least, appreciation is due to my family who accepted to come to live in Ngora, including Dr. Catherine Omaswa a highly qualified specialist and our older children Fiona Acom and Irene Asekenye who started attending Ngora Boys Primary School where the floor of the classrooms was smeared with cow dung, much to their surprise.

The next century for Ngora hospital should reconnect with the Surgical Community and have the hospital recapture the vision of being a training center for surgery that can be carried out as near the homes of the population as possible.

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Photo by JONATHAN MARAKA



The old administration block and operation theatre.

By Dan Ogelan Agwelakwap

Established in 1922, Ngora Freda Carr Hospital is Uganda's second hospital after Mengo Hospital in Kampala.

Up to 1960s it was known as Ngora Mission Hospital, but because the construction of the hospital was a donation from Mr. Ernest Carr, a philanthropist resident in Nairobi, the governance of the hospital decided to rename it Ngora Freda Carr Hospital in memory of his 12-year old daughter, Freda who died of malaria in East Africa on 22nd September 1917.

Dr E.V. Hunter, a missionary medical doctor then attached to Mengo Hospital, was sent from Mengo Hospital to come and establish a hospital. Hunter was the first Medical Superintendent of the hospital. In recognition for this historic effort the male ward in the hospital is named Hunter.

Even before the establishment of the formal health care system in Freda Carr, Mrs. Dillistone, a wife of a missionary was providing health services near Ngora High School, just a few metres away from where the current hospital is located. In recognition of her service, the female ward in the hospital is named Dillistone.

Some of the buildings with which the hospital started are still here. It was the only hospital of that standard in Teso Sub Region other than Soroti Hospital which was a government health facility established in 1950s.

By 1930 the patient numbers had grown to over 30,000 per year because it was serving the whole of Teso region, Karamoja and parts of Lango region.

The most immediate and many beneficiaries of the hospital's services are the educational institutions in Ngora. These include Ngora High School, Ngora Girls Primary School, Ngora Boys' Primary School, Ngora School for the Deaf, Ngora Bishop Kitching College (BKC), Ngora BKC Demonstration Primary School, St. Aloysius Core PTC, Ngora Township Primary School.

The missionary doctors that came in after Dr. Hunter included Dr. Bennet and Dr. Spark. Later came in Dr. Guinness and Dr. Wright. There were many missionary medical workers in the hospital. We had missionary workers like Pickrin and Brewster.

Bennet was a very famous doctor and, in recognition of his service, many people in Ngora named their children 'Obenet', now a common male name

among the Iteso.

All these missionary workers, apart from treating patients, also trained the local people in providing health care. At that time the human resource in the hospital was thin. So the missionaries recruited and trained on job many local people who had been to school to levels as low as Primary 5, to examine patients, diagnose simple ailments, inject medicine and dress wounds.

Many of the local health care workers were drawn from Kapir, Mukongoro and Pallisa because of their proximity to the hospital. They included Samwiri Omoding, who worked as the medical assistant for a very long time, and Yowasi Emuron from Pallisa. Omoding and Emuron were among the medical workers who rendered health care here for a very

long time.

Gideon Ojamuge from Kapir worked as a Dispenser in the hospital for a very long time. Many of his children, including Hon. Christine Amongin Apuru, and Kenneth Oluka the current Acting Managing Director of Uganda Printing and Publishing Corporation (UPPC), were born here at the time he was the hospital's dispenser.

Kusai Ojilong worked as a 'dresser' and later became a 'senior dresser'. The other was Mikaili Aurien from Ajesa, Kapir Sub County in current Ngara District. A ward in the hospital is named 'Aurien' in recognition of his diligent service.

When Uganda attained independence in 1962, most of the missionary doctors and health workers went



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Photo by JONATHAN MARAKA



The New Operating Theatre refurbished by The Rotary Club of Kampala Central in Uganda and The Rotary Clubs of Reading Matins, Cardiff West, Harpenden Village, Marlow, Marlow Thames, Reading Abbey, Reading Maiden Erlegh and Thanet in the UK with support from Rotary Doctor Bank GB & I, WASRAG and funded by The Rotary Foundation Rotary International Global Grant.

back to the UK their homeland. The hospital health care services began to be managed by Iteso doctors, though a few missionary doctors continued.

The first Iteso doctors to work in Ngora Freda Carr Hospital include Dr. John Stephen Ecookit who hailed from Aketa in the current Ongongoja Sub county in Katakwi district. The other is Prof. Francis Omaswa now a globally celebrated and reknown cardiologist/heart surgeon who is also the current Chancellor of Soroti University of Science and Technology; and his wife Dr. Catherine Nyapidi Omaswa.

Owing to the provision of excellent services in Ngora Freda Carr, especially during Prof. Francis Omaswa's time as its Medical Superintendent, patients managed by the facility came from places outside Teso, as far as Kampala. It was almost a referral hospital. Why? Because there were also very famous medical doctors and surgeons like Dr. John Mackenzie Maitland and Dr. Stephen Ecookit.

The other medical staff included Sr. Esther Imede, who became a very famous midwife in the hospital and one ward is named after her. The name Imede or Esther Imede is also very common among the women in Teso, in honour of her service as a midwife.

Up to 1986, the hospital was operating very well and offering excellent services. In 1986 armed insurgence ensued in Teso, which lasted nearly seven years. The hospital almost died out owing to the insurgence. It was vandalized.

Fearing atrocities committed by the rebel forces, people fled their villages and settled to live inside the hospital premises for safety. As the internally displaced persons lived in the hospital they also damaged most of the hospital's infrastructure.

Most health workers fled the hospital. Medical supplies dwindled. The administration and management of the hospital had broken down. A number of the hospital's important equipment were stolen. So, in 1993, when eventually the insurgence died out in Teso, the hospital actually looked like a shadow of itself.

It has been a humongous and very difficult task to get the hospital back to its feet. First of all the hospital no longer attracted patients and, thus, no resources were coming in, which made it very difficult to procure medical supplies and to pay salaries to the few medical workers who remained.

The coming of Dr. Amos Odiit who was also born in this very hospital on 29th September 1959 is a very big blessing to the health facility. Despite the fact that there are still shortcomings faced by the hospital in several areas, the hospital has picked up now. It is running normally. Both the governance and management of the hospital are in place and stabilized.

So, as we witness the close of the last 100 years and entering the next 100 years of Ngora Freda Carr Hospital, there is now hope. We enter with hope because many changes have taken place in terms of human resource, infrastructure, supplies and others.

Lasting memory of Ernest Carr and his daughter, Freda

By Charles Aedeke Opolot

As you enter through the Ngora Hospital gate leading to the outpatients department, you come face to face with the monument in form of a statue erected in commemoration of 100 years of the Hospital. This monument is in memory of Freda Carr the daughter of Mr. Ernest Carr who donated personal funds to establish this Hospital. Freda died of malaria in Nairobi where her father was resident.

So in memory of the daughter, the Hospital was named Ngora Freda Carr Hospital in honour of her and Ernest. The centenary celebrations organizing committee therefore found it fitting to erect this monument/statue depicting Freda as a testimony that is visible to the human eye and interpreted by people of all walks of life.

Courtesy Photo by ERNEST CARR FAMILY



Freda Carr (RIP): 29 Jan 1905 - 22 Sept. 1917

By definition a monument is a type of structure that is explicitly created to commemorate a famous person or event as part of remembrance of historic times and importance. It serves as a reminder that history is not just in books but all around us, including statues, sculptures, buildings, bridges, stone pillars, archaeological sites and cultural assets.

Therefore, it was thought fitting for the purpose of 100 years celebration and more years to come to write History of the Hospital in form of statue/monument.

The materials used are durable to last more years to come with routine maintenance, just like buildings. The main materials used to construct the monument are stone aggregates, bricks, sand, cement, iron sheets, wire mesh, welded wire, expanded wire, feldspar, kaolin, plaster of pans of pan 3, inter mixed paints.

The other main purpose of monuments, statues and sculptures is to offer decoration and a new look to the environment or compound. It enables us to visualize what Freda looked like and this is her likeness based on photographs obtained. The monument also adds beauty to the Hospital compound.

This monument of Freda will inform present and future generations the history of the Hospital and how the name Freda Carr came to be the choice. It will be a reflective memory for people to think what they can in turn offer the Hospital for its sustainability and posterity, following the example of Ernest Carr donation to start the Hospital. The monument is a lasting challenge to us to see that we too can offer so that next hundred years will be celebrated with some great things to show.

[The writer, Mr Charles Aedeke Opolot is a Fine Artist (Sculpture/Painting)/Head of Laity, Church of Uganda Diocese of Kumi. He is a member of the Centenary Celebrations Committee in charge of construction of the monument - Editor]

**"The monument also adds
beauty to the Hospital
compound."**

Efforts to improve Ngora School of Nursing and Midwifery performance



By Susan Babirye Ssawe
Ag. Principal School of Nursing & Midwifery

Ngora School of Nursing and Midwifery offers certificate and diploma courses. It was one of the academic giants in teaching nursing students and has produced many notable personalities such as Sr. Maate Rita - former Registrar of Uganda Nurses and Midwifery Council, Sr. Beatrice Amuge - Commissioner Health Services, - Nursing and Midwifery at the Ministry of Health and many others.

However, over time the school enrolment levels, standards and relationship with the immediate community declined. Many people had labelled the school as a 'failure factory'.

In this article, a success story is presented on how transparent management system made it possible for the school to register rapid upward improved performance and increased enrolment that today many parents and guardians are yearning to bring their daughters and sons to this school.

One could visibly see a number of gaps that needed to be fixed in the academic situation of the school, most of which were inherited. When I was appointed to leadership position of the school first as Deputy Principal in 2019 and later in 2021 as acting Principal, I mobilized our staff to discuss and seek ways to improve performance and enrolment levels - testing and performance of teachers/tutors designed to

Passing rate
currently at 98%

weed out poorly performing teachers; motivation for teachers; collective work patterns in four areas: planning, program development, student development and assessment of productivity.

This began by promoting school leaders' confidence to succeed and in their belief that improved school practices are important to their students' future. We explained to them the importance of shared vision and purpose, a safe and orderly environment, instructional leadership, managing high expectations of students, student time of tasks, monitoring student progress, positive home - school relations, creating positive school - local community relations etc. Together, we identified the school's priority needs for improvement using the school work culture model. These are usually the school's performance levels (typical test scores and school's culture) induced by three levels of culture: the physical and social surface environment which can easily be recognized; espoused values and beliefs which are conscious strategies, goals and philosophies; traditions and ceremonies and underlying values that reinforce the school values but exist at a largely unconscious level.

This was done after critically recognizing that if students were valued and felt safe there would be fewer distractions and discipline problems, you create a conducive learning environment and when teachers have their best interest at heart, they definitely commit themselves and work harder.

In addition to focusing on test scores and curriculum to get outcomes we wanted, we also examined the school culture by assessing the social and emotional status of the school - lack of motivation, teacher absenteeism, teacher commitment and competitiveness, assessment as critical tools that guide teachers in improving their lesson plans and framing their instructions and student dropout.

As a result of these efforts, our students have maintained passing rate at 98% compared to the previously below 50%. The student enrolment rose from

200 students to currently over 400 students.

We now propose to create a Principal's School Improvement Committee to manage the development processes of the school - developing specific student, staff or other school needs through department meetings, specific assignment to teams noting how they will be intergrated into the school's strategic development plan. This would be followed up by routinely having the teams explain what they do to contribute to the achievement the overall goal. Teams will then be able to examine the problem and propose solutions to the committee.

Despite these achievements, we face challenges of availability of funds to implement our identified critical priorities, such as building a multipurpose hall, classroom block, boys' hostel, and a school bus.

We thankfully recognize the guidance and support to the school from our immediate supervisor, Dr Odiit Amos the Medical Director of Ngora Freda Carr. We



Photo by JONATHAN MARAKA

Student Nurses in group discussion in preparation for final exams

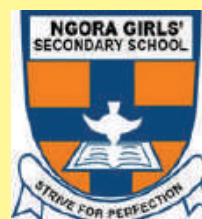
specially appreciate the inspiration from Rt. Rev. Michael Okwi Esakhan the Bishop of Church of Uganda Diocese of Kumi. We continue to pledge to improve our standards, physical environment, values and culture.

History of the Nursing Training School



By **Sr. Margaret Arionget** (pictured above left) and **Sr. Joyce Gladys Amado** (pictured above right)

Ngora School of Nursing and Midwifery was established in 1961 with the objective to reduce maternal mortality and morbidity rates and to develop human resource for the provision of quality services.



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Photo by JONATHAN MARAKA



The Ngora School for Nursing and Midwifery modern girls' hostel built with support from the European Union.

The school staff in 1972 comprised Ms E.A. Watson as the Sister Tutor, Ms Elizabeth Swarbrick, Dr. Hilary Maitland teaching gynaecology, Mr. Elda Carr, Sr. Margaret Clark, Sr. Jennifer (Jenny) Clark, E. Eladen the Matron, Mrs. G.E. Turner the Secretary, Judith Ikilai later became the Secretary, Miss Margaret Arionget Lima a.k.a Amusugut who later joined the training school to train as a midwife.

Owing to the nearly seven year's armed insurgence in Teso from 1986, the school closed, and was re-opened on 22nd January 1995 by Mrs. Dorothy Ecookit as the school Principal.

When she retired from being the Principal of Government owned Soroti School of Comprehensive Nursing, Mrs. Beatrice Ojamuge became the school's Principal. The school at this time was training both enrolled midwives and nurses using the same structures with 38 student midwives, In 1996 there were 65 student nurses and midwives. This number increased from 100 in 2000, and to 195 in 2002.

Mr. George William Oluk became the school's Principal from 2002 to 2005. During his time, a proposal that attracted funding from the European Unions was written. The funding was invested in constructing the current structures in the school and renovating the old ones in order for the school to qualify to train Enrolled Comprehensive Nursing

Mrs. Grace Ijoot, the Principal from 2005 to 2018, worked hard for registration of the school to train Certificate in Nursing and Midwifery students. The

school was registered on 15th June 2015 and awarded Registration Number MOESTS/BTVET/131.

During Ijoot's time, the house for the accommodation of the Principal was constructed and in May 2013 the Government granted the school the status to train Diploma Students, but this did not start immediately.

From 15th May 2018 to January 2020, Sr. Joyce Gladys Amado was the Principal seconded to the school by Ngora District Local Government. During her term, the construction of the structure funded by Mr. Anthony Houiellebecq was completed and the Diploma training for Nurses and Midwives commenced. A four-stance pit latrine was built for the female students and the Laida Foundation constructed a three-in-one house for the school teaching staff.

Sr. Martha Namaganda (RIP) became the Principal from 2020 to 2021, and upon her demise she was succeeded by Sr. Susan Babirye Ssawe the current Acting Principal.

The school is operating well, albeit with challenges, including high staff turn-over, inadequate funding, infrastructure and staffing. Debt burden and heightened tuition due to inflation weigh down the school, while there is a high demand for training boys, too. Inadequately equipped and populated training site for student's practice, coupled with limited employment opportunities for the school's products are also a big challenge.



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SCHOOL OF NURSING AND MIDWIFERY

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Telegram: Hospital, Ngora

Email Address: ngoranurses@yahoo.com

The Office of the Principal of NGORA HOSPITAL SCHOOL OF NURSING AND MIDWIFERY invites applications for the following programs in January 2023 Intake, Academic Year 2023/2024:

- CERTIFICATE IN NURSING
- CERTIFICATE MIDWIFERY
- DIPLOMA IN NURSING EXTENSION
- DIPLOMA IN MIDWIFERY EXTENSION

CERTIFICATE PROGRAMS students WHO HAVE PASSED THE FOLLOWING SUBJECTS AT O-LEVEL SHOULD APPLY: Mathematics, English, Chemistry, Biology, Physics, with at least a pass. Distinctions and Credits is an added advantage.

DIPLOMA IN NURSING EXTENSION and DIPLOMA IN MIDWIFERY EXTENSION Students MUST have experience of two years after registration with the UGANDA NURSES AND MIDWIVES COUNCIL.

Application forms can be picked from the Office of the Academic Registrar during working hours (8:00 am - 5:00 pm Week days). **Boys are also encouraged to apply.**

Deadline for submission of both applications is Tuesday 30th November 2022.

For more information, please call us on the office telephone line above.

THANK YOU.

Hospital Staff in 2022

Administration

Auma Florence - Human Resource Officer
Otimong Timothy - Estates Officer
Ikilai Judith Grace - Administrative Assistant
Apilla Christine - Office Assistant
Rev. Aceda John Emmanuel – Chaplain

Accounts

Etiang David - Accountant
Ijede Christine - Accounts Assistant
Akia Esther Lucy - Accounts Assistant
Asekenye Dorcus - Accounts Assistant
Okwii Milton – Accounts Assistant

Doctors

Dr Odiit Amos - Medical Director
Dr. Ogwal Daniel - Surgeon
Dr Ekunait John - Obs. & Gynaecologist
Dr Olaboro Jackson - Medical Officer
Dr Oluge Martin - Medical Officer
Dr Elwana Moses - Medical Officer

Clinical Officers

Ocuka Benjamin - Clinical Officer
Elagu Silas - Clinical Officer

Nurses

Akalo Grace - Senior Nursing Officer
Imaikorit Martha - Enrolled Nurse
Agwang Annet - Nursing officer Midwifery
Tino Hellen - Nursing Officer
Akodo Stella Beatrice - Enrolled Comp. Nurse
Amoding Lilian - Enrolled Comp. Nurse
Apolot Martha - Enrolled Comp. Nurse
Ilukor Geresemu - Enrolled Nurse
Iculet Hellen - Enrolled Nurse
Akiriat Annet - Enrolled Nurse
Ojangole Michael - Enrolled Nurse
Alupo Susan - Enrolled Nurse
Asio Mercy - Enrolled Nurse
Akello Christine - Enrolled Nurse
Namusana Esther - Enrolled Nurse
Mugena Lucy - Enrolled Nurse
Asekenye Annet Lillian - Enrolled Nurse
Akol Dorothy - Enrolled Nurse
Oriokot James - Enrolled Nurse
Suswana Rebecca - Enrolled Nurse

Midwives

Akwayo Topista - Enrolled Midwife
Apolot Peninah - Enrolled Midwife
Malinga Brenda - Enrolled Midwife

Agoe Caroline Joyce - Enrolled Midwife
Itadal Esther Mary - Enrolled Midwife

Theatre

Acam Jane Sylvia - Anaesthetic Officer/(Pt)
Anyumel Deborah - Theater Assistant

Laboratory

Tita John Michael - Laboratory Assistant
Akongai Salume - Laboratory Assistant
Adong Gorrett - Laboratory Assistant
Okiring David Stephen - Laboratory Attendant

Radiography

Ojangole Christopher - Radiographer Assistant
Ederu Joseph - Radiographer
Nakiwala Joanita – Sonographer

Pharmacy

Agoye Beatrice - Pharmacy Technician
Aisu Andrew - Pharmacy Technician

Records

Nandago Norah - Medical Records Assistant
Esaete Deborah - Data Volunteer
Amoding Martha - Medical Records Assistant

Stores

Akello Lydia Engwau - Stores Assistant

ART

Mpozembizi Teopista - Mentor Mother
Ayado Christine - Mentor Mother
Among Dinah - Peer Mother
Echet Christopher - Linkage Facilitator
Elabu John Peter - Linkage Facilitator
Asio Jesca - Linkage Facilitator
Alupo Angella - Linkage Facilitator

Sanitation

Adilu Moses - Cleaner
Omoding Robert - Compound Cleaner
Okello Moses - Compound Cleaner
Anguria Sam - Compound Cleaner
Opolot Sam - Cleaner
Odongo Charles - Cleaner
Okwakol Erasmus - Cleaner
Amoding Prescilla - Cleaner
Aseere Veronica - Cleaner
Akutui Jeniffer - Cleaner
Iriso Mathias - Cleaner
Asio Jesca - Cleaner

Ojono Robert - Cleaner
Okolimong John - Cleaner
Nekesa Christine - Cleaner
Epolat Charles – Cleaner

Security

Opolot David - Head Security
Opio Moses - Solar Security
Opalite John Francis - Solar Security
Ilemukorit Stephen - Security Guard
Onyait Joseph - Security Guard
Ongodia Joseph - Security Guard
Emudong Alex - Security Guard
Esukau James - Security Guard/Cleaner
Abwongoto Denis - Security Guard/Cleaner

Drivers

Ejamal Samson - Driver

Nurses & Midwifery Training School

Babirye Suzan S. - Tutor/Ag Principal
Ebiau Patrick Sam - Tutor
Mutesasira Mike - Tutor Midwifery
Okumu Allan Isaac - Clinical Instructor Midwifery
Omumwa Robert - Clinical Instructor Nursing
Akomolot Rose - Clinical Instructor Midwifery
Akello Demeteria - Clinical Instructor Nursing
Otwani Daniel - Clinical Instructor Nursing
Akello Irene - Deputy Principal/Ag Acad. Registrar
Achikule Richard - Radiographer

Oboire Edison - ICT Instructor
Amukan Paul - Stores Assistant/Ag. Librarian
Morunyang Michael - Bursar
Akia Esther Lucy - Accounts Assistant
Arionget Rhoda - Warden
Atim Jeniffer Ruth - Cateress
Atai Esther Sarah - Office Assistant/Ag. Administrative Assistant
Okurut Silver - Compound Cleaner
Okello James - Cook
Okello Patrick - Compound Cleaner
Ogwang James - Driver
Odeke James Patrick - Compound cleaner
Ogwang Patrick - Cook
Okwii Stephen - Cook
Okwii James Patrick - Compound cleaner
Ariong John Bosco - Security Guard
Okello Elias - Security Guard
Opus Joseph - Clinical Officer
Apolot Salume Lucy - Enrolled Midwife
Abalo Veronica - Laboratory Technician
Olupot Robert - ICT Officer
Eilu Isaac - Laboratory Technologist
Akol Annet Barbra - Enrolled Midwife
Akello Shillah Onaga - Enrolled Nurse
Ikara James - Cook
Khainzi S.R. Kimono - Tutor
Rwothongeo Herbert - Clinical Instructor
Akello Sarah - Peer Educator
Otule Solomon - Enrolled Nurse

Judith has served the hospital for 47 years

By Judith Grace Ikilai

After my Ordinary Level of Education I got appointed to work in Ngora Freda Carr Hospital in 1975 as a Typist. I was offered sponsorship to pursue Secretarial training for one year at CITC Secretarial College in Kisumu, Kenya. I commenced work in April 1976 as a Stenographer armed with skills that have benefited me in my career as well as the hospital.

In 1979 CORAT (AFRICA), a Christian Organization, sponsored my training in Hospital & Health Service Administration for Church Health Care Facilities in Uganda (Uganda Protestant Medical Bureau & Uganda Catholic Medical Bureau member units) and Kenya for three months at Limuru, Kenya. I repre-



sented the hospital in this training. In July 1984, the Hospital offered me sponsorship for Medical Secretarial training in the United Kingdom for six months. The special skills acquired have enhanced my career. My appreciation goes to Drs John & Hilary Maitland & Family, Elizabeth Swarbrick & Greta, Ansdell & Margaret Smith & Family, Tony & Judith Bull & Family, Christians at Main Street Chapel, Frodsham, for their tremendous support while in the U.K. I returned and carried on with work in the hospital.

I was again offered a sponsorship to pursue Diploma in Computer Science course at Kumi University for the period 1999 to 2001. Since then I have continued working in the hospital.

The Hospital Unit Heads in 2022



Dr. Odiit Amos
Medical Director



Dr. Oluge Martin
Medical Officer



Dr. Elwana Moses
Medical Officer



Dr. Olaboro Justine
I/C Clinical Services



Stella Eunice Akurut
Hospital Administrator



Florence Auma
Human Resource Officer



David Etiang
Hospital Accountant



Susan Babirye Ssawe
Principal Tutor



Irene Akello
Deputy Principal Tutor



Oboire Edison
Ag. Academic Registrar



Michael Morunyang
Bursar NTS



Grace Akalo
Senior Nursing Officer



Rev. John Emmanuel Aceda
Chaplain



Christine Akello
Ag. I/C OPD



Sr. Martha Apolot
I/C Children's Ward



Sr. Mercy Merab Asio
I/C OPD

The Hospital Unit Heads in 2022



*Sr. Hellen Tino
I/C General Ward*



*Sr. Annet Agwang
I/C Maternity Ward*



*Michael Ojangole
Theatre Nurse*



*Isaac Eilu
I/C Laboratory Services*



*Andrew Aisu
Pharmacy Technician*



*Joseph Ederu
Radiology*



*Caroline Agoe
EPI*



*Benjamin Ocuka
Clinician I/C ART Clinic*



*Joanita Nakiwala
Sonographer*



*Robert Olupot
IT Officer*



*Timothy Otimong
Estates Officer*



*Mary Aguti
TB Ward*



*Lydia Akello
Stores*



*James Ogwang
Driver*



*Martha Amongin
Records*



*David Patrick Opolot
Security Officer*



KUMI HOSPITAL

P.O Box 9 Kumi, Tel: +256 393194274, Email: kumihospital@gmail.com

Kumi Hospital (KH) was established in 1929 by the Church Missionary Society and is a Private Not-for-Profit (PNFP) institution. A member of the Uganda Protestant Medical Bureau, the Hospital is now owned and run by Church of Uganda Diocese of Kumi Diocese. It is situated in Adekis Village, Kachaboi Parish, Ongino Sub-County, Kumi District.

The Hospital has a 300-bed capacity, wards, four modern operating theatre rooms and several other service delivery points, with a great potential to become a centre of excellence in eastern region for services that include; orthopaedics and rehabilitative services (which is its core), maternal child health, HIV AIDS care, general surgeries, imaging services, eye care, etc.

VISION: To be a Centre of Excellence in the Provision of Quality and Compassionate, Patient-Centered Care
MISSION: To Provide Comprehensive Healthcare Services to All, Based on the Healing Ministry of Jesus Christ.

VALUES: We are driven by our believes, principles, etc. of: **Professionalism, Integrity, Christian focus, Transparency, Respect and Team Work.**

Being a faith-based facility, Kumi Hospital evangelizes, demonstrates love and faith in their work through a Christian focused approach to service delivery.

For the most vulnerable or poor patients, we link them to Compassion, which occasionally helps to offset the medical bills of those who totally fail to pay their bills

Our Core Services

The key services we offer are: Inpatients, Outpatients & Day Services; Physiotherapy & Occupational Therapy; Orthopedic Workshop and Services; Laboratory services; X-ray services & Ultrasound; Disability Rehabilitation; Community Health; Outreach programmes; VCT & PMTCT Sites & ARV Programme; Accommodation/Guest Wing for Visitors; Elective Program; Ambulance Services; Eye Services; Nutrition Services; Child Empowerment; Agro-Forestry and Commercial Farming.



Aerial View of Kumi Hospital



The Board of Governors chaired by Dr. J.B White (seated third left)



Orthopaedic Surgeons operating a client in our modern theatre room.



The Hospital farm. The hospital has also a forest of over 4,000 pine trees



Ambulance service at Kumi Hospital

Courtesy Photo by SR. JENNY & MARGARET CLARK



Sr. Jenny Clark (L) and Sr. Margaret Clark. They worked here in late 1960s to early 1970s

Ngora will always be dear to my heart

By Jenny Clark

Following my training to be a registered nurse and midwife in the United Kingdom (UK) I volunteered to the Church Missionary Society (CMS) to work overseas and stated my preference to be placed in Africa. I was very excited to be selected and sent to Ngora and on arrival I started to work as a sister on ANA the maternity unit.

It was a challenging role to begin with as I had only just qualified as a midwife, but I was working alongside Margaret Clark and as we shared the same surname, we were affectionately known by the staff as Sister Margaret and Sister Jennifer.

The qualified staff and students working in the unit were so welcoming and my memory of working on Maternity and living in the hospital compound is one I have treasured and will continue to treasure all my life. There is so much about my time in Uganda that I would like to share with you, but space is short. So I

have selected a few that stand out particularly.

Waking up every morning to the sun just rising and all the sounds of African life around me. The cock crowing. Nicanor burning our breakfast toast and scrapping it outside on the verandah and the gentle noise of people walking in large numbers along the road beside our house to the Tididiek Market.

Teaching the student midwives both in ANA and in the Ngora Hospital classroom. They were always so attentive, keen to learn and appreciative of our teaching, a gift to any teacher and not always experienced in the UK.

Going out from ANA in the hospital with a small team of midwives and students to conduct ante-natal and immunization clinics in villages distant from the hospital. These clinics were held in very rural settings with health education often given under the shade of a mango tree. The team set out at dawn and returned just before sunset. We sang all the way home!

Being called to ANA in the middle of the night to assist with a difficult delivery. One delivery will always be memorable to me and it involved twins which unexpectedly became triplet delivery when after the birth of the second baby the midwife assisting me said "Sister, there is another baby still to come." All the three babies were born safely to the surprise of us all, including the mother.

Friendships made with the midwives and students, some of which attended a Christian Club which was held weekly. I have memories of testimonies shared and friendships made that stayed firm over the succeeding years.

Thank you, Ngora Hospital. You will always be dear to my heart!

Learning Ateso on the job!

By Margaret Clark

I came with Jenny (Jennifer Clark) to run the ANA Midwifery Unit under the auspices of CMS. I was glad they chose Uganda for us! Those two and half years have made such a difference to my outlook on life and instilled in me a God-given love relationship with Africa and the Teso people.

We began our Uganda experience staying in Kampala for a few days with the Campbells, the CMS representatives, being introduced to food, climate and people before being driven upcountry to meet the Maitlands, Enin Elsdon (the Matron) and the Ugandan staff, then being thrown into ANA and the busyness and excitement of never knowing what emergence might come through the Labour Ward door!

So many memories come back to me 50 years on. I will precis them for you.

- Nurses' morning report – the first time I heard it, there were so many abbreviations I wondered if it was in English!
- Working with midwives Mrs Omoding and Mrs Annie Balwanyi – it was a privilege as I learnt so much from them.
- Learning Ateso – we learnt it on the job! After a couple of months doing post-natal ward round with a student translator, I tried it alone with some

Courtesy Photo by SR. JENNY & MARGARET CLARK



First triplets delivered in Ngora Freda Carr Hospital

success and some howlers. "Sister, you are confusing the patient," the student said. "But I have been saying it like this for weeks. Why didn't you tell me I said it wrong? I retorted. "Sister, we did not like to offend you," she replied.

- First breech delivery – Don't panic, just remember what the textbook taught!
- Urgent blood transfusion needed – Patrick (Kabare), can we get a couple of prisoners to donate for us quickly.
- Emergency LSCS – they hurry to transport the patient on a wonky trolley to the theatre on the Hospital side of the road!
- Important day – the official opening of General Ward 2 (Maternity) on 29th June 1968, when the Minister of Health came. Every where was so smart and we were all so proud.

- Twin ceremonies – these happened after most twin deliveries, with dancing, drumming, and swinging a live chicken over the mother and babies. I remember taking the chicken home once on my bicycle handlebars.
- Chapel attendance – I loved starting the day with staff and student midwives in the hospital chapel. The readings were always from “Daily Power”.

Return to ANA – In 1973, I returned to the Hospital for four months to relieve someone’s home leave. It just felt like coming home! I lived with Clement and Mary Davies, who looked after me well, but never forget the amazing welcome I received from Midwife Jockabed Kongai and her family when I knocked on her door along “the lines” that first evening. We

danced and sang!. What a home coming!

Look back – I know the time at Ngora Hospital was God’s plan from start to finish. I loved the students and their funny ways. I loved the time spent with them, on duty or climbing school rock with them (barefoot was the easiest way I discovered), seeing them grow as midwives and spiritually. Some have remained the friends to this day. It was a busy, hard-working time but so rewarding. In 1969 – 1970 I saw in the Hospital a report that we oversaw 3,071 deliveries.

Thank you Ngora for so much experience, which stood us in good stead for our midwifery roles back in Birmingham. Many blessings on your Centenary celebrations – we are with you in spirit!

Courtesy Photo by JENNY & MARGARET CLARK



Sr. Margaret Clark (seated) and Sr. Jennifer Clark working in the Maternity Ward

“Why didn’t you tell me I said it wrong?”
“Sister, we did not like to offend you.”

Courtesy Photo by JENNY & MARGARET CLARK



The Twins Ceremony of the Iteso in the 1960s - 1970s

Photo by JONATHAN MARAKA



The first labour suite still stands to date.

I was part of the team building Jersey Ward



By Anthony Houiellebecq

My association with Ngora started in February 1984. I was a young man who volunteered as a carpenter/joiner to be part of a building team sent from Jersey, Channel Islands to help construct the "Jersey Ward", a major building project supported by the Jersey Overseas Aid Fund. We spent about three weeks helping the local building contractors. We also helped dig soak-aways for drainage. Our time there went far too quickly.

Before this trip I had been praying and exploring how

I could use my skills and talents to serve and work overseas.

I remember in February, after chatting to several people, making notes on various things that were needed by the hospital and soon made a list so that I could speak to friends, churches and businesses to help raise funds for some tools and other items. I also wanted to raise funds to purchase a minibus ambulance and a pickup.

On my return to Jersey and after much prayer I decided to write back to the Rt Rev Bishop Geresom Illukor whom I had met while he came to work on the building project himself. I asked if he would be happy for me to come back for six months to help support the ongoing work. He must have thought and prayed about it and then wrote back saying that I should come for two years. So I did return in September 1984 through The Church Mission Society as a short term mission partner.

What a return! There was no one to meet me neither from CMS nor from the hospital. I had remembered the name of Mr Stephen Ariko. I recall he was a Member of the Hospital Board of Governors and the Attorney General whom I also met during his visit to Ngora in February. I managed to go and find him and he was very kind and arranged to provide me a lift to Ngora. It was my first time in a Mercedes!

I soon settled and worked on various jobs and was challenged in so many ways. The building work pro-

Photo by JONATHAN MARAKA



The Jersey Ward Constructed by Jersey Overseas Aid Fund. The writer, Houiellebecq was a Carpenter/Joiner as part of the building team.

Courtesy Photo by ANTHONY HOUILLEBECQ



President, Dr. Apollo .Milton Obote cuts tape to open Jersey Ward.

gressed well with a steady and loyal team. It became clear that I was not so much needed to support the work day by day on the site, but I was better being used to negotiate, purchase and secure more needed building materials. I also purchased and registered a pickup and Mini-bus converted into an ambulance.

I would drive to Nairobi to organise and purchase these materials to help keep the project going. I also transported for urgent repair the hospital water supply submersible pump and generator. I would also go to Eldoret to purchase vital drugs to help keep the pharmacy stocked. Sometimes I would be asked to drive to Nairobi and back in three days and on my return once unloaded, be asked to then head off to Kampala a day after for more vital purchases. I am sure you may have heard of or remember the state of the roads! Pot holes like swimming pools. The journey was NOT straight forward nor always safe. There was gunfire in Kampala at night.

During my time Dr. Francis Omaswa was the Medical Superintendent and progress was not only being made in the building work, but also in the quality of and the ability to carry out more complex operations. The Association of East African Surgeons helped and the new operating theatre was built. Jersey helped to finance the plumbing work, in fact they sent out

two plumbers to help plumb the Jersey Ward and theatre.

Once complete we used to get flying visits from eye surgeons from Sight by Wings. I remember the joy on the patients' faces as they asked to have a Bible when the bandage came off and the delight on their face as they could read again.

Quite often during night time power cuts I was asked to set up my bright paraffin lamp and keep it going for the time needed. I did this for a while and it soon became obvious to me that the idea was good, but it got far to hot and I became too tired!!

So I decided to string some old car headlights together as they could be used as spotlights and with a car battery I did not need to get up to help! Well, although less hot, I still did need to get up as I was able to drive the vehicle closer to the theatre to connect the lights as someone had forgotten to charge the theatre battery! Then there were times when the vehicle was out and so it was back to the lamp.

Work continued well as the lorry loads from Nairobi and mini bus loads of building materials arrived on time.

I remember well in 1985 we had an official visit from President Milton Obote who was coming to open the Jersey Ward and have a look around the hospital. Days before his visit workmen appeared and for the briefest of hours on the opening day we had electricity and telephone communication. It was soon taken down again after he left.

I continued to work and support the hospital until De-

Courtesy Photo by ANTHONY HOUILLEBECQ



Houillebecq (left) providing light from a lamp in the theatre.

cember 1986 helping to complete all the ward and new theatre.

In 1992 I returned to Uganda with my wife Liz and six month old baby son Daniel. We were based in Soroti working with Bishop Geresom Ilukor to help set up a Development department. During the first few weeks Daniel started to become very unwell and in August 1992 we were told to go to Freda Carr Hospital as he became extremely ill. He was admitted in the Jersey Ward and our friends Margaret and Christine from my earlier time there nursed him back to health. It is by God's grace that he survived. He ended up a few weeks later going to Great Ormond Street Hospital. God is good and he provided for all our needs.

We give thanks to God for all His goodness to us. We returned again to Soroti in 1998 with two sons and left 2003. Ngora will always have a special place in our hearts.

We all have seen so many changes at the Hospital, but the dedication and hard work of all the staff has remained the same. I am so grateful to the Rotary Club for all they have done and are still doing to support the infrastructure projects to help the continuing vital work.

There has always been problems in finding funding to support the salaries and welfare of the staff. One idea that I believe would help is that various income generating businesses, such as a vehicle maintenance garage, not only to service the Hospital vehicles, but also vehicles from the other institutions based at Ngora, etc; could be set up. Another business idea is a well stocked hospital shop that could support the hospital through the sharing of profits to help top up the running of Freda Carr.

I hope and pray to be able to visit Ngora and the Freda Carr Hospital again before too long. Thank

The west is not always right!

Courtesy Photo by SR ELIZABETH SWARBRICK



“Being in Uganda showed me how to really live”

receive, from the community in which I lived.

How do I choose from: my call to serve with CMS overseas, my assurance from the Lord that Ngora was the right place for me, my work as a midwife, the amazing things we did in the care of low birth-weight infants, a dramatically reduced death rate and no maternal deaths; my work as a midwifery tutor; the care received by me from the local people during the Amin times and the insurgency (civil war) which came when Yoweri Museveni took power; my involvement in an HIV/AIDS project, school sponsorship, cattle and goat projects; supporting Margaret Arionget's clinic; church and school building; school feeding programmes; establishing orange orchards, work with Mothers' Union; bore holes; the way in which “my” girls have gone on to really make a difference in their own communities.

By Elizabeth Swabrick (Isoberiki)

When I was asked to write down some of my experiences living and working in Uganda I had a big problem – where do I begin? It was very difficult to select just a few things to be able to tell of the blessings I received, and continue to

My students have done so well, one girl, Mrs Betty Odeke, becoming the Commissioner for Nursing and Midwifery in Uganda; another, Florence Adong Maate the Principal Tutor at Ngora, others carrying on their work as midwives and making a real differ-

ence to the mothers in their care.

Above all of that, I cherish what I have learned from the community in which I lived. You can go to Uganda with all your skills and enthusiasm, but I quickly learned that the culture is very sophisticated and I was blessed to have friends who became my “minders” to help me not to make so many daft, European mistakes! The west is not always right! Being in Uganda showed me how to really live.

My life in Uganda began at the end of 1969 when I came to Ngora as a midwife, working with the Church of Uganda through the Church Missionary Society (C.M.S.). As I reflect, I see the wisdom of CMS in that we must learn the language of the people with whom we lived. Learning the language makes you think in a different way. I thank God for my ‘minders’ who helped me so much during this time.

My language teachers lived in Soroti and they had a young girl, Amoding, helping them in the house. She was my coach. I would show her a card in Ateso word on it and she would tell me the English equivalent. I had a card with “ekapa” written on it and she said “push”. That is a good word for a midwife, thought I, and kept it in my mind.

On my return to Ngora, I never had the word used by the midwives when they were assisting a woman in labour. “Idiny, mucala,” “kiyatak,” “ititingi ber ijo”, but never “ekapa”. On investigation I discovered that the word meant “cat.” – my teachers had a cat which they called “Puss” and Amoding had a lisp, so “s” became “sh”, puss to push! Never had I been so grateful that I listened before I acted!

As a midwife, I was very interested in the care of the Low Birthweight Infant and had completed a course in their care just before leaving for Uganda. At Ngora there was an increase of these babies at the beginning of the rain season, when the mosquitoes begin to breed and malaria increases (a cause of premature labour).

I observed that when a tiny baby was born the mother would take the baby home as she was sure it would die and she wanted it to die at home. I was able to obtain the correct baby feeding tubes and we began a new regime of feeding and simple drug care (we did not have incubators), but mother would still take their babies home, until a lady named Amulen was admitted.

Amulen had a daughter of eight years and had subsequently lost five pregnancies around 20 weeks.

She was admitted in labour around 24 – 26 weeks and delivered a little boy. He weighed 1lb 10 oz (810 grammes). He shouted his head off. So we took him to the “Prem Nursery” and began the new feeding regime and he thrived. After this, a remarkable change occurred in the care of these babies.

Mothers began to stay and at one time we had 10 babies in the nursery, all under 3 lbs (1.36kg) in weight! We had very few complications and our death rate reduced dramatically.

I learnt that the change in attitudes had come about because of Amulen. When a mother delivered a tiny baby Amulen would go to her and say, “Don’t take your baby home, see what they have done for my son.” I found this to be a humbling thing.

With all the skills and knowledge I had brought from England it was a lady from the village in Uganda who changed the attitudes of the local women and allowed them to trust us. This was a very important lesson to me, about listening, co-operation and sharing which enabled real progress.

The midwives trained in Ngora were in demand wherever a hospital had a special care unit and as an outcome of all this I have a Ugandan foster daughter and family of whom I am very proud.

When Idi Amin took over the running of Uganda in 1971 there was great rejoicing, but this was soon replaced by fear. One morning, as I was leaving the house to go to Chapel, I saw a lot of people sitting on the verandah at the front of my house. Not understanding why they were there I asked Chris, the man who worked for me in the house, why they were there. “Sister, they have come to sit” was his reply, whereupon I said “Oh” and carried on to Chapel.

Later that morning our Hospital Chaplain, Revd Ejotu came to spend time with the senior staff as we had coffee. He had come to share his daily Bible reading with us and to encourage us. The previous night there had been a particularly vehement attack over the radio, by President Amin, on the role of missionaries in the country.

Revd Ejotu and the folks sitting outside my house were assuring us of their love and care for us in this difficult time. Thus I came to realise the power of the Teso tradition of sitting with people who were having a difficult time. It may be sickness, bereavement or threat, people came just to sit – not needing to speak.

Sometimes the sitting is a practical thing, helping with housework, preparing meals or drinks for visitors. Through this I came to realise the lack of this type of care for so many at the time of bereavement in this country: the need for people just to be and not need to do anything.

Eventually, when I returned home, my career took me in the direction of Palliative Care and I became Matron of our local hospice when it opened. I was able to use the knowledge which I learned in Uganda to change attitudes in support of the bereaved, even in the bereavement of the dying.

My Salary was Sh9

At 96 years, despite the stroke and cracked hip-bone which make him lie on bed all day, George Oleico's memory is still fair. He has fond memories of the hospital when he worked here as a 'dresser'. Jonathan Maraka talked to him last month at his home in Kabakuli, 3.2km on Ngora-Kumi Road and filed the memories.

I was born in 1926, four years after Ngora Mission Hospital (now Freda Carr Hospital) was established. I went to Ngora Boys Primary School where I studied up to Primary 6 in 1942, then Junior One (JI) in 1952. After JI, I applied to join Freda Carr [Hospital] as a dresser and I was appointed and trained on job by the hospital's missionary doctors.

My salary was Shs9. That money enabled me to buy goats, cattle, and many other things. I even built an iron-roofed house with it.



NANOGENERIAN: George Oleico



Congratulatory Message!

Joseph Richards & Associates CPA congratulates Ngora Freda Carr Hospital upon marking 100 years of providing basic and affordable quality health care services



About Joseph Richards & Associates

Joseph Richards Certified Public Accountants is an accounting and advisory firm located at Plot 136, 6th Street Industrial Area, Kampala with networks spread across the country.

We are a team of highly experienced accounting professionals qualified in the disciplines of accounting, finance, management and tax law and this enables the firm to offer our clients an appropriate balance between the interpretation and the practical application of the accounting principles, tax laws and business management.

Joseph Richards is a registered practicing firm regulated by the companies Act, 2012 and the auspices of the Institute of Certified Public Accountants of Uganda (ICPAU). It thus reaps the benefits associated with the membership of these bodies.

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Accounting and Audit Services

Our accounting and audit services extend far beyond the preparation of financial statements. We provide our clients with the accurate and unbiased information that they require to make many vital business decisions. We pay great attention to detail during the planning process - which results in the most cost-effective, timely and highest quality service possible.

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Joseph Richards & Associates is one of the leaders in conceiving effective fact-finding strategies, deploying expert investigative resources and applying traditional and forensic analysis in order to uncover fraud, identify perpetrators and bring closure through legal channels or restitution.

The appearance of corporate fraud, fraudulent activity, or allegations of fraud warrant immediate attention and the preservation of potential evidence for use in any future inquiry. Whether the allegations resulted from direct observation, an anonymous employee tip or information provided by a client, contractor or third party, company policy will often necessitate undertaking an internal fraud investigation to discover facts.

OUR EXPERIENCE

We have established our position in the market and we have offered accountancy, audit & assurance and Forensic audit services for a wide range of clients ranging from Not for Profit entities, Manufacturing entities, Medical Institutions, Hospitality Industry, Service firms, Educational Institutions, Telecommunications Companies, General Distributors and Trading Entities among others.

JOSEPH RICHARDS & ASSOCIATES
Certified Public Accountants

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I had been trained to dress patients' wounds, extract patients' teeth and inject patients. There were very many missionary doctors and other medical workers in that hospital. I remember Sr. Pickrin from England. She was a very famous nursing sister. Then there was Sr. Brewster, a very famous midwife from England.

Dr. Bennet, a missionary doctor from England, was the Medical Superintendent in 1952 when I joined to work in the hospital. Then Dr. Wright came in later as a surgeon and dentist. He was brought from Kenya. I did not find Dr. Hunter at the time I joined the hospital. I found Dr. Wiggins, Dr. Steadman, Dr. John Maitland and Dr. Guinness who came later. In 1974 Dr. Maitland was still working in the hospital as the Medical Superintendent.

I remember the key Iteso health workers in the hospital before and during the time I worked in the facility. Among them is Kusai Ojilong from Kumi who was a dresser. He was a very famous dresser in the hospital and in Teso. The other is Samwiri Omoding from Pallisa and his wife, Faith Omoding. He was a medical assistant who also doubled as the distributor of medical textbooks and documents for training

the medical personnel in the hospital. Medical assistants were then the next in hierarchy to the missionary doctors. There was also Ismail Epiru from Kapir as a dresser, Nathan Obuta from Kobuin as a dresser, Levi Okiira from Moru-Irion, Kalengo, Ngora Sub County; Levi Ibokit from Komodo Village, Kobuku Parish in Ngora Sub County; and Onespol from Mukongoro.

The doctors and medical teams would go on out-reaches in smaller health units in a tough vehicle called 'Dodge'. Patients paid between Shs2 and Sh3 which rose to Shs16 in 1962 for medical care in the hospital. We had Maternity Ward, Female Ward called Dillistone Ward, the Male Ward called Hunter Ward, Children's Ward called Syson Ward,

There were very many patients coming to this Hospital for medical care in this hospital. By the time I left the hospital, I had also worked as a 'dentist' extracting patients' teeth and injecting them.

In 1966, I married a second wife which was against the Church doctrine and canons. So I was relieved of my duties as an employee of the Church-founded hospital.



NGORA HIGH SCHOOL

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Email: ngorahighschool@yahoo.com

The BOG, PTA and Staff of Ngora High School congratulate Ngora Freda Carr Hospital upon 100 years of serving humanity. Bravo! It is our prayer that the hospital continues to blow more candle lights as we nurture the health of the communities far and near.

Like Ngora Freda Carr Hospital, Ngora High School, too, is a church founded institution owned by the Church of Uganda Diocese of Kumi under the current leadership of Rt. Rev. Bishop Michael Okwii Esakhan as the Bishop, and Mr. Eliphaz Opolot Ewalu as the sitting Headteacher.



In 1914, when the whole world was wasting away in World War II fighting for supremacy, the Church Missionary Society sowed the dear seed - Ngora High School - to give life and hope to Ugandan children. This was eight years before Ngora Freda Carr came into being. That gift of hope and life given by the missionaries came to flourish, though the school suffered unfortunate disturbance. Teso was got plunged into a trail of drunken armed insurgency in the 1980s to 1990s. This came to kill and hope was trashed.

But as change would have its twist, Ngora High School is no

longer in that appalling state. Our school has a fresh look, its candle burning as the best academic giant in Teso and beyond. Stakeholders now stand proud, identifying with the school as they pledge total commitment to improving the quality of life through the word and education. Aware that spirituality is the life blood of human existence and education the perfect match with the contemporary world.

Ngora High School is now the pride of Teso and the place for your child to study in!

IPONESIO KA AKUKURANUT

Medical Superintendents 1972 - 2022

Dr. Hunter E. Viller	1922 - 1933	Mr. Okiria Mathias (Acted)	Acted from 1994
Dr. Bennet	1933 - 1952	Dr. Otim Nape Patrick	(1998 – 2002)
Dr. Basil Wright	1952 - 1959	Dr. Enyou Raymond	2002 - 2005
Dr. Paul Sparke	1960 - 1964	Dr. Ibilata Gorrett	Acted in 2005
Dr. Maitland John M.	1964 - 1976	Dr. Ogwang Alfred	Acted 2005-2010
Dr. Frank Guinness	1976 - 1983	Dr. Oluka Simon	2010
Dr. Omaswa Francis	1983 - 1986	Dr. Okia David	2010 - 2012
Dr. Upoki Alex	1987 - 1989	Dr. Ibilata Gorrett	Acted 2012-2017
Dr. Tegu Chrispus	1989 - 1993	Dr. Odiit Amos	1921 to date
Dr. Aruo Valentine	Acted 1989 - 1990		

Doctors who worked in the Hospital 1972 - 2022



Dr. Ecookit Stephen (RIP)
Senior Consultant Surgeon

Dr John M. Maitland, Med. Sup. (1962-1976)	Dr. James McGavin (U.K.), Medical Officer
Dr Ecookit John Stephen, Senior Consultant Surgeon (1979-1996)	Dr. Nick (U.K.), Medical Officer
Dr/Mrs Maitland Hillary (1962-1976)	Dr. Pomeroy Joseph, Medical Officer
Dr. Guinness Frank, Medical Officer	Dr. Ejumu Moses (RIP), General Surgeon
Dr/Mrs Guinness Liz, Medical Officer	Dr. Tegu Chrispus, Senior Consultant Paediatrician (1989 – 1994)
Dr Omaswa Francis, Med. Sup., (1982 – 1987)	Dr. Uhuru Kilion, Medical Officer
Dr. Angoyar Francis (RIP), Med. Officer (1982 – 87)	Dr. Opio Chris, Medical Officer
Dr. Omoding Sam (Govt), Med. Officer (1982 – 87)	Dr. Oluka J., Medical Officer (1998-)
Dr Kiiza M (Govt), Intern (1982 – 1987)	Dr. Eilu Charles, Medical Officer
Dr Onyango S (Govt), Intern (1982 -1987)	Dr. Otim Nape Patrick, Medical Officer (1998 – 2002)
Dr. Kigongo M. (Govt), Intern (1982 – 1987)	Dr. Odwongo (Govt), Medical Officer
Dr. Upoki Alex, (Govt) Senior Consultant Surgeon (1982–1987)	Dr. Opio James (Govt), Medical Officer
Dr. Nam Richard (Govt), Consultant Obst/Gyn.	Dr. Omagino John, Medical Officer
Dr. Lokut (Govt), Intern (1982 – 1987)	Dr. Enyou Raymond (RIP) (Govt) (2000 – 2005)
Dr. Aruo Valentine.(Govt), Med Officer (1986 – 2000)	Dr. Akabwai, Medical Officer
Dr. Opiyo-Kabete Philip (Govt), Med Officer (1987 -)	Dr. Ibilata Gorrett, Medical Director/Gen. Surgeon (2004 – 2017)
Dr. Ojilong, Medical Officer	Dr. Ogwang Alfred Francis, Consultant Obst./Gynaecologist (2005 – 2009)
Dr. Odiit Amos, Intern 1988, current Medical Director/Senior Consultant Paediatrician (2017 to date)	Dr. Muron Julius, Medical Officer
Dr Kalungi S, Intern	Dr. Alinga Sarah, Medical Officer (2007 – 2009)
Dr Weel C.C (RIP) from Holland, Medical Officer	Dr Birungi Carol (2007 – 2009)
Dr. Stockley Richard from U.K., Medical Officer	

Dr. Amuron Naomi, Medical Officer (2009 - 2010)
 Dr. Opegu Titus, Medical Officer
 Dr. Oluka Simon, Medical Officer (2008 – 2010)
 Dr. Okia David, Medical Officer (2010 – 2012)
 Dr. Opero Alfred, Medical Officer (2011 – 2013)
 Rev. Dr. Janet B. White Asianut (2015 – 2017)
 Dr. Onyait Julius (2015 -2017)
 Dr. Oule Martine (2015 – 2017)
 Dr. Ocanit Anthony (2017 – 2019)

Dr. Ekunait John Gynaecologist (2018 to date)
 Dr. Onyango Martin, Medical Officer (2019 to date)
 Dr. Oluge Martin, Medical Officer, (2019 to date)
 Dr. Ogwal Daniel, Visiting Surgeon (2020 to date)
 Dr. Obua Richard Denis, Obst./Gynaecologist (2020 to date)
 Dr. Olaboro Jackson, Medical Officer (2020 to date)
 Dr. Elwana Moses, Medical Officer (2022 to date)

Hospital Staff 1972 - 2021

ACCOUNTS

Anguria (Kobuin) – Cashier
 Elaru George W - Accounts Assistant
 Idumira John K – Accountant
 Napakol Simon Peter – Accountant
 Odiiri Justine - Revenue Clerk
 Oematum Jacob Pascal - Accountant
 Ojangole Christopher - Costing Clerk
 Okuro Glasio – Accountant
 Okwalinga Gilbert - Accounts Assistant
 Oluka Daniel - Accounts Clerk
 Omoda James - Accounts Clerk
 Onyait James - Cashier
 Otuba Levi (RIP) – Cashier

ADMINISTRATION

Alenyo John (RIP) - Hospital Administrator
 Apusan David - Office Messenger
 Atai Grace - Secretary
 Atai Jessica - Human Resource Officer
 Emorut - Office Messenger
 Ikilai Judith Grace – Stenographer, Adm. Assistant
 Iputo - Office Messenger
 Odele Emmanuel - Hospital Secretary
 Odii Martin (Kabakuli, Ngora) – Clerk
 Okiria Mathias (RIP) - Special Hosp. Administrator
 Okuto (Kapir) – Foreman
 Okwi Samuel Patrick - Hospital Administrator
 Omoding Simon Peter (Rev.) - Hosp. Admin.
 Orima Vigilius – Typist
 Oumo Silver - Assistant Foreman

AUTOCLAVE

Apusan Francis
 Edait James

CARPENTERS

Alibosit John
 Bafwa
 Ibeng Christopher
 Okupana Martin
 Okwalinga Martin
 Okuto (Kapir)

CHAPLAINS

Rev. Capt Erinayo Ajena
 Rev. Capt. Moses Okello
 Rev. Levi Aisu
 Rev. Okurut John
 Rev. Okurut Tomasi
 Rev. Olinga Stephen
 Rev. Osekeny Kokas

Rev. Philip Maraka

Rev. Thomas E Irigei – Chaplain

Ms Alelo Esther - Chaplain

CLINICAL OFFICERS/MEDICAL ASSISTANTS

Aanyu Samuel
 Ajengu George - Senior Medical Assistant
 Akello Loyce - Clinical Officer
 Ebukali Samuel - Clinical Officer
 Esabu Stephen - Ophthalmic Clinical Officer
 Isanga John - Medical Assistant
 Kedi Isaac - Clinical Officer
 Mubala Sam - Medical Assistant
 Okoda Samuel - Orthopaedic Officer
 Omoding Samwiri (Pallisa) – Medical Assistant
 Waniale Paul - Medical Assistant

DENTAL UNIT

Elungat Simon Peter - Dental Officer

DRESSERS

Aisu (Odwarat, Ngora)
 Akol Abuneri (Orisai, Kapir)
 Apedel Levi (Komodo, Ngora)
 Arorwa Levi (Kobuin, Ngora)
 Aurien (Kapir)
 Balwany Robert (Dakabela, Soroti)
 Ebapu Zadoki (Orisai, Kapir)
 Echengu Sabastian (Kaberamaido)
 Emorut John (RIP, Kobuin, Ngora)
 Engimu Solomon (RIP, Atapar, Kapir)
 Ikara (Nyamongo, Ngora)
 Imaling Augustine (Kokong, Kapir)
 Isodo Leonard (Kokong, Kapir)
 Musana (Kokong, Kapir)
 Obuta Nathan (Kobuin, Ngora)
 Okiror Tomasi – (Kapir) - one ward named after him
 Okiso Genason
 Okolimong Michael (Kobuin)
 Okwalinga Justine (Kobuin, Ngora)
 Oleico George (Kabakuli, Moru Irion, Ngora)
 Omoding Hanningtonm (Ogooma)
 Onyoin Levi (Ogooma, Kumi)
 Opedes James (Pallisa)
 Opolot John (Kyere, Serere)
 Otim Jephune (Kyere, Serere)
 Yepusa (Moruita)

DRIVERS

Amujet Joseph (RIP)
 Ojakol Charles (Komodo, Ngora)
 Oribo (RIP, Kapir)

Okuto (Kapir)

ESTATES

Ekudo Gilbert Patrick - Maintenance Officer

LABORATORY

Akol Stephen - Laboratory Assistant

Kabaare Patrick (Mbarara) – Lab. Assistant

Okutui Deogracious - Laboratory Technician

Omodo Erasmus - Laboratory Assistant

Opolot Alfred - Laboratory Assistant

Opolot Stephen - Laboratory Assistant

Wandera Allan - Laboratory Scientist

NURSING AND MIDWIFERY TRAINING SCHOOL

Agoro Beatrice – Warden

Akwana John - Principal

Akweny Florence – Warden

Aliano Salume - Administrative Assistant

Amado Joyce Gladys – Principal

Anguria Isaac – Tutor

Dorothy Ecookit - Midwifery Tutor

Gidudu - Matron

Ijoot Grace – Principal

Nabagalla – Matron

Namaganda Hellen Martha (RIP) - Principal

Obiro Christopher - Principal

Odatum Christopher - Tutor

Ojamuge Beatrice – Principal

Okalebo Peter (RIP) – Principal

Olinga Albert M - Tutor

Olinga Charles - Tutor

Opado Edward (RIP) – Bursar

Owiny Charles Ayen - Tutor

Ruva John Bosco - Tutor

Twongo Emmanuel (RIP) – Principal

NURSES/MIDWIVES

Achen Jane Francis - Registered Nurse

Agelun Josephine - Nursing Officer Midwifery

Aguti Mary - Enrolled Midwife

Agwang Barbara Rose - Registered Nurse

Aile Jeniffer Ekudo - Enrolled Nurse

Ajengu Leah - Enrolled Nurse

Akello Demeteria - Registered Nurse

Akiteng Aida - Registered Nurse

Akol Margaret - Enrolled Nurse

Akutui Christine - Enrolled Midwife

Amongin Harriet - Registered Nurse

Angerep Agoro Beatrice - Enrolled Midwife

Apio Mary Francis - Registered Nurse

Apolot Philomine (RIP) - Enrolled Nurse

Arionget Margaret - Enrolled Midwife

Arono Oliver - Enrolled Midwife

Emorut John (RIP, Kobuin) – Senior Nursing Officer

Epyeru Janet (RIP) - Registered Nurse

Ipama Joyce (RIP) - Enrolled Midwife

Isodo Leonard - Senior Nursing Officer Gr.1

Kwapi Seraphine - Enrolled Nurse

Maraka Solome - Enrolled Nurse

Olinga Christine - Registered Nurse

Okalebo James Peter (Kokong, Kapir) – Nursing Officer

Okurut Vincent - Enrolled Nurse

Omukuny Peter - Enrolled Nurse

Opola Elizabeth (Aciisa, Ngora)

Osekeny Levi - Enrolled Nurse

Osupet Cuthbert - Enrolled Nurse

Tino Hellen - Registered Nurse/Midwife

Vera Lewis - Registered Nurse

NURSING ASSISTANTS/WARD MAIDS

Aale Mary - Nursing Assistant

Abeja Christine - Nursing Assistant

Acam Gabudesia - Nursing Assistant

Adepit Naume (RIP) - Nursing Assistant

Aduto Margaret (Omodoi, Ocokican, Soroti)

Akello Ruth (RIP) - Nursing Assistant

Akiteng 'Acaaloit' (Mukongoro)

Amicorit Naume (Nyamongo) - Nursing Assistant

Anguria Damali (Kobuin)

Anyumel Deborah - Nursing Assistant

Apio Ann - Nursing Assistant

Ariokot Okurut (Olwa, Kokong, Kapir) – Nursing Assistant

Asio Anna Grace - Nursing Assistant

Auruga (Mukongoro)

Eilor Margaret - Nursing Assistant

Kamudan Sam - Nursing Assistant

Omoda Jeniffer (RIP) - Nursing Assistant

Tabisa (Nyamongo, Ngora) – Nursing Aid

PHARMACY/DISPENSARY

Balwanyi Robert (RIP) – Pharmacy

Ojamuge Gideon (RIP, Kapir) – Dispenser

Omoding Juventine - Pharmacy

RECORDS

Aisu Michael - Records Assistant

Amollo Samuel - Records Assistant

Opio Joseph - Records Assistant

SANITATION

Abokun Max – Cleaner

Omera Robert – Cleaner

Opolot Max - Laundry

Oukoi J - Laundry

Yokana – Sanitation

SEAMSTRESSES

Elogu Elizabeth (Mrs)

Kabaare (Mrs)

SECURITY

Elungat Samuel - Security Guard

Okello – Askari

Olupot - Askari

SONOGRAPHY

Agiru Juventine - Sonographer

STORES

Ateu Josephine - Stores Assistant

Ingorot Joseph (Omatenga, Kumi) – Storekeeper

Oluka Joseph – Storekeeper

Omiat Rose Mary - Assistant Storekeeper

THEATRE/ANAESTHESIA

Eilor Charles – Theatre Attendant/Anaesthetic Assistant

WELFARE

Okurut Silver - Cook

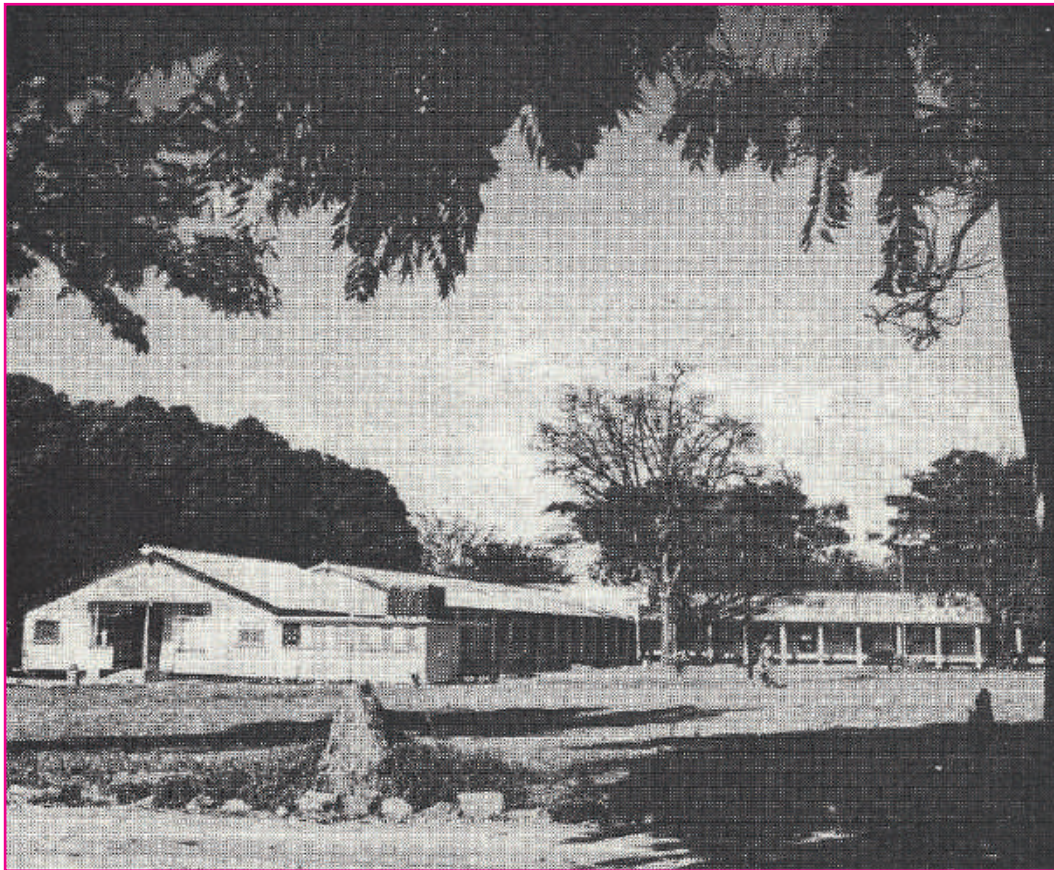
Okwatum J – Cook

NGORA (Church of Uganda) HOSPITAL formerly The Freda Carr Hospital 1922 - 1972

A SHORT HISTORY

1922 Medical Superintendent
Dr. E.V. HUNTER, L.M.S. Ceylon

1972 Medical Superintendent
Dr. J.M. MAITLAND, M.B. B.Ch., D.T.M. & H.



Aurien and Okiror Wards Ngora (C. of U.) Hospital 1972

Acknowledgements

Dr. Louise Pirouet, Makerere University
Makerere University Library Albert Cook Sub Library
Church Missionary Society - London
Minutes of Medical Committee: Executive Committee
Dr. Anderson: History of Medical Missions
Gordon Hewitt: History of C.M.S.
Mercy and Truth

THE HOSPITAL AND ITS SURROUNDINGS

A description of Ngora made by the Medical Secretary of the Church Missionary Society some 30 years ago is still recognizable:

“Round the great rounded granite outcrops at Ngora lie, ranged in a great horseshoe, a spread of trees and lawns and buildings where 30 years ago there was just bush”.

The Hospital in fact is in Ngora County, part of Teso District, an area of small homesteads and few industries. The population at 1969 census of Teso was 588,797, and Ngora County 49,359. Kampala the capital of Uganda, is 200 miles distant. The main town, Soroti, is 30 miles away, 10 miles of which are on murram (a red, sandy gravel) until the main Soroti-Mbale-Kampala Road is reached. Communications are reasonable as the secondary roads are kept in moderately good condition, well serviced by buses, although the means of transport is bicycles.

The population is made up mainly of peasant farmers whose main crops are millet, groundnuts, beans, sorghum, cassava, sweet potatoes and cotton, and the average income is Shs. 1/40 per day. There is grazing for cattle - in fact, when viewed from the top of one of the outcrops of rock in the neighbourhood, the surrounding plain appears to consist of parkland. The reality is a little different, however, as the coarse grass is five and six feet high in the rainy season or brown in the dry, and this is interspersed with scrub and trees.

There is a small township at Ngora with a Post Office and Milk Distribution Centre as well as a number of shops or ‘dukas’. Ngora was at one time of importance and the main projected Cape to Cairo Road passed the Hospital compound. It was the Diocesan Headquarters until Soroti became the administrative centre and the Church is still often called “the Cathedral”. It is also an educational centre of some importance having two Teacher Training Colleges, a High School and six Primary Schools.

HISTORY OF NGORA HOSPITAL

I. Ngora Hospital Established

The history of Ngora Hospital is one of service by a handful of individuals and of appreciation and affection by hundreds, then thousands, who have been helped by the few.

It all began long before the Hospital was established

and the need in the area officially, if grudgingly, recognised by the authorities in England. The wife of a missionary clergyman at Ngora, Mrs. Dillistone, herself a Nurse, began in 1908 in a small way to help the sick and Bishop (then Archdeacon) Kitching was so impressed by the need that in 1909 a site was chosen for a Hospital by Bishop Tucker.

No financial assistance nor services of a Doctor or other medical help was forthcoming and, though expansion of the Medical Mission – now well established at Mengo – was sought and a site surveyed again in 1914 and 1921 (including one near Mt. Elgon where the climate is more favourable to Europeans) official reaction was against expansion. In fairness it must be remembered that due to the post war economic depression funds for missions were chronically short – also the policy of the colonial governments was to give grants-in-aid to mission schools.

Dr. E.V. Hunter, attached to Mengo and feeling he was no longer needed there, became interested in the problem at Ngora and pressed for the establishment of a Hospital. Mrs. Dillistone had all this time been working single-handed. Dr. Hunter was able to interest a prominent resident in Nairobi, Mr. Ernest Carr, in the project. Mr. Carr, whose young daughter, Freda, had died in East Africa, promised to cover the cost of building up to British Pounds 2,000, later increased to British Pounds 3,000, as well as the salary of a married doctor for three years, and though London at first asked that this gift be made available for a project in Kenya, Mr. Carr refused, so in 1922 a small pioneer Medical Mission at Ngora in Eastern Province of the Uganda Protectorate was approved and Dr. Viller Hunter was appointed to serve for three years. There were conditions attached, however. No permanent buildings were to be erected and the question of the continuance of the Medical Mission was to be reconsidered without prejudice after three years, when Dr. Hunter’s furlough would fall due. Dr. Hunter commenced work directly he arrived about the beginning of October, and he and Mrs. Hunter first lived in an ordinary African hut. Two small brick buildings, already in existence, were the original birthplace of the work; the wards were usually full, patients overflowed on the floor. Indeed, patients preferred the floor to a bedstead. “Dry fresh grass laid down proved quite comfortable and a great advantage was that it could easily be burned after use.” The conditions laid down in London were scrupulously observed.

Mrs. Dillistone had trained a few local men as dressers, the first of whom was Mikairi Aurien and his princely wage was sixpence per month. Dr. Hunter

brought with him some senior staff who had trained at Mengo Hospital amongst them Tomasi Okiror who worked in the Dispensary. The wards were named after these staff and retain their names to the present day.

Soon after arrival Dr. Hunter had had an accident with his motorcycle, fracturing his ankle, so that patients had to be treated from a deck chair and the Doctor had to crawl on hands and knees to hammer in the pegs to mark the sites of the wards. However, before the end of 1923 a new outpatients block had been completed, one inpatient ward nearly completed and a second in course of erection and leprosy work started. As far as possible all local labour and material was used, and some idea of the work involved may be gathered from Dr. Hunter's own report:

"The Hospital site of 50 acres of ground with a good road frontage. The soil is good for cultivation and by digging through the ironstone, excellent wells have been obtained at a depth of 25'. The hospital blocks measure 80' x 24'. The male and female wards contain 18 beds each.

"The natives tell us there is sand in the swamp. First there is a top layer of thick heavy mud, beneath this there is some sandy, muddy stuff, black and useless looking. Some is placed in a pan and mixed with water, the muddy water is poured away; again and again fresh water is poured into the pan and the sand stirred vigorously and then little white sand is seen remaining. Stones were quarried for the foundations from the huge rocks nearby. Bricks were made and dried in the sun. Sand was collected, and as there are no trees of any size in the neighbourhood of Ngora, trees were felled and timber sawn some thirty miles away. It had to be floated on rafts down the water ways of the swamps to a landing place twelve miles from the site of the building. Thatching grass had also to be obtained and everyday strings of women and small children arrived carrying bundles. Cement and iron sheets were obtained from Mombasa. First a building 90' x 24' was erected for outpatients, then an administration block, about the same size for offices, laboratory, operating room, etc. Then followed 2 buildings of the same dimensions for wards for men and women. Each block contains one main ward, 2 smaller wards and 2 storerooms."

There was no water laid on, all morning the patient oxen and their drivers plodded to and from the water hole half a mile away down by the swamp bringing water in 40 gallons drums for the hospital and staff houses. Dr. Hunter was rather chary about having tanks put up because of the difficulty in keeping mos-

quitoes under control. Blackwater fever was fairly common, also cerebral malaria, great care was taken in keeping doors shut after sunset, all expatriates wore mosquito boots in the evening and slept under mosquito nets. (sun helmets or hats were always worn by the day). The first tank to be installed was for the dispensary; it was soon found that all tanks must be put inside the buildings as during the dry season people would come at night and break off a padlock or wrench out a tap, wasting a whole tankful of water for the sake of a drink or a pot full of water.

During the months October-December 1922, there were 6,000 attendances at the dispensary, and one of the first cases treated was a woman who had been attacked by a crocodile; one hand was bitten off and there were terrible injuries of back and thigh. There was only an hour of daylight left, but on a rough table and made of planks and packing cases under a tree, the patient was anaesthetised and the leg amputated.

In 1923 the number of attendances had risen to 20,000 outpatients and 300 inpatients and by 1924 the numbers were 33,362 outpatients and 820 inpatients.

The Indian community donated funds to build a block for their use and houses for their original purpose, may still be seen on the compound.

By 1924 the Hospital was self-supporting financially and the work had grown to such an extent that Dr. Hunter requested the services of another Doctor. London agreed to provide one "although his salary and expenses are to be a charge on the Hospital".

Mr. and Mrs. Carr visited the Hospital two years later. They were so interested and pleased with all that was being done that Mr. Carr was very willing to continue to help the Hospital and was prepared to finance another doctor during Dr. Hunter's leave. At first the official name was Medical Mission at Ngora but this became "The Freda Carr Hospital" in memory of Mr. Carr's little daughter. In that same year approval was given to the opening of leprosy work in Ngora District under Major Wiggins and for some time the Nursing Sisters there were housed by the Hospital.

Disaster overtook the Hospital in 1927, when a violent storm ripped off the roofs of the wards and they were carried away by the wind. Timbers were smashed to pieces and walls damaged, though fortunately the patients were not injured – only soaked through. However, so quickly the Hospital became part of the community that local chiefs and Asians

came to the rescue and gave practical help in restoring the buildings.

1931 was a bad year for Teso. Early that year the country was visited by huge locusts; one swarm took two hours to pass over the hospital. Every able-bodied person went out shouting and banging tins and debbis and cracking whips made of sisal rope to try and prevent the locusts from settling; they did settle at sunset and when they left at dawn not a blade of grass or millet or anything green was left, sometimes the branches of small trees were broken with the weight of them. Some people committed suicide when they saw their food for the year disappear overnight. People bashed the locusts down with branches, swept them up and roasted and ate them – small compensation for all the damage they did.

II. Outreach and new Developments

It seemed nothing could daunt the Doctor and his assistants. In 1928 they fitted out a lorry as a dispensary and visits were made to surrounding villages where in one year 2,265 outpatients were examined and treated for a wide variety of complaints – crocodile wounds, spear wounds, children suffering from yaws and sores, injuries from machinery in cotton ginneries and sufferers, particularly women, from syphilis, at that time an “unmentionable” disease.

Branch dispensaries had also been opened which were visited at regular intervals by the Doctor and by 1933 there were three branch dispensaries at Kumi, Kalaki and Kanyum.

The Hospital in 1930 had 80 beds and was visited by the Acting Governor who expressed his surprise at its large size and was especially interested in the Theatre and X-Ray department which had been added. The next year Ngora was visited by a severe plague epidemic and Dr. Hunter built a large block containing 26 beds for septic and infectious cases. In the same year a new Indian block was financed by a grateful ex-patient, and a light-free building for X-ray plant was added.

When Bishop Kitching opened a new maternity centre at Kumi, one of the places where a dispensary had been opened, the other dispensaries were closed. However, of Ngora the newly appointed Dr. Broadbent wrote “the maternity work is disappointing as it seems impossible to persuade Ateso women to go into Hospital” somewhat different from the position today when the wards in the Maternity are always full to overflowing.

By 1933 when Dr. Hunter left and Dr. Bennet was appointed Medical Superintendent the Hospital had 100 beds and in that year 1,388 inpatients and 65,885 outpatients.

Developments continued at a great pace, even though there were crisis years when closure was considered through lack of staff or of funds. In 1939 a mortuary and houses for junior nursing staff were approved and Mrs. Bennett started a laboratory in 1940. Unlike Mengo, Ngora was not conscripted for war work, but continued to serve the local population.



Dr. E.V. Hunter (seated/hat) with Medical Assistant on safari

“In 1928 they fitted out a lorry as a dispensary”

III. Post-World War II Developments

It was only after the war that electricity was brought to the compound and used to provide power to bring water to the hospital from a bore hole. All these years the staff, who were miles from a town, had had to exist without the means to preserve food, but one lunch time in the fifties when Matron went home to the house she shared with other Sisters, to her amazement no lunch was on the table; instead, in the centre of the room, in a place of honour, stood a gleaming white refrigerator a gift and a surprise which had been beautifully kept. Overnight the problems of food and milk were solved.

Since its inception the Medical Superintendent, as well as his medical work and development of the compound, had been responsible for all decisions relating to the growth of the Hospital but in 1951/52 when Dr. Bennett retired, and Dr. Basil Wright was appointed Medical Superintendent it was suggested that a Committee of Management should become responsible for policy decisions, leaving day-to-day matters to the Doctor. In 1952, the Committee was elected and was composed of:

- The Bishop of the Diocese – Chairman
- The Mission Secretary
- The Diocesan Council Representative
- A Teso African Local Government Representative
- A Medical Department Representative
- The Doctor-in-Charge – Secretary.

These had power to co-opt three more members.

1952 was Jubilee year and was celebrated at Ngora Hospital with a big pageant depicting scenes of the beginning of the work there and the chief events up to that date.

In 1953 a Minute of the Upper Nile Standing Committee notes a proposal “for the erection and financing by the Teso African Local Government, of a Maternity Unit to be sited on a plot of land adjacent to the Hospital but to be staffed by us (Hospital) in accordance with certain stipulated terms”. Between 1954-1958 a 20-bed Maternity Unit, a modern Nurses’ Home for 30 staff and in 1958 a new outpatient block with dental clinic were opened by the Governor. In contrast to the modern Maternity block, and adjacent to it, is the village of huts and sleeping quarters which has grown up where “the ladies-in-waiting” and their relatives live – a lively, colourful place which has happily solved what might have proved a very serious problem.

It was at this time, i.e. 1958, that for the first and only time in Uganda a Domiciliary Maternity Unit was opened - based on Kumi. For seven years a Sister seconded from the Hospital, with two assistants, worked in the homes of the people, and in the first six months alone, there were 6,589 ante-natal attendances and 86 deliveries. The work increased but owing to the shortage of staff the Domiciliary Unit was closed in 1965, only the ante-natal clinic continuing.

A Dental Centre was also added which functioned well for some years, but this in its turn had to close through lack of qualified staff.

The growth of the Maternity work and the consequent ever-increasing demand for more and more trained staff led to the consideration of establishing a Midwifery Training School. With the co-operation of the Government and Teso District this was made possible and in 1961, the Nurses Home and Training School were visited by officials of the Uganda Nurses, Midwives and Medical Assistants Council who gave official permission for the Training School and thus Government recognition.

The sixties were a time of expansion. A new women’s ward, a new children’s ward and Chapel were built and opened and were visited by then Prime Minister. An extension was built to the Maternity Department which now has 47 beds 6 labour ward beds, 2 first stage room beds and 2 admission couches.

It was in 1965 that the well-known name “Freda Carr” was changed to Ngora (Church of Uganda) Hospital when the Hospital was handed over to the Church of Uganda. The Committee of Management was dissolved and the affairs of the Hospital were put in the hands of an autonomous Board.

IV. The Present

In 1969/70 the affairs of the Hospital again reached one of the periodic crisis which have affected it throughout its history and a Commission of Inquiry was set up to consider the future of the Hospital. The Commission spent three days assessing local, professional and official opinions, all of which demonstrated how much the Hospital was felt to be a part of local life. The Commission recommended that the Government be informed of the rapidly deteriorating financial position of the Hospital and suggested various means by which Government or the County Administration might help.

In spite of these problems, an extension was built to one of the main wards, the walls painted in turquoise blue and cream, with a small amenity room attached, to replace one of the very old buildings. This was opened in 1970 by the Senior Medical Officer, Eastern Region at the pleasure of the staff, the patients and the people of Teso respectively.

The history would be incomplete if the work of evangelism were ignored. In 1918 the object of Medical Missions was clearly stated. "The object of every C.M.S. Missionary is to win Souls for Christ There is, however, no question that today the missionary of Christ is called to care for the whole man. He ought to care for the sick, he ought to teach, he must train the body and mind as well as care for the soul" and this has been restated recently by the World Council of Churches.

In all the reports from the very beginning, one can trace the efforts made at Ngora to fulfil this aim. The twin tasks of teaching and healing run like a silver thread through the narrative. As early as 1924, 10,000 Bibles or separate books were sold as well as other Christian literature raising some British Pounds 1,200.

The Bible was translated into Ateso and published in 1961, and Dr. Paul Sparke, Medical Superintendent, 1960-1964, made great efforts to spread the Word amongst the people of Teso and was responsible for selling many thousands of copies.

In the early years nurses were taken, illiterate, from the bush and trained, but following the glad announcements of conversions comes the news of back sliding. Periods of hope have alternated with periods of depression. Since it was opened the Hospital day has begun with united prayer and a great uplift was given when as a result of a C.M.S. Lenten project for Sunday Schools in England a beautiful Chapel was built and dedicated by Bishop Tomusange to the service of God. The Chapel has become a real part of life on the compound and perhaps the most moving services are those held twice a year for the commissioning of newly qualified midwives. Each girl, kneeling before the Communion Table receives a lighted candle as a symbol of the light of truth she will be taking with her when she is about her work of caring for her patients; then she is commissioned. She then takes the candle and places it before the map of Africa, in any part of it she is eligible to serve, while she receives her badge and certificate. Leaving the Chapel she carries her lighted candle with her to receive the congratulations and good wishes of her colleagues.

The Church of Uganda, appreciating what the Hospital was attempting in the way of evangelism, in 1969 seconded one of its Pastors to become Chaplain to the Hospital. Many projects became possible and groups of pupil midwives, accompanied by the Chaplain, visited local homesteads regularly to give health teaching and advice linked with talks on spiritual matters.

In 1972, fifty years after its foundation, opportunities are still limitless and projects are in hand for the extension of health teaching, for the use of Hospital land as an experimental smallholding and as a base for the extension of research results in public health and agriculture in a local community. All these things are a cause for encouragement, and it is hoped that by teaching as well as deeds the Hospital may remain a centre of light to the surrounding countryside.

Hospital Facilities 1972

Wards General	Male	16 beds
	Female	24 beds
	Children	30 beds
	Amenity	1 bed
Maternity		47 beds
	Total beds	118,

Theatre

Outpatients Department
Child Welfare Clinic
Pathology Laboratory
Dispensary
X-Ray Room

Nurses Hostel - accommodating 65 with Dining Hall, Kitchen, Recreation Room, Library

Training School - comprising Classroom, Practical Room and office,

Offices,

Stores

Workshop

25 Staff Houses - 10 modern or modernized: 8 old and 7 in converted Wards.

Patients Statistics		1970/71	1969/70
Inpatients	General	1,946	2,158
	Maternity	<u>3,971</u>	<u>4,232</u>
		<u>5,917</u>	<u>6,390</u>

Outpatients Attendances (new cases in brackets)			
General	(19,138)	25,012 (25,453)	37,461
*Ante-Natal	(6,799)	<u>19,828</u> (5,935)	<u>26,790</u>
		<u>44,840</u>	<u>64,251</u>

Operations Performed

Major	210	185
Minor (including Dental extractions)	<u>1,123</u>	<u>1,252</u>
	<u>1,333</u>	<u>1,437</u>
Maternity Deliveries	2,847	3,071

Fees:		Shs	Shs
In Patients	Male	25,092	23,898
	Female	41,273	41,547
	Children	37,008	32,167
	Outpatients	<u>76,374</u>	<u>67,994</u>
		179,747	165,606
Income			
Fees		179,747	165,607
Grants (Inc. C.M.S, Staff Support)		195,460	199,819
Gifts		19,000	16,030
Other Sources (Interest, Rent & C)		19,559	24,995
		413,766	406,541
Excess of Income over expenditure		6,325	

Expenditure			
Direct Expenses		338,244	354,645
Overheads		69,197	82,338
		407,440	436,983
Excess of expenditure over income		30,531	

**Kumi Clinic now operated by Government.*

Staff, January 1972

Doctors:

Dr. J.M. Maitland, M.B. B. Ch., D.T.M. & H, - Medical Superintendent
 Dr. G.T. Lealman, M.B.B.Ch., B.SC., M.R.C.P.
 Dr. L.F. Guinness, M.B.B.Ch., (on leave)
 Dr. A.H. Maitland, M.B.B.Ch., D.R.C.O.G.
 Dr. F. Guinness, M.B.B.D. (on leave) Part time.

Matron - Miss E. Elsdon S.R.N., S.C.M.

Sisters

Miss E.A. Watson, S.R.M., S.C.M., M.T.D, Tutor.

Miss E. Kerr, S.R.N., S.C.M.
 Miss E. Swarbrick, S.R.N, S.G.M.
 Miss J. Lake (On leave), S.R.N., S.R.C.N, S.C.M.

Qualified Staff Nurses

Miss P. Adumun
 Mr. R.J. Etomet
 Mr. P. Kabare
 Mrs. Mary Akwap Ongodia
 Miss J. Kataike
 Mrs. Okeju
 Mr. W. Okalebo

Nursing Aides

Miss J. Abiria
 Miss K. Aboot
 Miss P. Akiteng
 Miss J. Akwi
 Miss F. Amisiri
 Miss A. Apiding
 Miss J. Asio
 Miss G. Asio
 Miss A. Asekenye
 Mr. L. Apedel
 Miss M. Arionget
 Miss S. Atim
 Mr. R. Balwanyi
 Mr. S. Echengu
 Mr. C. Ekalam
 Mr. J. Ekanyu
 Mr. W. Etiang
 Miss M. Ikara
 Mr. J. Isamat
 Miss L. Itaio
 Miss R. Mpande
 Mr. J. Ocom
 Mr. J. Omoding
 Mr. J.E. Omoding
 Mr. J. Okwalinga
 Mrs. G. Okuto
 Mr. J. Okwi
 Mr. J. Opedes

Midwives

Miss L. Akiono
 Miss B. Angima
 Mrs. A. Balwanyi
 Miss J. Kongai
 Miss J.P. Modo
 Mrs. J. Okuruk

Clerical & other staff

Mr. Y. Ingorot
 Mr. L. Otuba
 Mr. S. Ononge
 Mr. G. Aseun

Maintenance

Mr. G. Okuto
 Porters, Workmen and others 34



Dr John Mackenzie Maitland and wife, Dr. A. Hillary Maitland



Esther Imede, one of the first Ateso Nurses/Midwives. She rests in peace in Asuret, Soroti District.

Inside Ngora Freda Carr Hospital Units in 2022

All Photos by JONATHAN MARAKA



The Modern Operating Theatre



The Laboratory needs CBC and Electrolyte machines



The Labour Suite in Jersey Ward



Inside the Maternity Unit in Jersey Ward



Inside the Children's Ward named Okiror Ward



The Xray Unit