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MAKERERE UNIVERSITY
COLLEGE OF HEALTH SCIENCES



CELEBRATING A CENTURY OF EXCELLENCE, SHAPING THE FUTURE

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Dear Readers

Message

From the Program Director

We welcome you to our first edition of the international academic mobility newsletter from Makerere University College of Health Sciences. In this edition, we share the highlights of various academic mobility programs at MakCHS, experiences of several students and staff who have been able to travel, study and experience new cultures and skills aimed at increasing their competitiveness in the Global market. We also share challenges and improvements to improve student and staff academic mobility experiences.

Internationalization of higher education is defined by the OECD (1999) as the integration of an international/intercultural dimension into all the activities of a university, including teaching, research and service functions. This is in line with the Makerere University vision 2030 to become a research-led university. This cross-border movement of faculty in higher education has been attracting scholarly attention for decades since knowledge is borderless (Shen et al., 2022). Therefore, internationalization increases global higher education and impacts the world university rankings, with a goal of increasing international recruitment of the best and brightest students and scholars. These international academic mobilities offered at MakCHS involve a broad range

of activities like attending conferences, visiting research partners abroad and longer stays in other countries for research purposes. MakCHS has many academic partners with long-standing bilateral relations and agreements that go beyond academic mobility and thus has overtime developed procedures and quality control mechanisms to support academic mobility. The coordination of these academic mobilities is handled at the International Coordination Office. The office is also responsible for the administration and making sure that students and faculty have a memorable experience. It is also responsible for monitoring and reporting tasks and managing the organizational support and coordination, incoming participants' comprehensive insurance coverage, registrations, social activities and guided city tours for incomings etc. We look forward to learning with you, celebrating progress, and charting our next steps—together, as we build for the future.

Enjoy your reading
Dr. Mark Kaddumukasa
Associate Professor

Makerere University College of Health Sciences was established in 1924 known as Makerere University Medical School, till 2007 when it became Makerere University's premier constituent College. It is the oldest medical training University unit in East Africa; having been in the business of training medical and health professionals for over 80 years. This history has earned it an enviable position in Uganda and the East and Central African region. In 2008 Makerere University began a major institutional change that led to the creation of Makerere University College of Health Sciences (MakCHS) as the University's first constituent college. This was an exploration of uncharted waters in the history of university governance in Uganda. MakCHS has experienced both exciting and challenging times but has set a pace for itself and the future is very promising.

Makerere University College of Health Sciences

Vision

A leading and transformational institution for academic excellence and innovation in health sciences in Africa.

Mission

To improve the health of the people of Uganda through innovative teaching, research and provision of services responsive to societal needs.

Values

- Innovativeness and Adaptability to Change
 - Social Accountability
 - Diversity
- Excellence and Quality
- Equity and Social Justice
 - Professionalism



Prof. Bruce James Kirenga
Principal, MakCHS



Prof. Richard Idro
Deputy Principal



Prof. David Patrick Kateete
SBS



Prof. Annetee Nakimuli
SOM



Prof. Rhoda Wanyenze
SPH



Dr. Annet Kutesa Mutebi
SoD



Dr. Richard Muhindo
SHS



DEANS

The International Coordination Office at MakCHS

Dear Readers,

We warmly welcome you to this edition of the Makerere University College of Health Sciences (MakCHS) International Academic Mobility Newsletter. This issue highlights the growing impact of our global partnerships, showcasing how collaboration, cultural exchange, and academic mobility continue to shape the future of health professions education at MakCHS.

Through shared learning experiences, our students and faculty have broadened their skills, deepened their cultural awareness, and strengthened networks that advance global health. We thank all our partners and contributors for their commitment to supporting these transformative opportunities and for helping us build a truly global community of health professionals.

**Warm regards,
The Internationalisation and Editorial Team
Makerere University College of Health Sciences**

This is a one-stop office that coordinates academic mobility programs at MakCHS, which works closely with Heads of Departments, Directors of training Health facilities, COBERS site leaders and government officials in different offices to make

the academic experience memorable. The office is located within the clinical research building, on the first floor near the School of Medicine Dean's office.

INTERNATIONALISATION TEAM



**Ms. Susan Nassaka
Byekwaso**
sbyekwaso@yahoo.com
+256772419313



Alex Kisakye
alexkisakye2000@gmail.com
+256 753351464



Lydia Kabiri
kabdia4@gmail.com



Samantha Kachwinya
kachsam@gmail.com



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Virtual Academic Mobility

As the international coordination office coordinates academic mobility programs at MakCHS, they work closely with Heads of Departments, Directors of health facilities, COBERS site leaders and government officials in different offices. We are therefore grateful for all those that make the program better.



2 Outward Academic Mobility



3

Inward Academic Mobility

- undergraduate students (clinical rotations , research)
- Graduate students (clinical rotations, patient care , teaching students)

International student mobility has been a key component of the internationalisation strategies at Makerere University College of Health Sciences. These newsletters highlight the short-term inbound mobility programmes and the outward mobility of students, academic staff, and administrative staff at MakCHS. Within the framework of the internationalisation of higher education, academic mobility refers to the movement of participants (students and teachers) from one academic institution to another to share experiences and access opportunities not available at their home university for a specified period.

While the International Coordination Office manages inbound and outbound mobility for students and faculty, the College has also created an enabling environment for virtual mobility. This refers to a form of learning that incorporates virtual elements delivered through technology-supported learning platforms (Pichyk et al., 2020). Several staff and students participated in virtual programmes during this period.

Inbound academic mobility at the College of Health Sciences (Students)

International student mobility has assumed greater prominence in the last decades (Amendola, 2017). The inflow of occasional international students was very slow during the first half of the year due to the Ebola Outbreak than occurred at the beginning of the year at Mulago. As priority, student safety being key, all inbound students and those already around were halted and advised to end their rotations in line with the collaborating institutions guidance. In addition, forty-seven scholars who were expected to undertake rotations at Makerere University College of Health Sciences (MakCHS) cancelled their planned rotations to Uganda. Nevertheless, MakCHS was able to host a total of thirty-six international Scholars during the period January to March 2025 and forty-four occasional students between April and June 2025.

Majority of these students were from United States of America, followed by Uppsala University, Karolinska Institutet and Agder University. These scholars came from fifteen institutions of higher learning, with established partnerships with Makerere University, College of Health Sciences (MakCHS). The students undertook clinical rotations as part of the Global Health elective program.

As indicated below the scholars came from seven countries and twenty institutions globally. United States of America and Canada sent the highest numbers of scholars accounting for 53.4%.

Clinical departments and programs supported during this period.

The highest number of students received were undertaking rotations in medicine (internal medicine, pediatrics, obstetrics and gynecology, surgery etc.) (59%, n=45) and Nursing (29%, n=10) physiotherapy (3%, n=1), Dentistry (6%, n=2) and Research (3%, n=1).

The College organized the training for international scholars according to agreed learning objectives and expectations for the program. These included undertaking observational clerkships, tailored lectures and clinical sessions for the scholars or alongside the Makerere medical and nursing students. Inward mobility brings in skilled and talented individuals that fosters exchange of knowledge and skill and cultural diversity between the institutions.

By Nassaka Susan

	Country of Origin	Number of institutions	Number of students
1	United States of America	8	20
2	Canada	1	20
3	Norway	2	10
4	Sweden	3	14
5	The Netherlands	3	3
6	Germany	2	6
7	Republic of Somalia	1	6

Support to inbound international scholars at MakCHS

Alex Kisakye



interviews, visa interviews, to onboarding the selected students, we ensure that mobility is not just accessible but rather a meaningful experience with real impact.

Academic Mobility is more than movement; it is immersion and transformation from ones known environment and understanding to new and challenging environments. Through the curated cultural immersion experiences, students gain a deeper understanding of heritage, diverse communities and different health systems. These moments whether shared while having a small traditional meal or during a rural health outreach build bridges that last far beyond the duration of the program. International coordination office ensure that each group of students has an intentionally designed cultural immersion programe during their stay in Uganda. This includes visiting homes , visits to cultural sites in Kampala and other parts of the country , we ensure that students understand why Uganda is referred to as the Pearl of Africa.

To ensure safety and peaceful implementation of programmes we encourage international students on degree programmes to adhere to guidelines from Ministry of Internal Affairs, Uganda.

Through the centralized platform managed by the office, Since January 2025, we have had the privilege of supporting over 50 students in securing student and entry visas to Uganda. This was in consultation with Heads of Departments and programs. Some of

At first glance, student mobility may seem like a simple exchange, one student boards a plane and another arrives. But beneath this movement lies a composition of planning, coordination, care and purpose. At the College of Health Sciences, the International Coordination Office is not just a logistical hub but the heartbeat of global academic engagement. Each inbound and outbound journey is shaped by a meticulous structured process; from advertising opportunities to the target groups and conducting these scholars were undertaking specialist training that will lead to award in fellowship in pediatric Anesthesiology.

In order to safeguard safety of patients in the main teaching hospitals and affiliated sites, as the assistant international students' coordinator, we have provided support and assistance to over 16 graduate students and fellows in accessing practicing licenses for visiting scholars, ensuring compliance with Uganda's medical regulations.

To boost students' clinical experiences, we organized lectures we have liaised with various Departments to organize lectures for international students on topics like malaria, malnutrition, TB, HIV/AIDs, Uganda's healthcare system and neglected tropical diseases. These sessions have not only expanded clinical understanding but ignited quest for more knowledge in tropical medicine and meaningful conversations around bridging the gap in global health disparities. Beyond the classroom, we have coordinated a number of community visits in areas such as Katanga, Namuwongo and rural Bukonja village at a COBERS site, Kayunga District hospital for. These experiences have allowed students to witness firsthand realities of healthcare delivery in low-resource settings offering a global perspective on health systems their strengths and existing gaps. This work and experience have reshaped my understanding of mobility not as a checklist of tasks but as a living exchange of knowledge and culture. By Alex Kisakye

Medical Nursing II: Infectious and Tropical Diseases - Experience for students from University of Agder

This partnership was established between University of Agder and MakCHS Department of Nursing to facilitate students and faculty exchange programs through which they get valuable international experiences and broaden their global perspective. Faculty from both institutions discussed modalities of working together where they agreed to engage students in specific programs in the curriculum. The first cohort of nursing students from MakCHS Department of Nursing engaged in a global health program which included clinical experiences and home care for 3 months from October to December 2024.

MakCHS Department of Nursing received Nursing students from the University of Agder from 17th March to 11th April 2025. The students undertook a Medical Nursing course in Tropical and Infectious Diseases NH 4209 alongside the fourth year Makerere University nursing students. The course included theory and clinical placement and teaching students. Students were paired with Makerere students, engaged in preparation topics to protect their colleagues, engage in ward activities, individual patients follow up care using the nursing process and discharge plan.

The students participated in developing a report for the individual patient assigned to them, post clinical conference where we discussed the assigned patient and they got guidance on nursing care for the patient. They also participated in class presentations for assigned topics including defining the topic pathophysiology of the condition, pharmacological



Students from Agder and Makerere pose for a photo

management including the side effects of the drugs, nursing care using the nursing process and precaution strategies for the conditions. Among the precaution strategies they included nursing frameworks for case detection, isolation, control and outbreak intervention since at that time the country was grappling with Ebola which is among the infectious diseases included in the curriculum.

The students had the best Learning environment at MakCHS while studying topics like Infectious Disease Control, hospital nursing frameworks for isolation, case detection, control, and outbreak intervention at a time when the country was grappling with Ebola.

By Mrs. Lydia Kabiri

Uppsala University Students' experience in Global Medicine

Uppsala University collaboration with MakCHS involves training and mentorship of students in global health. MakCHS received 8 students to participate in this training. Global medicine course, often part of a global health program, prepares healthcare professionals to address health challenges that transcend national borders. It focuses on understanding and tackling health disparities, promoting health equity, and improving health outcomes worldwide.



Dr. Arnold Kibuuka conducting a lecture on Malnutrition

This involves studying diverse health systems, cultural competence, and the social determinants of health.

The course encompasses the study and practice of healthcare issues and solutions that transcend national borders, focusing on promoting health and preventing diseases globally. The main objective of the course was to provide the student with an opportunity to appreciate issues in maternal and child health, health disparities, social determinants of health and health care system in Uganda.

They attended didactic sessions provided by lecturers from Departments of Pediatrics and Internal Medicine, bedside teachings and relevant clinical clerkships in Departments of Emergency Surgery unit and Pediatrics at the MakCHS training facilities or hospitals.

The training provided a snapshot of the healthcare system in Uganda, which is different from Sweden. This provided an insight into future research and specialized training. The training focuses on tropical medicine and other diseases which may not



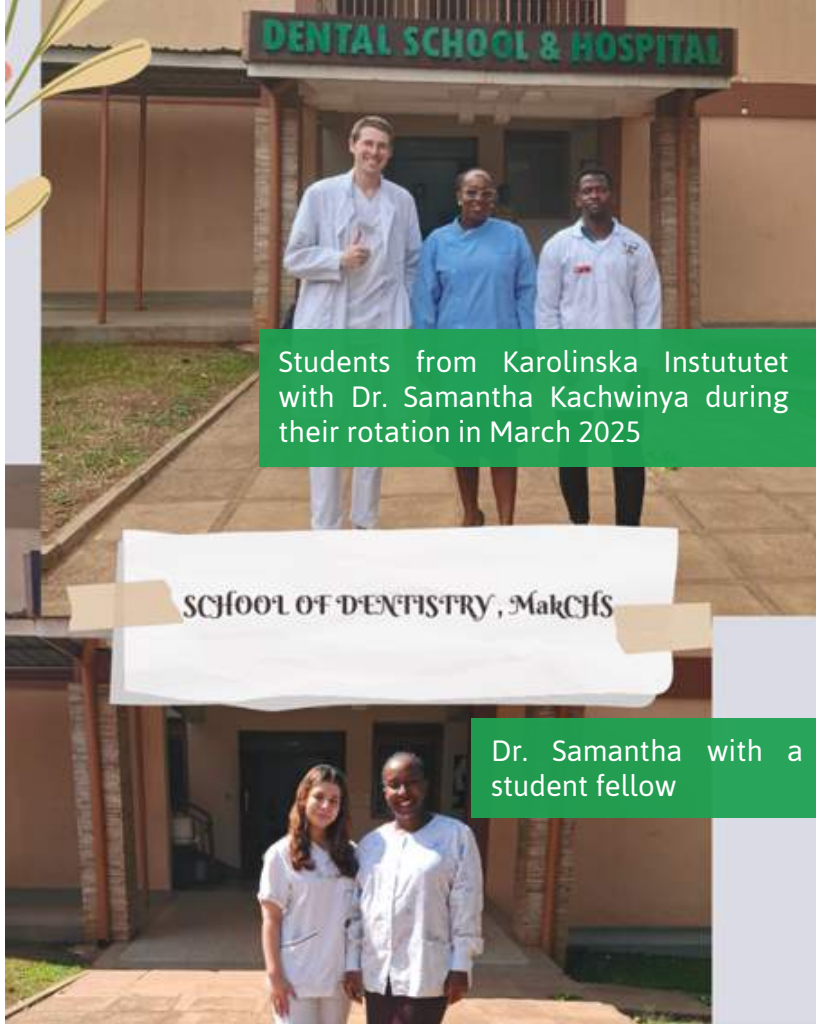
Elias Sikstrom is serving birthday cake to Stella at the Deans' office and to Agnes at the Department Pediatrics.



Elias Sikstrom is serving birthday cake to Stella at the Deans' office and to Agnes at the Department Pediatrics.

School of Dentistry welcomes students.

School of Dentistry hosted students from Karolinska Institutet, Sweden and University of North Carolina, U.S.A. Through clinical rotations, students acquired knowledge and clinical skills from Faculty and students at MakCHS



Students from Karolinska Institutet with Dr. Samantha Kachwinya during their rotation in March 2025

SCHOOL OF DENTISTRY, MakCHS

Dr. Samantha with a student fellow



Students from UNC with Dr. Adrian Kamulegeya from the department of Dentistry



MAKERERE UNIVERSITY
COLLEGE OF HEALTH SCIENCES
P.O. Box 7072, Kampala Tel: +256 416 698 386 Fax: +256 414 531033
www.chs.mak.ac.ug
SCHOOLS OF:
MEDICINE TEL: +256 414 336031
PUBLIC HEALTH TEL: +256 414 341872
BIOMEDICAL SCIENCES TEL: +256 414 341873
HEALTH SCIENCES TEL: +256 414 341874
DENTISTRY TEL: +256 414 341875

Support to medical education at regional level, a case of South to South Collaboration

Driven by the need for improved quality of education at regional level, Somalia International University established a partnership with Makerere University and signed a specific addendum with focus on health professional training. Over forty students from Somalia International University have since undertaken training for two semesters at MakCHS. It is under this framework students undertake rotations in the four clinical disciplines of Pediatrics, Internal Medicine, Obstetrics & Gynecology and Surgery at MakCHS. They train alongside the MakCHS students which enables them to integrate fully in the learning culture of Makerere University.

Whereas students from Somalia were granted a greater exposure to different academic environments, the presence of students from an African country with different cultures fostered a sense of Pan-African identity for students at MakCHS.

Despite challenges faced by the students during their stay like, language barrier which hinders their communication and participation effectively in their training experiences, the students are able to transfer their credits after their stay at Makerere University to Somalia International University. Strategies for addressing the language issues are still ongoing with support from Somalia International University on how best to improve the students' experience. During one of the regular feedback sessions, students expressed gratitude toward MakCHS for the life changing training period.

By Nassaka Susan



Yusuf Jimale (extreme left), Riyan, Falstin, Muno Abidfatah, Kifah and Abdirahman Ibrahim

Stethoscope, A City & A Cause: A Seventeen-Year Dream Realized Through an Exchange at Feinberg School of Medicine.



Martin Luther Sserumunye in the middle

Sserumunye was one of two students selected after a very competitive interview in 2025 for a fully funded elective placement at the Feinberg School of Medicine through a long-standing partnership between Makerere University College of Health Sciences (MakCHS) and Northwestern University. This opportunity fulfilled his childhood dreams of studying medicine and traveling to the United States of America (USA).

He was assigned to the Nephrology Unit in the Acute and ICU Nephrology divisions. Martin Luther learnt to review consults via EPIC (electronic records system) during his rotation abroad, learnt from world-class attendings and fellows, and participated in ward rounds, patient education, and seminars.

Stationed at Feinberg Pavilion, 9th floor, home to the dialysis unit, an epicenter from which nephrology consult services radiated across all hospital pavilions and specialties, except pediatrics. The service was structured into four major divisions: Acute, ICU, Transplant, and Chronic Nephrology,

each with a peculiar clinical lens. It extended both inpatient and outpatient services, but I inclined myself more to the former, with a greater predilection for the Acute and ICU Nephrology divisions.

Being a consult-based rotation, we were more in motion than at the primary workstation. Consults would arise through pagers, direct phone calls, and most frequently, the EPIC electronic medical record system. Each consult was akin to a unique puzzle: seeking explanation of the etiology, analyzing labs and imaging, and offering guidance on fluid status, electrolytes, acid-base balance, and renal protection strategies, all interwoven into broader systemic illness. I began understanding how deeply the kidneys reflect the body's pathology and physiology.

Rotating in a team composed solely of attendings and fellows, and caring for highly informed patients who, in most cases, knew more about their illnesses than I ever did, undoubtedly rendered me the least competent on the team. The knowledge gap was enormous, and the learning curve too steep — at times feeling lost in the vastness of medicine. However, it was such a supportive team. They welcomed questions, turned cases into teachable moments, and ignited the modeling of a thoughtful, patient-centered, and analytically precise physician I aspire to become, and, most importantly, being as human as I ever touch another human soul.

In every sense, this rotation stretched and challenged me, in hospital corridors, at home, on the train, in parks, and even on the bus, literally as long as I was awake. Each consult was more than just a task; it was an invitation to deep analytical thought and intentional learning. I leave this experience with a profound sense of how the kidneys, often silent, can speak volumes about the body's story.

By Martin Sserumunye

Kiragga Denis, 2025 undertook a rotation at Northwestern University, Feinberg School of Medicine, Chicago, USA 3rd to 28th March 2025

During the 4 weeks rotation, he joined the Cardiology Department, working closely with attendings, fellows, and nurse practitioners during he participated in patient reviews, consults, rounding, note-taking (EPIC system), and conferences. Besides that, he observed and assisted in various laboratories like Echo, Cardiac Catheterization, Electrophysiology, Outpatient Clinics and learned from high-standard practices in patient-centered care, efficient team coordination, and advanced medical technology.

He highlighted the Key Lessons learnt as importance on teamwork, value of research collaborations, availability, and taking responsibility within consultation services. There was less hierarchical, more collaborative and respectful culture. This he noted inspired him as an outgoing student to promote closer mentorship, digital medical records, and patient privacy in Uganda when he starts practicing as a physician. He

Denis cherished some cultural & personal Insights like Chicago city organization, architecture, and diverse populations through participation in the ACC Chicago Community Health Fair and networking with professionals from various backgrounds. He enjoyed springtime in the U.S. and balanced professional growth with sightseeing and social experiences.

In summary Kiragga noted that the elective was transformative, enhancing both

professional competence and global perspective.

By Kiragga Denis



Exchange program at Magna Græcia University of Catanzaro, Italy



UMG
Dubium sapientiae initium

Magwali Claire Venencia, a fourth-year medical student at Makerere University, participated in the Erasmus+ exchange program at Magna Græcia University of Catanzaro, Italy.

Pre-departure & Travel

The selection process was competitive, requiring a strong academic record and interviews. Preparations included visa processing, vaccinations, and introductory Italian lessons. Claire traveled to Italy on May 19th, 2025, her first flight abroad, and received a warm welcome from coordinators and mentors upon arrival.

Academic & Clinical Experience

Claire undertook clinical rotations at Azienda Ospedaliera Universitaria "Renato Dulbecco" in Infectious Diseases, General Surgery, Neurosurgery, Orthopedics, Urology, and Cardiac Surgery. She observed advanced medical procedures such as multiplex PCR testing, coronary artery bypass surgery, and ultrasound-guided prostate biopsies. The program strengthened her clinical skills, diagnostic abilities, and understanding of multidisciplinary teamwork. Italian language classes further enhanced her communication in medical settings.

Lessons Learnt

1. I learnt how careful testing and documentation were integrated at every stage of care to prevent antimicrobial resistance (AMR), a practice I hope to promote back home.
2. Advanced Clinical Exposure: I witnessed cutting-edge procedures, such as coronary artery bypass surgery and image-guided prostate biopsies, which expanded my understanding of modern medical techniques.
3. Teamwork and Collaboration: Working with professors, resident doctors, and students from diverse backgrounds taught me the value of collaboration and the strength of multidisciplinary teams.
4. Language and Communication: Immersion in an Italian-speaking environment improved my language skills and taught me to communicate more effectively across language barriers.
5. Cultural Adaptation: I learned to appreciate and adjust to different cultural norms from food and family routines to how the community values relaxation and social connection.
6. Time Management: Balancing clinical duties, travel, and personal study helped me become more disciplined and efficient with time — a skill I will carry forward into my medical career.

Social & Cultural Experience

Claire adapted smoothly to life in Southern Italy, embracing traditions like evening walks, Italian cuisine, and community-centered living. She formed strong friendships with

fellow students, doctors, and locals, and traveled widely across Italy, visiting Florence, Pisa, Venice, and Rome.

Key takeaways included antimicrobial stewardship, teamwork, communication across language barriers, cultural adaptation, time management, independence, and a broadened global medical perspective.

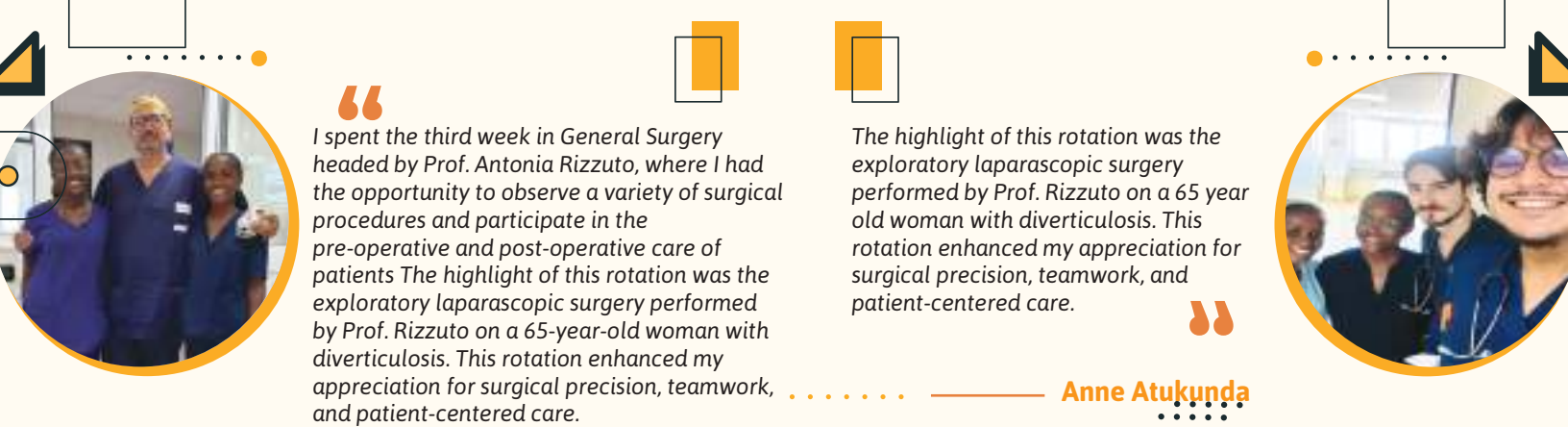
Challenges & Solutions

She faced difficulties with orientation, language barriers, and transport systems. Suggested solutions included structured orientation, translation support, transport guides, and extended pre-departure language training.

Recommendations

- **For Makerere University:** earlier selection timelines, more intensive Italian training, cross-cultural exchange initiatives, and post-exchange mentorship opportunities.
- **For Magna Græcia University:** dedicated clinical mentors, structured orientation.





“
I spent the third week in General Surgery headed by Prof. Antonia Rizzuto, where I had the opportunity to observe a variety of surgical procedures and participate in the pre-operative and post-operative care of patients. The highlight of this rotation was the exploratory laparoscopic surgery performed by Prof. Rizzuto on a 65-year-old woman with diverticulosis. This rotation enhanced my appreciation for surgical precision, teamwork, and patient-centered care.”

“
The highlight of this rotation was the exploratory laparoscopic surgery performed by Prof. Rizzuto on a 65 year old woman with diverticulosis. This rotation enhanced my appreciation for surgical precision, teamwork, and patient-centered care.”



..... — Anne Atukunda
.....

Outpatient family medicine rotation in Des Moines University, a practical experience.

My goals for the elective were to understand the scope of Family Medicine in the U.S., observe chronic disease management, experience Osteopathic Manual Medicine (OMM), learn to use electronic health records, and appreciate how continuity of care is maintained in outpatient settings. I also aimed to compare these approaches with Uganda's healthcare system to identify strategies for improving patient care back home.

Placed in the Family Medicine Department, I experienced holistic, preventive, and patient-centered care that integrates OMM to address musculoskeletal concerns alongside conventional treatment. Over four weeks, I gained valuable exposure to outpatient practice, preventive care, chronic disease management, and the physician-patient relationships that define effective family

medicine.

We saw 12–18 patients daily, from

plans, lifestyle counseling, and regular follow-up. Mental health care was equally emphasized, with physicians engaging patients about their emotional and social wellbeing.

A highlight was working with Dr. Johnson, an OMM specialist, who guided me in practicing basic manual therapy techniques to relieve musculoskeletal discomfort. Preventive care was ever-present through vaccinations and wellness checks.

This elective deepened my appreciation for patient-centered care, the power of continuity, and how compassionate, structured follow-up can transform health outcomes.



follow-ups to acute cases. Chronic disease care stood out most, patients with diabetes, hypertension, and obesity received individualized treatment

**Ms. Kukunda Pavin,
5th-year Medical Student, College
of Health Sciences**

Rotation in Minnesota University: Acting Internship in Plastic and Reconstructive Surgery, Plastic and Reconstructive Surgery by Victorius Mangheni



-- Victorius Mangheni

Mangheni shares, "In today's interconnected world, medical education is no longer confined within the walls of a single institution or the borders of a single country. The realities of global health demand professionals who are not only clinically competent but also globally aware, culturally sensitive, and equipped to thrive in diverse healthcare systems. It is with this philosophy in mind that international student exchange programs have become an essential part of medical training. The Makerere University–University of Minnesota Exchange Program exemplifies this vision.

It is not merely a logistical arrangement between two

academic institutions, it is a bridge that connects two continents, two healthcare systems, and two educational cultures in a shared pursuit of excellence and mutual growth. Spearheaded by the MakCHS International Office in collaboration with the University of Minnesota's Global Medical Education and Research (GMER) Program, this initiative immerses medical students in hands-on learning environments beyond their home context, giving them the tools to think globally while serving locally."

Magheni Victorius undertook an Acting Internship in Plastic and Reconstructive Surgery, which offered immersive surgical exposure and a strong framework for developing clinical, technical, and reflective skills. The rotation provided high-quality clinical experience in various aspects of plastic and reconstructive surgery through both hands-on and observational roles.

She scrubbed in and assisted in over twenty-five surgical procedures, including trauma surgeries such as ORIF for midface fractures (maxilla), where she learned facial anatomy, fixation using titanium plates, and the importance of occlusion preservation. She also observed

synovial debridement and lavage, chest and abdominal dissections, reconstructive surgeries, breast reconstruction with free flaps, incision planning, tendon sheath exposure, and ulnar nerve decompression and transposition techniques.

Lessons learnt:

- That reconstructive surgery is deeply interdisciplinary. She appreciated how oncology, orthopedics, dermatology, and trauma surgery interface with plastic surgery.
- The procedures are not just about tissue transfer; they are about restoring form and function in profoundly human ways.
- Microsurgery demands meticulous precision. She learnt the principles of vessel patency, avoiding kinking, and meticulous suturing under magnification.
- Surgical planning is everything. Good outcomes depend on thoughtful flap design, anticipating tension lines, and understanding vascular territories.
- Mentorship transforms learners. The residents and attending doctors made time to explain procedures, test my knowledge, and encourage my confidence.
- Teamwork fuels excellence. The OR staff were highly synchronized. Everyone, from the nurse anaesthetists to the scrub techs, contributed to surgical success.
- Communication builds trust. Watching surgeons reassure anxious patients pre-op was a wonderful lesson in empathetic care.

Lessons Learnt from the Rotation Abroad by Nairuba Evelyn

This elective significantly deepened my understanding of reconstructive plastic surgery. I learned to differentiate between various flap types such as pedicled, free, and perforator flaps, and developed a strong foundation in their anatomical and vascular principles. I gained practical knowledge in flap planning, microsurgical anastomosis techniques, and the nuances of patient selection and timing. I became more confident in sterile field management, wound closure techniques, graft application, and interpreting surgical outcomes. Exposure to diverse case presentations broadened my appreciation for the artistic and functional goals of reconstructive surgery, particularly in post-oncologic and trauma settings.

Clinical Skills and Decision-Making: Through hands-on experiences and discussions with faculty and residents, I enhanced my clinical reasoning, learned to recognize surgical indications, and gained insight into intraoperative judgment. I also refined my ability to assess post-operative complications such as flap failure, infection, and hematoma, and to anticipate the

next steps in management. The daily interactions with patients improved my ability to communicate complex surgical plans in a compassionate and comprehensible manner.

Health Systems Insight:

This elective also highlighted broader health system challenges. I observed how socioeconomic status, health insurance limitations, and rural versus urban healthcare access play critical roles in determining who receives timely reconstructive care. For instance, I witnessed delays in surgical scheduling due to prior authorization issues and complex insurance processes, as well as instances where patients declined indicated surgery due to cost concerns. These experiences underscored the importance of advocating for equitable healthcare policies and understanding the systemic barriers that impact surgical outcomes. It became clear that resource allocation, hospital priorities, and public policy are tightly interwoven with patient care in modern plastic surgery practice.

Communication and Professional Development:

I learned the value of clear and

empathetic communication with both patients and team members. Delivering complex information in an understandable and reassuring way is essential in plastic surgery, especially for patients undergoing life-changing procedures. I also gained a greater appreciation for the professionalism and coordination required in high-functioning surgical teams, where each member plays a critical role in patient outcomes.

Cultural and Ethical Awareness:

Encountering patients from diverse backgrounds highlighted the importance of culturally sensitive care. Ethical dilemmas, such as decisions regarding elective procedures in uninsured patients or balancing aesthetics versus function, reinforced the need for patient-centered approaches grounded in ethical reasoning.

Personal Growth and Career Clarification:

This rotation affirmed my interest in surgical specialties and has helped clarify my aspiration to pursue plastic surgery as a career. I developed greater resilience, adaptability, and appreciation for the demanding yet rewarding nature of surgical practice.

Inbound mobility - Faculty

The College of Health Sciences also hosted faculty members from partner institutions with whom Makerere University has established partnerships with like Des Moines University, USA, who had come for review of the programme and others that came to meet with stakeholders and establish new partnership, Western Norway University.



Dr. Tom Ngabirano, Prof. Idro (Deputy Principal, MakCHS) plus faculty from western University, Norway

Other visiting Faculty came as short-term teachers within teacher exchange programme with MakCHS. One of these was Prof. Antonia Ammendolia Department of Orthopedics Magna Gracie University.



Prof. Mariah McNamarah with Dr. Joseph Kalanzi

Other visiting Faculty came as short-term teachers within teacher exchange programme with MakCHS. One of these was Prof. Antonia Ammendolia Department of Orthopedics Magna Gracie University, Italy.



Dr Malagala Joseph and Prof. Antonia Ammendolia



Prof. Antonia Ammendolia and Prof. Mark Kaddu Mukasa

Short-term outbound mobility Highlights at Consortium of Universities in Global Health (CUGH)

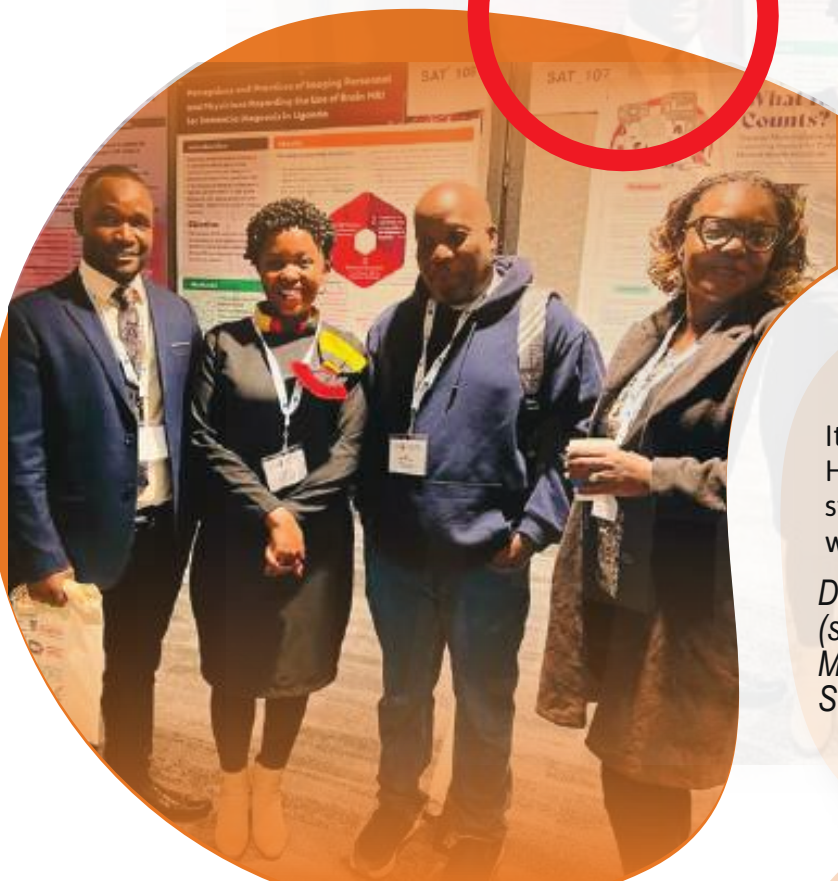
The Consortium of Universities for Global Health (CUGH) is a rapidly growing Washington, DC based organization of over 190 academic institutions and other organizations from around the world engaged in addressing global health challenges. CUGH was established in 2008 with generous funding from the Bill & Melinda Gates Foundation and The Rockefeller Foundation. With a Mission to support academic institutions and

partners to improve the wellbeing of people and the planet through education, research, service, and advocacy, the consortium organizes a conference annually through which stakeholders in Global health exchange ideas and skills on how best to handle Global health challenges.

The host institutions were Emory University, University of Georgia, and the University of Alabama Birmingham. Its theme was "Innovating and Implementing in Global Health for a Sustainable

Future". The conference agenda was filled over 170 speakers from all over and more than 40 panel discussions across various topics, disciplines, and countries that addressed many of the contemporary health challenges that we face today.

There were over 13 Satellite Sessions at CUGH 2025 that spanned a wide range of topics. The conference convened individuals across sectors, organizations, and disciplines to share knowledge, build skills, or develop action plans to address



It is delightful to note that Makerere College of Health Sciences was well represented, some students and Faculty had both poster and others were panelists.

Dr. Roy Mubuke (left), Dr. Rita Nassanga (second from left), Prof. Mark Kaddu Mukasa (second from right) and Dr. Scovia Mbalinda (right).

Prof. Nelson Sewankambo
received the Dr. Alfred Mteta
Award



Dr. Ronald Olum

Research Associate,
School of Public Health
Received CUGH's Dr. Judy
Wasserheit Young Leader



With the theme “Innovating and Implementing in Global Health for a Sustainable Future,” participants shared ideas on how to strengthen collaboration and commitment to improving global health outcomes.

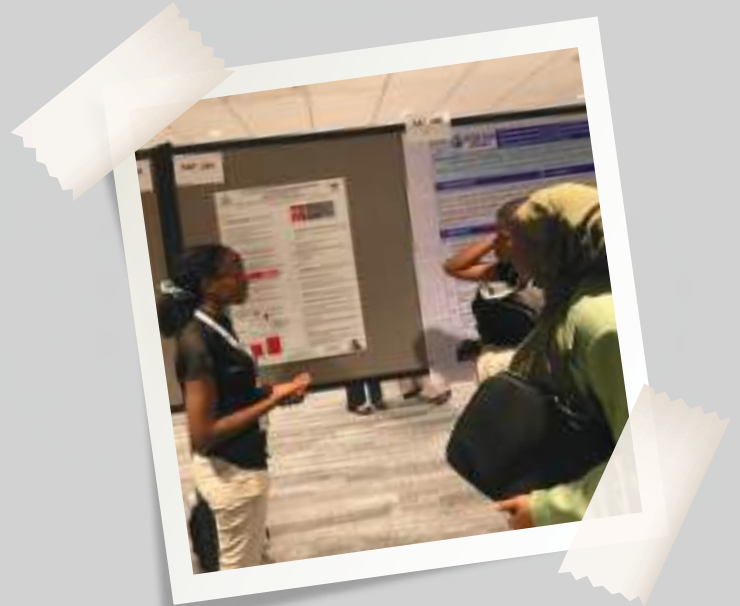
In her welcome remarks, the Director of Global Health emphasized the importance of partnerships in addressing shared challenges. “Global health issues are not confined to one nation. As researchers, policymakers, clinicians, and administrators, we must face these challenges together, unity breeds innovation,” she noted. She encouraged participants to value their greatest asset, human resource, and to continue working with mission and energy despite financial constraints. “Global health means showing up even when faced with a giant,” added Dr. Sekandi, Associate Professor of Epidemiology and Biostatistics at the University of Georgia.

The conference also created a platform for networking among colleagues who trained at MakCHS and now serve in institutions worldwide, fostering discussions on sustaining collaborations and developing impactful global health programs for Uganda and beyond.

Students during the CUCH Conference



Dr. Ronald Olum Research Associate, School of Public Health poses with his CUGH's Dr. Judy Wasserheit Young Leader Award



Nabisere Vivian (Fifth year medical student, presenting her poster at CUGH Conference



Prof. Sewankambo Nelson receiving the Dr. Alfred Mteta Award

