Makerere University
College of Health Sciences
1924 2024
CELEBRATING A CENTURY OF EXCELLENCE, SHAPING THE FUTURE

INTERNATIONAL
Coordination Office
News Letter

Jan 2026- May 2026

Contents

A Word from the Deputy Dean, School of Medicine

Dear Colleagues, Students, Partners, and Friends,

It gives me great pleasure to introduce this edition of the International Coordination Office Newsletter, highlighting the remarkable achievements and experiences that have shaped our internationalization agenda during the first half of 2026.

At Makerere University College of Health Sciences, we firmly believe that global engagement is an essential component of excellence in health professions education. Academic mobility, collaborative research, and intercultural learning opportunities provide invaluable experiences that prepare our students and faculty to address increasingly complex global health challenges.

The stories captured in this newsletter demonstrate the transformative impact of international partnerships. We have welcomed scholars from across the globe into our classrooms, hospitals, and communities while also supporting our students and staff to gain exposure to diverse health systems and educational environments abroad. These exchanges enrich our academic environment, strengthen professional networks, and promote mutual learning founded on respect and equity.

I am particularly encouraged by the growing number of partnerships that continue to expand opportunities for students, faculty, and researchers. From clinical clerkships at Mulago National Referral Hospital to collaborative learning experiences in Europe and North America, these initiatives reflect our commitment to producing globally competent health professionals who are grounded in local realities.

As we navigate an increasingly complex global landscape, marked by changing mobility trends, geopolitical uncertainties, and evolving health priorities, our commitment to international collaboration remains steadfast. Together with our partners, we will continue to build innovative and sustainable platforms for education, research, and service.

I extend my sincere appreciation to the International Coordination Office, our faculty members, student leaders, administrative staff, and international partners whose dedication makes these achievements possible.

I hope you enjoy reading the inspiring stories contained in this newsletter and join us in celebrating the continued growth of internationalization at MakCHS.

Prof. Mark KadduMukasa
Deputy Dean, School of Medicine
Makerere University College of Health Sciences

"Academic mobility transforms education by connecting people, ideas and cultures, preparing health professionals to address today's global health challenges through collaboration, innovation and mutual learning."

ACADEMIC MOBILITY AT MAKCHS;

January to May 2026

As Internationalisation continues to be at the centre of higher education, the role of the international office cannot be down played. International co-ordination, or global health education are key in ensuring that all internationalization strategies are implemented.

The International Coordination Office has been involved in advancing the college's internationalization agenda through strategic partnerships, mobility programs, and other global engagement initiatives. The international coordination office has been at the center of all activities geared towards enhancing academic mobility as an internationalization strategy.

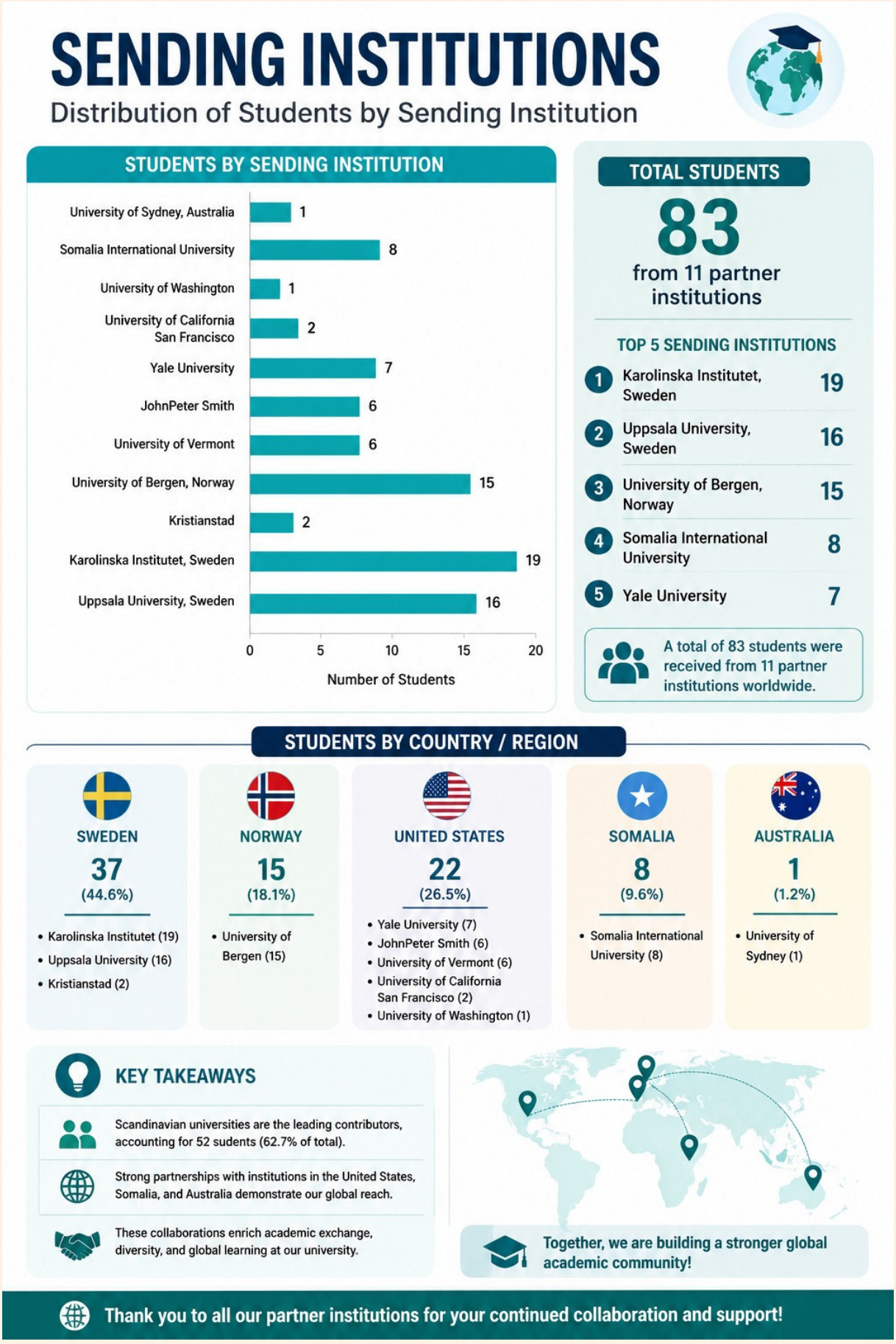
The team supported the legal office and other stakeholders in drafting, reviewing and signing of memoranda of understanding with partners abroad. Besides that, the team supported internationalization committee to interview MakCHS medical students for study abroad programs and received incoming international scholars at MakCHS and provided logistical support to MakCHS students travelling abroad and incoming students to undertake clinical rotations in a different environment. The newsletter highlights reflections of hosts and students in the mobility program from January to May 2026.

Incoming Mobility

Makerere University College of Health Sciences (MakCHS) hosted over 105 international scholars at different levels of training and specialties in Medicine, Dentistry, and Nursing. The scholars originated from a diverse range of institutions across Europe, North America, Asia, Africa, and Australia, reflecting MakCHS's growing global reach and strong international partnerships.

The majority of participants (n=83, 79%) were from institutions with established partnerships with MakCHS, including the University of Bergen (Norway), Karolinska Institutet and Uppsala University (Sweden), the University of Minnesota (USA), and Somalia International University (Somalia). Additional scholars were hosted from institutions such as Chulalongkorn University (Thailand), the University of Sydney (Australia), the University of Cambridge (United Kingdom), the University of Washington (USA), and the Medical University of Graz (Austria), further strengthening the College's international engagement and visibility.

Notably, female scholars constituted the majority of participants, accounting for 96 (91%) of the total inbound scholars. This highlights the increasing participation of women in international health professions education and global academic exchange programs.



A Graph with summary of incoming students from Partner institutions of higher learning

Clinical Clerkships & Rotations

Most of these students were involved in clinical clerkships in the main teaching Hospital, Mulago, its affiliated site Kawempe National Referral Hospital and at a COBERS site, Kayunga Hospital. These placements were designed to provide hands-on experience in diverse clinical settings, strengthen practical competencies, and enhance exposure to disease patterns prevalent in low-resource contexts.

The majority of students (n=33, 54%) were placed in the Department of Paediatrics, with a particular emphasis on the Malnutrition Unit at Mulago Hospital. This rotation offered insights into the management of severe acute malnutrition which is rare in the Global North. Other rotations were undertaken in the Department of Medicine (n=15, 24%), and a proportion of students (n=16, 25%) were placed in the Department of Obstetrics and Gynaecology at Kawempe Hospital, gaining exposure to maternal and reproductive health services, including antenatal care, labor management, and emergency obstetric interventions.

More to that, six students from University of Bergen completed specialized rotations in Psychiatry. These placements were conducted at Mulago Hospital and Butabika National Referral Hospital, providing students with experience in the assessment and management of mental health conditions within both general and specialized psychiatric care settings. Overall, the clinical clerkships provided a comprehensive and immersive learning experience, contributing significantly to the students' clinical skills, cultural competence, and understanding of global health challenges.

The students appreciated the resourcefulness of the health professionals at MakCHS and teaching hospital. when asked what was the best part of the rotation, one student note that "Hands-on clinical exposure is unavailable in Norway. Doctors involved students directly in emergencies both in Pediatrics and Obsterics&Gyneacology Departments, teaching procedures on spot something unlikely at home. It was valuable to see high patient volume and tropical diseases like malaria, sickle cell, HIV and T.B".

The rotation gave me greater appreciation for Norway's health care system, awareness of different practices -some good and others challenging. seven-week experience broadened clinical eye and created meaningful connections with friendly people in Uganda' 'Hauk 26, University of Bergen, Norway.
Beyond clinical rotations, the program incorporated structured academic and community-based learning. Students had twelve lecture sessions conducted by students Department of Pediatrics and Internal Medicine and Faculty from Nursing Department. They also attended four introductory Luganda language sessions aimed at enhancing cultural competence and facilitating communication with patients and local communities. As part of community engagement, the students conducted an outreach visit to a secondary school in Sonde alongside Makerere students. The integration of clinical training, classroom-based instruction, and community exposure ensured a well-rounded and immersive educational experience.

Students from University of Bergen Taking break in the Dean's Gardens. Christine Haestad, Frida Marie, Karina Ervik, Oyvind Repstad, Frida Berents, Edda Moving and Hauk Fevang (left to right)

Dr. Arnold Kibuka giving a lecture about Malnutrition in Uganda to Uppsala Students

Mr. Hawk Fevang, University of Bergen ready to start their rotation in Obstetrics &Gynecology, Kawempe Hospital

Establishment of new partnerships with institutions abroad

The office supported the College Principals with signing of two memoranda of understanding with London Uuniversity School of Tropical Hygiene and College of Medicine, Chosun University, Republic of Korea. During the signing of memorandum of understanding between CHOSUM school of Medicine, Republic of Korea both institutions pledged to support each other with main focus on academic mobility. The collaboration will promote academic cooperation with a primary focus on teaching, learning, and research, including student exchange and educational collaboration in the fields of basic medical sciences and clinical medicine.

Led by Prof. Seok Choi, Prof. YoungJoon Ahn Dean School of Medicine, the team from Chosun University included Prof. SeongPyo Moon (Professor, Chosun University College of Medicine). Prof. Sang-Gi Park (Professor Emeritus), Dr. HyunSeok Lim, Dr. JiEun Kang (Director, and Head of Internal Medicine Bethesda Hospital Uganda) and Prof. Hye Young Kim (Professor, Nursing, Dongkang College).

Mrs Zaam Ssali communications officer, Mr. Stephen Byarugaba procurement officer, Ms Susan Byekwaso, International Coordination Office and others during the signing of the memorandum of understanding

Leadership from Makerere University College of Health Sciences and Chosun University, Republic of Korea, during the signing of a Memorandum of Understanding aimed at strengthening academic collaboration and mobility.

Building on Decades of Collaboration: MakCHS and LSHTM Renew Partnership

Makerere University College of Health Sciences (MakCHS) and the London School of Hygiene & Tropical Medicine (LSHTM) have reaffirmed their longstanding commitment to advancing global health through strengthened collaboration in research, training, capacity building, and knowledge exchange.
The partnership brings together two institutions with a shared vision of addressing pressing public health challenges through innovative research, high-quality education, and evidence-based policy engagement.

Over the years, the collaboration has contributed significantly to strengthening health systems, developing research capacity, and generating knowledge that informs public health practice both in Uganda and globally.Prof. Sarah Ssali, the vice chancellor academics, Makerere University expressed delight in the importance of long-term partnerships and collaboration that handles more than one project. “We are looking forward to communicating further about ideas and potential projects, seeking synergy to build. As an institution, we are committed to becoming a research-intensive University. we appreciate the collaboration and are happy to see this initiative being launched. The world is changing, and we need to address new challenges together”. She welcomed the visitors to Makerere University, encouraged them feel at home.

The strengthened collaboration is expected to expand opportunities for; Joint research and grant applications, Capacity building and mentorship programmes, collaborative publications and scientific dissemination and ttranslation of research evidence into policy and practice. The other memoranda of understanding signed within the period were with, Tiny Eyes, Redge Inc. and Columbia University

Prof. Sarah Ssali(Deputy Vice-Chancellor Academics), Prof. Bruce Kirenga(Principal,MakCHS), Prof. Idro Richard (Deputy Principal), Prof. David Kateete (Dean, School of Biomedical Sciences), Prof. Moffat Nyirenda, Director Medical Research council, Prof. Liam Smeeth, Director of LSTM and Prof.Caroline Relton during the signing of an MOU between Makerere University and London School of Tropical Mediceine

Opportunities

Stakeholders from the Colllege of Health Sciences and the team from London School of Tropical Medicine

In order to officially launch the project, Dr. Blair and other members of Tiny Eyes co-founders Dr. Anna Ells and Dr. Sarah Rodriguez visited The College of Health Sciences and taught residents in the Department of Ophthalmology at Makerere University, sharing expertise in paediatric retina care.

The team pledged to work with MakCHS so as to prevent and decrease blindness from Retinopathy of Prematurity (ROP), a leading cause of preventable childhood blindness. During their visit, they met with the Head of Department Juliet Otiti Sengeri, to discuss expanding educational opportunities and future remote virtual collaborations, such as joint Grand Rounds and Dean School of Medicine Prof. Annet Nakimuli

Besides involvement in teaching and learning, they donated Equipment like ophthalmology lasers and oxygen blenders needed for ROP treatment.

Faculty from Tiny Eyes, Dr Micheal Blair (left), Prof. Annettee Nakimuli Dean School of Medicine Dr Anna Ells, Dr Sarah Rodriguez, , Dr. Lusobya Rebecca, Dept. of Opthalmology with others

Ms. Anna Creery, International Learning & Partnership manager Shulich School of Medicine and Dentistry, Western University Canada (extreme left), Dr, Susanne Schmid, Vice Dean, School of Medicine & Dentistry, Western University (left), Dr. Annet Kuteesa, Dean, School of Dentistri, MakCHS, Ms. Susan Byekwaso, Coordinator, International Coordination Office, MakCHS and Dr. Samantha Kachwinya

Photo moment at the School of Dentistry, MakCHS

Prof. Thiha Aung, Head of the Institutie for Medical Science & Engineering at Deggendorf Institute of Technology, (middle) with Prof. Bruce Kirenga ,Principal, MakCHS (left), and Prof. Idro Richard (right) during the 76th Graduation ceremony at Makerere University

Outreach Report: Uganda Martyrs College Sonde Date: 19 March

Makerere University College of Health Sciences (MakCHS) International Coordination Office facilitated a vibrant cross-cultural outreach at Uganda Martyrs College Sonde. The activity brought together a joint team of MakCHS medical students' leaders, Mr. Senyonga Peter and Mr. Richard Ategeka alongside the International Office Assistant Coordinator, Mr. Alex Kisakye, in partnership with visiting students from Uppsala University under the Programme in Global Medicine.

The half-day engagement delivered interactive adolescent health education, practical career guidance, and a hands-on tour of the school's competency-based curriculum projects. The visit fostered mutual learning and exemplified equitable partnership: Ugandan students shared contextual and clinical insights, while the Swedish team contributed global perspectives. Students—particularly Senior Six candidates—participated actively, transforming the session into a dynamic exchange rather than a one-way lecture.

HEALTH EDUCATION SESSIONS: KEEPING SCIENCE SOLID BUT RELATABLE

The outreach commenced with engaging, student-friendly sessions on puberty and menstrual health. Facilitators explained puberty as a natural developmental transition driven by hormones such as testosterone and estrogen, highlighting physical, emotional, and psychosocial changes. Common experiences such as acne, sweating, mood fluctuations, and increasing independence were discussed, with emphasis on self-awareness, respect, and individual variation in development.

The menstrual health session provided deeper insights into the menstrual cycle, including its physiology, phases, and practical management. Topics covered included normal patterns of menstruation, premenstrual syndrome (PMS), pain management strategies, and hygiene practices such as the use of clean sanitary materials, regular changing, and appropriate personal hygiene.

Importantly, the team addressed and dispelled common myths—clarifying that menstrual blood is not "dirty," that physical activity can help reduce cramps, and that pregnancy can still occur during menstruation. Basic sexual and reproductive health information was also shared, including prevention of sexually transmitted infections (STIs) through abstinence or consistent condom use, and distinctions between treatable and chronic infections such as HIV.

Students asked thoughtful questions ranging from managing menstrual discomfort in school settings to identifying warning signs requiring medical attention.

Career Guidance: Equipping Students for the Next Step

The programme transitioned into a career guidance session tailored for UACE candidates. Students were encouraged to pursue subjects aligned with their interests and strengths, with facilitators emphasizing that passion and commitment are key drivers of academic success and career fulfilment.

Personal experiences shared by the facilitators highlighted pathways to higher education, including opportunities at Makerere University. The session also addressed Uganda's aligned A-Level curriculum introduced in February 2025, with discussion on grading systems, continuous assessment, and the increasing role of project-based learning. Facilitators emphasized the importance of clear and consistent guidance from teachers regarding admission requirements and weighting systems.

School Tour: Experiential Learning in Action.

The outreach concluded with a guided tour of the school, showcasing the practical implementation of the competency-based curriculum. Students demonstrated active engagement in hands-on projects including animal husbandry (kraals), aquaculture (fishponds), and school gardening initiatives.

These projects illustrated the shift from theory-based learning toward skills development in agriculture, entrepreneurship, and environmental management. Observing students take ownership of these initiatives underscored the value of experiential learning in preparing learners for both higher education and real-world challenges.

The outreach delivered significant value across multiple dimensions; secondary school students gained accurate health knowledge, debunked misconceptions, and received timely career guidance at a critical academic stage, Interactive engagement fostered openness around sensitive topics, enhancing learning outcomes, Uppsala University students gained practical insights into education systems in Uganda. MakCHS participants strengthened competencies in community engagement, leadership, and cross-cultural collaboration.
Mr. Senyonga Peter

A Global Health Experience at Makerere University College of Health Science - An Outsider's View into The Brilliance of The National Referral Hospital, Mulago

I arrived in Kampala in January 2025 as a fourth-year medical student from Ross University School of Medicine through the NUVANCE Global Health Program. As someone born and raised in Cameroon, I arrived with a sense of cultural familiarity, yet nothing fully prepared me for the clinical intensity I encountered at Makerere University College of Health Sciences. My rotation lasted through February 2025, but its impact has extended far beyond those weeks.

Since completing that experience, I have returned to Uganda two more times to work on projects aimed at improving access to care, a testament to how deeply that month shaped me. From my first ward round, I was struck by a teaching environment defined by disciplined resourcefulness. In the Internal Medicine wards, pathology was advanced and resources were limited, yet clinical reasoning was sacred. Without rapid laboratory panels or immediate imaging, we lived in the depths of history taking, physical examination, and pathophysiology. Every differential diagnosis required a defence. Every treatment plan demanded a clear articulation of why. It was medicine stripped to its skeletal core, demanding, thoughtful, and deeply human.

In the cardiology ward, a large proportion of our patients suffered from chronic heart failure secondary to rheumatic heart disease, often complicated by cardio hepatic/cardio renal syndrome. Managing them required nuance. We walked a narrow therapeutic tightrope, carefully diuresing to relieve congestion while judiciously administering fluids to preserve preload and maintain a fragile ejection fraction. Each decision required recalibration, listening for crackles, assessing jugular venous pressure, monitoring urine output, and tracking renal function. Push too aggressively and the kidneys fail. Hesitate too long and the lungs flooded. These daily decisions were intellectually and clinically exhilarating yet humbling. They were masterclasses in hemodynamic and clinical judgment.

Procedural experiences reinforced these fundamentals. Under physician supervision, I performed bedside paracentesis without ultrasound guidance, relying on anatomical landmarks and tactile feedback. In high-resource settings, imaging assistance is standard. Here, precision depended on preparation and anatomical mastery. What some might call limitation became a demand for excellence. Those procedures sharpened my skills and strengthened my confidence. Technology can augment care, but it must never replace the clinician's judgment.

Not all lessons were academic. In the Medical Emergency Department at Mulago, a 32-year-old man, a street vendor from a Regional Referral Hospital sat trapped in unbearable abdominal pain. He had endured a three-hundred-kilometre journey across Uganda, hoping the National Referral Hospital would provide the relief his local centre could not. Instead, he encountered delay. He was profoundly jaundiced, the palms of his hands and soles of his feet stained a waxy yellow from a failing liver. His family stood over him, exhausted from travel and clinging to hope. With suspected metastatic GI cancer and a perforated viscus, he waited several hours for basic analgesia because a registration number remained unprocessed in a very crowded ED. I spent an hour advocating to expedite paperwork so his family could purchase the most affordable pain medication from a private pharmacy.

In many Western hospitals, intravenous opioids and a surgical consultation would have arrived within minutes. At Mulago, operational constraints and maybe shortage in human resources contributed to delay in care. Watching him endure that pain forced me to confront inequity not as theory but as lived reality. It crystallized a question that now anchors my career: why do systems designed to save lives so often delay the simplest mercy? The challenges were constant, from limited diagnostics, to system constraints, and the sheer burden of late-stage dis-

eases. This is to be expected because Mulago is the place where all the most challenging cases in the country converge. I coped by leaning into preparation and humility, learning from the expertise of my Ugandan colleagues, and grounding myself in the shared mission of service. The experience shifted my identity from observer to advocate. I learned to act decisively with incomplete information (because waiting was often counterproductive) and to remain compassionate within a strained system.

Despite these hardships, one of the most inspiring aspects of Makerere University College of Health Sciences is its expansive network of global partnerships with leading medical institutions across North America, Europe, and Africa. These collaborations are reciprocal and dynamic. Faculty exchanges, joint research initiatives, and global health electives create a vibrant ecosystem of shared learning. MakCHS does not simply receive knowledge. It offers critical expertise in infectious disease, community-based care, and the management of advanced pathologies that many high-income systems rarely encounter. True global health, I learned, must be built on mutual respect and shared accountability.

Through my colleagues, I witnessed the staggering burden of tuberculosis in Uganda. Tuberculosis was not a statistic on a slide. It filled beds and reshaped families. That exposure has since influenced my ongoing work to help position Makerere University College of Health Sciences as a key clinical trial site in a global study evaluating novel approaches to tuberculosis management in resource-limited settings. Sustainable progress requires strong local institutions, and MakCHS stands firmly among them. Perhaps the most profound personal moment came a year later when I attended the MakCHS commencement ceremony. Watching my colleagues, with whom I had rounded and struggled, take the Hippocratic Oath as newly minted medical doctors was deeply moving. I had seen their resilience, their long hours, and their emotional endurance. Standing in that audience, I felt immense pride and unwavering confidence that the future of Ugandan healthcare is in capable and compassionate hands.

I arrived in Kampala as a visiting student. I left as a committed partner. I continue to return because the relationships and the mission endure. Within the crowded wards of Internal Medicine at Mulago, I encountered medicine in its rawest form: brilliant, constrained, heartbreaking, and hopeful all at once. That tension continues to shape the physician I am becoming and the systems I aspire to improve.

Benison Forfeke, MD, JD

Dr. Mbuga Ivan and Dr. Benson Forkeke sharing a photo moment during the graduation ceremony

Coming back to MakCHS, experience in Pediatric Surgery

I first came in July 2025 as one of the 18 visiting medical students from University of Brescia, Italy. During my rotations at the main teaching hospital Mulago, developed an argue to come back alone, the opportunity came in February 2026; My experience as a visiting doctor in paediatric surgery at Mulago National Referral Hospital has been truly unforgettable, both professionally and personally. From my very first day, the fellows welcomed me with such warmth and openness that I immediately felt at home. What could have been just an observer ship quickly turned into a genuine sense of being part of the team—shari responsibilities, learning side by side, and supporting each other in the daily challenges of the ward and the operating theatre.

Working closely with the fellows was one of the most meaningful aspects of my time there. Their willingness to teach, involve me, and trust me made a huge difference in my experience. Beyond their clinical skills, I was deeply struck by their resilience, positivity, and dedication to their patients despite the difficulties they face every day. I was also deeply impressed by the teamwork across specialties. Working alongside the attending surgeons and the anaesthesia team showed me how much can be achieved through collaboration, trust, and clear communication. At the same time, I learned the importance of doing everything possible for each child with the resources available—being creative, flexible, and always focused on providing the best care possible despite limitations.

What I will carry with me the most, though, are the people. The kindness, the shared moments during long days, the support, and even the small everyday interactions made this experience incredibly meaningful. I didn't just learn—I felt welcomed, valued, and part of something real. That is what made this time so special for me.

Dr. Chiara Sonzogni (middle) with Dr. John Baptist Ssendowa (left) and Dr. Joshua Moro (right) at Mulago Hospital

One case that has stayed with me more than any other is Lilian's. She was a young girl with a one-month history of intussusception, already admitted to the ward on my very first day. From the beginning, her condition reflected the complexity of managing advanced disease in a fragile context. After we performed surgery and created a stoma, she was transferred to the malnutrition unit, where she spent a month undergoing nutritional rehabilitation. When she returned, she presented again with signs of intestinal obstruction. In the operating theatre, we found a recurrent intussusception. Given her nutritional status, we made the difficult decision not to perform an anastomosis, but to create another stoma—choosing what we felt was the safest option for her at that moment. I remember very clearly the feeling I had two days later during the ward round, when we saw that she had developed an enterocutaneous fistula. From a medical perspective, I understood what that could mean and how things would likely evolve. But nothing prepared me for what came next.

The following day, I came back to the ward and saw her bed empty. Her mother was sitting nearby, staring into space, and her father spoke to us with a calmness that was almost disarming. He thanked us for everything we had done, encouraged us to continue our work, and said that perhaps all of this was part of God's plan. That moment is something no textbook can teach you. It reminded me, in the most profound way, that medicine is not only about knowledge and decisions, but about humanity, humility, and being present in the face of things we cannot change.

Dr. Chiara Sonzogni, University of Milan Italy

Integration of international scholars in MakCHS culture: welcoming the world to Uganda

For three years, I've been a student buddy at Global Friends, MakCHS's program for orienting and culturally immersing international students. The first questions are always the same: "Is it safe to take a boda boda?" "How do I greet in Luganda?" They come within the first hour, laced with curiosity and hesitation. By week's end, those same students are negotiating boda prices in Luganda and telling stories that start with, "You won't believe what happened on the way to Mulago…" That shift from uncertainty to confidence is the quiet magic of this role.

Being a student buddy has taught me things no lecture ever examined: how to communicate across cultures without losing meaning, how to lead without imposing, how to make someone feel at home somewhere entirely unfamiliar. The lessons often come from small moments—sharing a meal, explaining why we eat what we eat, translating a joke that loses something in the process, watching someone try their first Rolex and immediately want another. These simple interactions are often where the real connection happens.

Beyond the social side, I help integrate students into MakCHS's academic life—walking them onto a crowded ward for the first time and watching discomfort turn into engagement, then weeks later seeing them confidently present a case, fully immersed in what once felt foreign. This role isn't just logistics; it's transformation.

My work begins where Google Maps and orientation booklets stop. I meet students at the intersection of cultures, expectations, and lived realities—through lecture rooms, hospital wards, cafeterias, and the unspoken rules of navigating them. I answer the questions they ask, and the ones they don't. Coming to Uganda for a global health rotation isn't just academic; it's an emotional and cultural leap.

I've watched students arrive with tidy expectations of healthcare systems, then encounter the resource-limited but deeply resilient reality of Mulago Hospital. The patient load, the improvisation, the pace—it can overwhelm at first. But slowly they start seeing not just the gaps, but the ingenuity; not just the challenges, but the strength of a system held together by commitment and adaptability. In that process, I learn as much as they do.

By the end of their rotation, the change is unmistakable—the nervous student at the gate becomes someone who knows the campus shortcuts, greets staff with ease, and understands, not just intellectually but personally, what global health really means.

Then comes the goodbye—never just a farewell, but an acknowledgment of a shared journey. They leave with photos, stories, and a deeper appreciation of Uganda. I stay with new perspectives, new friendships, and the quiet satisfaction of having eased their transition.

Being a student buddy has been more than a volunteer role—it's been a continuous lesson in empathy, adaptability, and connection. It's shown me that medicine doesn't live only in textbooks or hospital walls, but in conversations, shared experience, and the willingness to understand one another across borders.

Kenneth Tuyisenge(middle) with visiting students from Sweden

If this journey has taught me anything, it's that meaningful impact rarely comes from grand gestures—it comes from meeting someone where they are, and walking with them until they find their footing.

Kenneth Tuyisenge ~ 2026

A Season of Growth: Lessons Beyond the Hospital Walls

My exchange rotation at Ann & Robert H. Lurie Children's Hospital of Chicago one of the teaching hospitals for Northwestern University marked the beginning of a season I will carry with me for a long time—a season defined by learning, challenge, and profound growth.

From the very beginning, the academic environment was both impressive and humbling. Standing before a 23-story building dedicated entirely to children's healthcare was breathtaking. It was more than just a structure—it represented possibility, innovation, and a level of commitment to pediatric care that deeply inspired me. Coming from Makerere University in Uganda, I knew I was stepping into a system that would stretch my perspective in new ways The days began quite early, with a sense of purpose that carried through until evening, motivated healthcare workers showing up not just as an obligation but with enthusiasm to see their patients get better in all aspects, to talk with their patients and offer the best care they could possibly extend, quite impressive.

A photo of Rhina Thatcher(middle) with Dr. Laura Veron (left) & Dr.Pooja Shah(right) at Lurie Children's Hospital

Patients and caretakers actively involved in their care, asking every detail of what's happening in the process with very empathetic doctors responding with patience and clarity, breaking down complex concepts and explaining them like ABCs, what an inspiration and lessons to carry with me in this practice of medicine. As an exchange student stepping into a new healthcare system, the experience was, at times, overwhelming—but in the best possible way.

Every day brought new systems to understand, new standards to observe, and new lessons to absorb. What initially felt unfamiliar quickly became motivating, pushing me to grow both academically and professionally.

Well, the experience was not just in the hospital, it extended beyond; Chicago introduced me to a completely different environment—fast-paced,progressive, and deeply work-oriented. With the worst winter the city had had in the last 12years, oh to be parof history. Wind that passed through your bones and froze your fingers to red solid; more like the size of big sausages. But all that was worth the experience, and besides, the people in the city

were so nice and loving which radiated warmth amidst the crazy coldness.
This experience became more than an academic rotation. It became a reminder that medicine is not only about knowledge and systems, but also about people about compassion, respect, and the willingness to show kindness in every interaction.

Clinical and cultural exchange experience at Yale University: January 5–30, 2026

The Makerere University–Yale University (MUYU) partnership, established in 2006, continues to provide transformative opportunities for medical students, residents, and faculty through reciprocal academic and clinical exchanges. As part of the 46th cohort of the MUYU program, I undertook a four-week clinical rotation at Yale University School of Medicine and Yale New Haven Hospital (YNHH) from January 5–30, 2026. Supported by Makerere University College of Health Sciences, Yale University's Office of Global Health, and partner organizations, the exchange provided a unique opportunity to experience a highly specialized healthcare system while enhancing clinical knowledge, professional skills, and cultural awareness.

Academic and Clinical Experience

The clinical attachment to the Klatskin Liver Service provided exposure to the management of complex liver diseases, including decompensated cirrhosis, portal hypertension, autoimmune liver disease, and liver transplantation assessment. One of the most striking observations was the highly coordinated multidisciplinary approach to patient care. "Healthcare teams consisted of attending physicians, fellows, residents, nurses, pharmacists, social workers, nutritionists, physiotherapists, and transplant coordinators, all contributing actively to patient management. This collaborative model ensured comprehensive care and highlighted the value of teamwork in achieving optimal patient outcomes."

Nandera Ketra (left) and Ivaan Pitua at Yale University

Daily ward rounds were structured, interactive, and strongly grounded in evidence-based medicine. Extensive use of the EPIC electronic medical record system, advanced imaging technologies, and comprehensive laboratory diagnostics facilitated informed clinical decision-making and continuity of care.

Patient-centered care was a defining feature of the healthcare environment. Patients were actively involved in decision-making, and family engagement was strongly encouraged. Interpreter services were readily available to overcome language barriers, ensuring equitable access to healthcare regardless of linguistic background. The experience also highlighted important differences between healthcare systems in Uganda and the United States. This observation reinforced the importance of advocating for improved healthcare access and affordability.

Cultural Experience, Lessons Learned and Recommendations

Beyond the hospital setting, the exchange provided rich cultural exposure. Experiencing winter and snowfall for the first time required significant adaptation and offered valuable insights into life in a different environment. Visits to Boston, Harvard University, the Massachusetts Institute of Technology (MIT), New York City, and several cultural landmarks broadened my understanding of American society, higher education, and innovation ecosystems.

Living in New Haven and interacting with students and professionals from diverse backgrounds fostered intercultural competence and personal growth. Conversations with international students, researchers, and MD-PhD trainees challenged conventional perceptions of career progression and emphasized the importance of perseverance, lifelong learning, and global citizenship.

Several important lessons emerged from this experience. First, structured multidisciplinary teamwork significantly improves patient outcomes and should be strengthened within Ugandan healthcare settings. Second, investment in electronic medical record systems could enhance continuity of care and patient safety. Third, simulation-based medical education offers an effective platform for improving clinical preparedness and should be expanded within health professional training institutions. Fourth, deliberate mentorship and constructive feedback play a critical role in learner development and professional growth. Finally, adaptability and cultural competence are essential skills for healthcare professionals working in increasingly interconnected global environments.

Ivaan Pitua, MBChB V
Makerere University
College of Health Sciences

Knowledge transfer, Dr. Oscar Ogwang presented at an international conference

In support of knowledge dissemination and academic collaboration, Dr. Oscar Ogwang, a graduate student in Department of Surgery, MakCHS presented at an international conference, engaging with researchers and practitioners from around the world. The 2026 Society of American Gastrointestinal and Endoscopic Surgeons (SAGES) Annual Meeting was held from March 25–28, 2026, at the Tampa Convention Center in Tampa, Florida, USA. The conference, themed "Connect to Purpose," brought together surgeons, researchers, educators, and industry leaders from around the world to explore advances in minimally invasive surgery and endoscopic practice.

The meeting featured a comprehensive scientific program covering emerging areas such as digital surgery, artificial intelligence, robotic-assisted procedures, surgical education, innovation, and global surgical collaboration. Through plenary sessions, panel discussions, hands-on workshops, and scientific presentations, participants exchanged knowledge on cutting-edge technologies and best practices aimed at improving surgical outcomes and patient care.

The conference also provided valuable opportunities for networking, professional development, and international collaboration, reinforcing SAGES' commitment to advancing surgical excellence, innovation, and equitable access to high-quality surgical care worldwide.

A photo moment of Dr. Oscar Ogwang and Professor Sherif G. Emil during the International Conference

Familiarisation planning visit to University of Cattolica del Sacro Cuore, Rome, Italy

In 2024, Makerere University College of Health Sciences (MakCHS) and Università Cattolica del Sacro Cuore established a formal academic partnership through the signing of a Memorandum of Understanding (MoU). The partnership was subsequently strengthened through a jointly secured European Union Erasmus+ mobility grant aimed at promoting academic exchange, research collaboration, clinical training, and internationalization of medical education. As part of the implementation of the Erasmus+ project, a MakCHS delegation led by Prof. Richard Idro Deputy Principal visited Rome from 4th –8th May 2026. Deputy Principal was joined by Prof. Mark KadduMukasa, Deputy Dean School of Medicine and Ms. Susan Nassaka Byekwaso, Coordinator of International Programmes. The main purpose of the visit was to operationalize the Erasmus+ partnership, strengthen institutional collaboration, explore student and faculty mobility opportunities, discuss academic credit recognition, and launch joint academic activities.

Overview of Università Cattolica del Sacro Cuore is a world-class educational hub primarily dedicated to the health, medical sciences, and economic disciplines. It is the largest private university in Europe, operating across five distinct teaching campuses in Italy; MakCHS team visited campus is located in Rome, Italy. The campus integrates academic learning with hands-on professional application through its two principal faculties: Faculty of Economics: Focuses on management, healthcare administration, and the economic landscape of the socio-sanitary sector and School of Medicine and Surgery rerenowned globally for its rigorous medical education and the school also offers dual-degree pathways with Thomas Jefferson University in Philadelphia. The delegation toured the university's principal teaching facility, Agostino Gemelli University Hospital, a 1,500-bed tertiary hospital serving as one of Italy's leading academic medical centres. The hospital houses several specialized institutes, including the Gemelli Advanced Radiation Therapy Centre, the Digestive Disease Centre (CEMAD), and the Centre for Aging Medicine (CeMI), providing advanced clinical care, research, and training opportunities

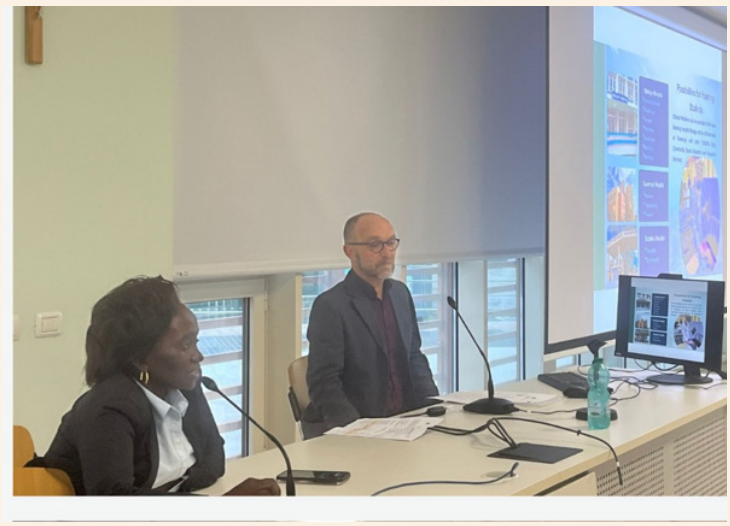
A delegation from Makere University College of Health Sciences during their visit to University of Cattolica del Sacro Cuore, Rome, Italy

Erasmus+ Program Focus Session and Kick-Off Meeting

A major highlight of the visit was the official UCSC–MakCHS Erasmus+ Kick-off Meeting held at Sala Italia, Centro Congressi on the 6th May 2026. The meeting brought together Faculty leadership, international office representatives, medical students., Residents and Erasmus+ coordinators.

Opening remarks were delivered by Prof. Wanda Lattanzi – International Coordinator of the Medical School and Dr. Aldo Balzarotti – International Office representative The speakers emphasized the importance of International academic mobility, South–North institutional collaboration, Intercultural learning and sstrengthening global health education.

Project Introduction "The Erasmus+ academic mobility project" was presented by Prof. Carlo Torti – Project Coordinator Dr. Riccardo Serraino – Erasmus Project Representative who have visited and worked with MakCHS for a long time. The presentation highlighted Erasmus+ mobility opportunities, Student and faculty exchange pathways, aadministrative frameworks and Academic expectations and reporting requirements.



Mr. Aldo Balzarotti (right) and Mrs. Susan Byekwaso presenting to students

The Makerere delegation delivered institutional presentations highlighting Makerere University's role in regional medical education, research strengths, conducive cclinical training environment, international partnerships and oopportunities for Italian students and faculty in Uganda.

Academic Presentations and Knowledge Exchange

A key component of the visit involved academic engagement with students and faculty. During a seminar for third-year medical students studying infectious diseases, Prof. Mark Kaddu-Mukasa delivered a presentation entitled "HIV/AIDS in Africa: The Other Side of the Moon," highlighting the burden of HIV/AIDS in sub-Saharan Africa, health system realities in Uganda, and the role of international partnerships in addressing infectious diseases.

Prof. Kaddu Mukasa Mark delivering a presentation about HIV/AIDS

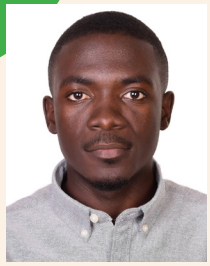
Additional lectures delivered by the MakCHS delegation included:

"Malaria: Clinical Insights, Prevention and Resistance from Uganda" by Prof. Mark Kaddu-Mukasa, which examined Uganda's malaria burden, prevention strategies, resistance challenges, and lessons from clinical practice.

"Understanding Nodding Syndrome in the Context of Neurological Complications of Infectious Diseases" by Prof. Richard Idro, which explored the epidemiology, clinical manifestations, and ongoing research related to nodding syndrome and other neurological disorders linked to infectious diseases. These presentations stimulated productive discussions on tropical medicine, infectious diseases, and global health research.

Prof. Idro Richard, and Prof. Mark KadduMukasa presenting a lecture about malaria to the resident students

Prof. Richard Idro, (left), Luigi, Prof. Carlo Torti, Aldo, Luigi (Extreme right) , Susan Byekwaso and Prof. Mark KadduMukasa during a meal time



Contemporary Challenges in Academic Mobility

Academic mobility has long been seen and celebrated as the driving force of global knowledge exchange. Yet, in 2026 the terrain is more complex than ever before. Visa restrictions, political wars, global health crises, institutional funding cuts and the shifting priorities that are reshaping how students, academics, administrators and researchers move across borders. What once seemed like a straightforward journey of intellectual pursuit now resembles a negotiation with geopolitics, economics, global health challenges and institutional willpower.

Across Africa, America, Europe and Asia, students, academicians, administrators and researchers are finding themselves caught between global academic aspirations and restrictions. The United States which is still a magnet for many global talents has complicated its visa landscape with pauses in processing for dozens of nationalities across Africa and the introduction of visa bonds that can range from $5000 to $15,000. For an ordinary Ugandan scholar, such requirements are not simply bureaucratic hurdles but barriers that change dreams into deferred and vivid ambitions.

Meanwhile, political wars continue to ripple through academic exchange. The Russian invasion of Ukraine disrupted partnerships across Europe thereby forcing universities in that region to change from revenue driven internationalization to solidarity driven support (Tamtik & Felder, How Geopolitics Shapes Higher Education Internationalization: Institutional Responses to the Russian Invasion of Ukraine, 2024) and now the USA and Iran with possible similar effects. German institutions now offer scholarships to displaced scholars, reframing mobility as an act of responsibility rather than internationalization and commerce (Tamtik & Felder, How Geopolitics Shapes Higher Education Internationalization: Institutional Responses to the Russian Invasion of Ukraine, 2024). In Africa, notable cases of instabilities in DRC, Somalia, Sudan and the Sahel region reduce both inbound outbound opportunities within those regions. These conflicts remind us that academic mobility is never insulated from geopolitics but it is deeply interconnected with the broader trends and changes in global security. As part of these realities, Makerere University College of Health Sciences (MakCHS) estimates to host over 300 short term scholars yearly although in 2025, it hosted less than 200 scholars due a number of global events.

When it comes to Global Health crises, these demonstrate that academic mobility is not indispensable. As the world continues to recover from the COVID-19 pandemic that put the globe to a standstill and its lasting effects, Uganda has faced recurring Ebola outbreaks. The nation has proven its expertise in managing such public health emergencies yet these events have attracted intense local and international media attention, often times followed by travel advisories which have been widely contested and viewed as unfair by many people in different sectors. At MakCHS, the impact was immediate and within two weeks of the announcement in May 2026, more than 50 expected international scholars cancelled their planned electives and 46 in 2025 cancelled. Ironically, one would have thought of it as a rare opportunity for a future health professional to have firsthand observation of the crisis management.

Studies reinforce this picture of disruption and adaptation in academic mobility. The 2025 Open Doors report shows that demand for international education and mobility remains strong globally, but affordability and policy changes are reshaping destination choices (Institute of International Education, 2025). BONARD's 2025 review identifies a structural reset in student mobility, driven by rising costs and shifting institutional priorities (BONARD Education, 2025). The European Commission performance report highlights the resilience and growth of the Erasmus+ programs yet it shows the need for greater inclusivity to support students from conflict affected regions and other low-income countries (European Commision, 2025) . Together, these findings suggest that while institutions are adapting, the challenges are impactful and still very systemic.

Institutions of higher learning themselves face difficult choices. Many of African Universities lack structured funding for outbound scholars, leaving students dependent on external scholarships. Rising administrative and living costs abroad are also reshaping priorities whereby regional exchanges and other south to south global and hybrid models of mobility programs are gaining traction. East African universities are experimenting with regional

exchange networks, allowing students to gain international exposure without crossing continents. Academic mobility in these contemporary times is a continuous negotiation and not a straightforward journey. It demands resilient strategies, inclusive policies, innovative partnerships and great institutional administrative support for bidirectional programs. Institutions now should not only respond to crises but also anticipate them. The future of impactful academic mobility programs will depend on whether universities can balance ambition with pragmatism and whether nations across the globe can also recognize that the free movement of scholars is not a privilege but a necessity for global progress and cross border learning.

Alex Kisakye

References

BONARD Education. (2025). Global ELT Annual Report 2025. Vienna, Austria: BONARD Education. Retrieved from https://www.bonardeducation.com/insights/global-elt-annual-report-2025

European Commision. (2025). Erasmus+ - Performance. European Union. Retrieved from https://commission.europa.eu/strategy-and-policy/eu-budget/performance-and-reporting/programme-performance-statements/erasmus-performance_en

Institute of International Education. (2025). Open Doors Report on International Education Exchange. Washington DC: Institute of International Education. Retrieved from https://opendoorsdata.org/wp-content/uploads/2025/11/OpenDoors25_PresentationPDF.pdf

Tamtik, M., & Felder, J. A. (2024). How Geopolitics Shapes Higher Education Internationalization: Institutional Responses to the Russian Invasion of Ukraine. Journal of Comparative & International Higher Education. Retrieved from https://files.eric.ed.gov/fulltext/EJ1436851.pdf

Nabukalu.T.Deborah, Gimbo Lewinsky, Tayebwa Caroline & Senyonga Peter at University of Magna Graecia in Italy

Nabbosa Rhina Thatcher at Northwestern University, USA

Students from Bergen University enjoying a rugby game.

Nabukalu.T.Deborah, Gimbo Lewinsky & Tayebwa Caroline at University of Magna Graecia in Italy

Catherine Pham from the University of Washington, USA enjoying Uganda

Students from Bergen University enjoying a rugby game.

Fahima Mohamud, Lydia Mokaya & Myhanh Nguyen from Ross University, USA

Students from Uppsala University undertaking a Global Medicine course during a community outreach at Sonde

Students from Karolinska Institutet undertaking a Global Surgery course with student buddies at the College of Health Sciences

Long lasting memories

Thank you for reading.....