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# Vision: Palliative care for all in need in Africa

# Mission: To bring peace to the suffering of Africa through providing affordable and accessible palliative care in Uganda and other African countries

HAU is driven by its ethos and accompanying values. The core values of Hospice Africa Uganda are as follows:



**Patient Centered Approach:** The patient and family are at the centre of our care.



**Teamwork:** The patient is cared for by an interdisciplinary team.



**Partnership:** We network and collaborate with other individuals and organisations to maximise quality care for our patients and families.



Hospitality: We treat our patients as our guests.



**Professionalism with Integrity:** Striving for the best practice always, attending to details of care, ensuring confidentiality.



**Choice:** Preserving patient autonomy and dignity.



**Volunteerism:** Welcoming and recognising the unique contribution of volunteers sharing a diversity of skills to help achieve our goals.

# **Executive Summary**

This was another busy year for Hospice Africa Uganda (HAU), during which we proudly delivered compassionate care to **2,136** patients, bringing the total number of individuals supported by our teams since our inception in **1993** to **39,068**. Of this year's patients, 1,116 were newly enrolled in our Palliative Care programme.

Patients received comprehensive care in their homes, hospitals and via telephone consultations. Monthly daycare sessions were held at our three sites to support patients, and we continued to provide informal urban settlement outreaches and roadside clinics. In addition, our Community Volunteer Workers played a vital role in identifying and referring patients in need of care.

HAU's holistic care approach integrates physical, psychosocial, and spiritual support. The Patient Support Fund provides assistance to the most economically disadvantaged individuals, while the Give A Chance programme supports orphans and vulnerable children to remain in school. Through the Road to Care programme 423 women received access to cervical cancer screening, diagnostic investigations, and specialized treatment at the Cancer Institute.

Our clinics also serve as centers for hands-on learning and bedside teaching for healthcare workers from across Africa who are enrolled in palliative care courses at the Institute of Hospice and Palliative Care in Africa (IHPCA). Affiliated with Makerere University and accredited by the National Council for Higher Education (UNCHE). The IHPCA graduated 33 students this year. A highlight of the year was the graduation of the first Master's in Palliative Care class.

The International Programmes team conducted two online Palliative Care Initiators courses—one in English and one in French. The Anglophone e-Learning course attracted 38 participants while the Francophone attracted 43, and a total of 10 and 19 health professionals travelled to Uganda for practical placements of the respective courses. Additionally, the team provided advocacy, training, and fundraising support through visits to 5 African countries.

Oral liquid morphine, a cornerstone of palliative care, has been successfully manufactured by HAU without interruption for 31 years. Our public-private partnership with the Government of Uganda and the National Medical Stores ensures patients throughout the country have reliable access to morphine for pain management.



HAU founder Dr Anne Merriman pictured with this year's Francophone class

# A Message from our Founder



As we reflect on the past year, I am deeply heartened by the unwavering dedication of our hospice teams who have supported hundreds of critically ill people in need. Each life touched represents a testament to the compassion of our teams, and the resilience of Hospice Africa Uganda (HAU) which has stood as a beacon of hope for more than three decades, often in challenging times.

While this year we celebrated our 30th anniversary, and the enormous strides we have made over three decades, we cannot ignore the stark reality that countless Ugandans still lack access to palliative care. Many patients that come to us have been turned away from other health services because the patient did not have enough money, or a bribe was requested from a health worker. This is wrong. Instead

of the bureaucratic demands that many of the health services have on employees and patients, there needs to be a change. It is my prayer that hospitals take on the financial burden of health care, and that the burden does not fall on the patients.

At the heart of HAU is our ethos—a guiding principle that has been our foundation stone. This ethos says the patient and their family must always be at the centre of everything we do. This extends to caring for one another within our teams, and fostering strong collaborations with partner organisations. It is this spirit of care and unity that drives us forward and sustains our mission. This ethos must always remain at the centre of what we do.

One of my greatest inspirations has been from my initial mentor, Dame Cicely Saunders, the Founder of the modern hospice movement. Her words resonate deeply with the work we do: "You matter because you are you. You matter to the last moment of your life, and we will do all we can, not only to help you die peacefully, but also to live until you die."

As we continue this journey together, let us hold tightly to these words and ensure they guide our every action. Let us remain steadfast in our commitment to providing compassionate, holistic care, and let us work tirelessly to create a future where every Ugandan can access the palliative care they need.

With gratitude and hope, Professor Dr. Anne Merriman Founder, Hospice Africa Uganda

# A Message from our Patron



This past year has been truly special for Hospice Africa Uganda (HAU) as we celebrated its 30th anniversary and three decades of dedicated care for critically ill patients. I was deeply honoured to celebrate this milestone in September alongside the HAU team, patients, donors, volunteers, and, of course, Dr. Anne Merriman, HAU's inspirational founder.

The impact of Hospice Africa Uganda's compassionate work is profound. The skilled and caring Hospice team, especially its dedicated nurses, brings comfort and peace to patients facing pain and challenging circumstances, as well as their families. Through HAU's holistic approach, hope is offered to those who need it most. Despite financial challenges, I am encouraged by the commitment shown by HAU in caring for 1,116 new patients this past financial year across its

three sites in Makindye, Hoima, and Mbarara, and in reaching 1,651 patients through its outreach clinics. These clinics are vital, bringing care to communities where people might otherwise face illness alone.

While we mourn the loss of 638 patients this year, I find comfort in knowing that, thanks to HAU's support, these individuals spent their final days in peace, surrounded by compassionate care.

HAU's influence extends beyond Uganda's borders, as it shares its expertise in palliative care with healthcare professionals across Africa through the Institute of Hospice and Palliative Care in Africa (IHPCA). This year we celebrate a milestone with the graduation of the first cohort from the Institute's Master's Degree Programme.

I extend my heartfelt gratitude to the entire HAU team, Board of Directors and Management for their unwavering dedication, hard work, and compassionate service. A special acknowledgement goes to our generous donors and volunteers, whose support makes this mission possible.

As Patron, I remain committed to supporting HAU's vital mission and I look forward to all that we will accomplish together in the coming year.

With deep gratitude and admiration,

**HRH Sylvia Nagginda** 

Nnaabagereka of Buganda Kingdom and Patron Hospice Africa Uganda

# A Message from our Board Chair



One morning, as I travelled to the Hospice Africa Uganda headquarters in Makindye for a meeting, we passed a staff member who was making her way to work. The driver recognised her, and we stopped and gave her a lift. I asked her how long it normally took her to get to HAU. She replied that it took about two hours. The same going home.

This illustrated to me how dedicated our caring team members are, many of whom travel long distances daily with unwavering commitment, always keeping the care and well-being of our patients at the forefront.

This year, despite financial challenges, and due to the hard work of our teams and continued support of our donors, I am glad that a total of 2,136 patients have been cared for across all the three HAU sites.

Of this figure 1,116 new patients were newly enrolled on our programme. In total since HAU started its work in 1993 it has reached just over 39,000 patients. Whilst HAU has experienced many highs and lows in its lifetime this year was special as we marked 31 years of service in Uganda and Africa.

A special landmark was the graduation of our first Masters Degree in Palliative Care class from the Institute of Hospice and Palliative Care in Africa (IHPCA). This achievement is significant as we work to spread palliative care knowledge and skills across the continent.

HAU continues to receive requests to visit patients far beyond our catchment boundary. This demonstrates that there are countless critically ill people in Uganda who remain unreached, and for whom palliative care is inaccessible.

Looking forward, HAU will continue to advocate for better palliative care services in Uganda so those people are helped. We will build on existing partnerships, forge new alliances, and will advance plans for our own sustainability, which will allow us to increase the number of patients we serve. There has been progress. Our expansion of outreach services in Kampala this year, now extending to two sites, has enabled us to care for patients in urgent need in desperately impoverished areas.

In December 2023, we said goodbye to board members DG Kenneth Mugisha, Mrs Theo Ntale, Mrs Dora Kiconco, Mr Henry Rugamba, and Pastor Nicholas Kasaija. We welcomed Dr Paddy Mugambe, Ms Jackie Katana, Ms Rose Kiwanuka, Counsel Richard Adubango and Fazal Mbaraka as new members of the board. Mrs Catherine Kobusinge was co-opted in October 2024. The new board is working hard to support and guide HAU. Their collective and individual involvement has played a significant role in enabling us to grow this year.

At the core of HAU is patient care. To all our donors and team members on the ground, we truly thank you. Your hard work, kindness and generosity enabled us to meet our income budget at Uganda shillings 3,763,390,279 and to meet all our commitments and obligations.

God bless you richly.
Joy Mirembe
Board chairperson
Hospice Africa Uganda

# A Message from our Executive Director



Warm greetings from the Hospice Africa Uganda (HAU) family as we reflect on a remarkable year in which we celebrated our 30th anniversary. This milestone has given us a chance to look back on how far we have come—from our humble beginnings with the first patient visit in the sitting room of a volunteer's house at Nsambya Hospital in 1993, to today, having touched the lives of over 39,000 critically ill patients.

Over these three decades, HAU has faced financial challenges and other hurdles. Yet our teams in Makindye, Hoima, and Mbarara have shown unwavering resilience and dedication, committed to our mission of making palliative care accessible to all who need it and easing the pain of those living with life-limiting conditions. The team has managed to press on, and as team leader I am gratified. I have

been reminded many times that in life there are no 'problems', only 'challenges'. Our vision remains clear, and our purpose strong.

At the heart of our mission are our highly skilled, compassionate palliative care nurses, who bring comfort and dignity to patients every day. But this work is truly a collective effort. I want to recognise the entire HAU team, from those in morphine production and education to our administrative staff, drivers, and maintenance teams. It is this spirit of collaboration that sustains our work and strengthens our impact.

This year, we bid farewell to Martha Rabwoni, our longest-serving nurse, after 29 years of extraordinary service. Martha was one of HAU's first nurses, and her gentle hands and warm heart have helped thousands of patients over the years. She always generously shared her experience with our clinical team, mentoring many along the way. We wish her a joyous and fulfilling retirement.

A key part of our mission is spreading palliative care throughout Africa, and our Institute of Hospice and Palliative Care in Africa (IHPCA) and International Programs are essential to this vision. This year, we proudly celebrated our first graduating Master's Degree class from IHPCA—a milestone that marks a new chapter in our journey.

Our work ahead is not without financial challenges, and we are deeply grateful to our donors for their continued generosity. Special thanks go to our partners at Hospice Africa UK, Hospice Africa Ireland, Hospice Africa France, and Hospice Africa USA for their steadfast support. We are also blessed with volunteers who give their time and skills to enhance our work every day. Looking to the future, I am filled with hope and gratitude. We remain committed to reaching even more people in need, ensuring that every individual can experience peace and dignity in their journey with us.

With heartfelt thanks and hope for the year ahead, Prossy Nakyanja Executive Director

# **Patient Care**

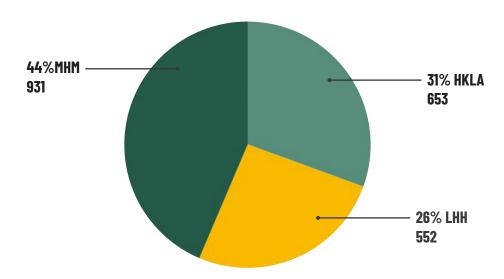
Hospice Africa Uganda (HAU) operates across three sites in Uganda. Its headquarters are located in Makindye, Kampala, which also serves as the base for the Institute of Palliative Care in Africa, the International Programmes, and the Morphine Production Unit. In addition to the Kampala headquarters (HKLA), HAU has clinical sites including Mobile Hospice Mbarara (MHM) in western Uganda and Little Hospice Hoima (LHH) in northwest Uganda.

With the patient at the heart of all we do, HAU is committed to supporting the critically ill and suffering by:

- Providing pain relief and holistic care for those dying or suffering from cancer and other life-limiting illnesses.
- Training and educating health professionals in affordable pain relief and palliative care across Uganda and other African countries.
- Building a coalition of organisations working in partnership in Uganda and across Africa to spread knowledge and encourage the adoption of palliative care.

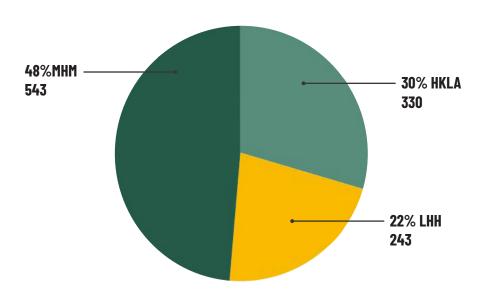
This financial year, HAU cared for a total of 2,136 patients across our three sites.

#### Number of patients cared for across our three HAU sites (MHM, HKLA & LHH)



The cumulative number of patients seen at HAU in all the three sites since inception in 1993 is 39,068 patients. There were 1,116 new patients enrolled on the programme across the 3 sites as below.

# Number of new patients seen at the 3 HAU sites (MHM, HKLA & LHH)



HAU received requests all through the year to visit patients who were very far beyond our catchment area, reflecting that there are countless patients who are in areas where there are no palliative care services. The HAU team liaised with PCAU and other service providers to ensure continuity of care.

#### **New Admissions at HAU**

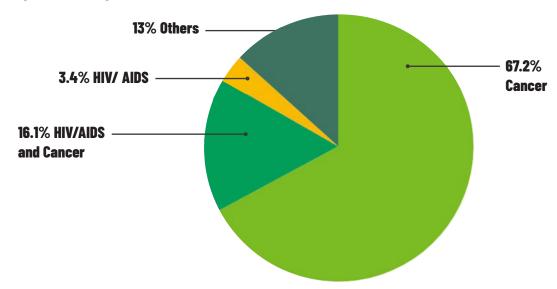
Of the 1,116 newly enrolled patients at the three HAU sites, 443 were male, 673 female and 162 (7.6%) were children (aged under 18 years).

### Profile of newly enrolled patients

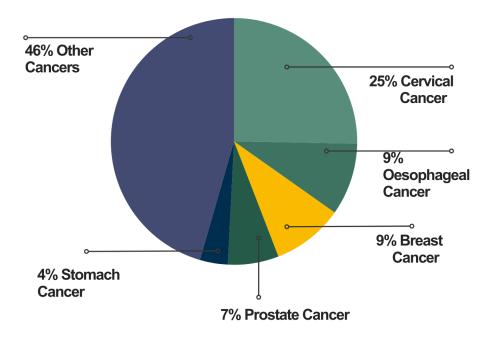
HAU site	Total	Male	Female	Children (<18yrs)
Hoima	243	97	146	48
Makindye	330	134	196	84
Mbarara	543	212	331	30
Grand Total	1,116	443	673	162

Among the new patients, 749 (67%) had cancer, 37 (4%) had HIV and 180 (16%) had both cancer and HIV. 150 (13%) of the patients had other diagnoses which required Palliative Care, as shown below.

### **New patients diagnoses**



# Top 5 cancers among new patients



# Number of times patients were contacted in different ways

Mode of contact	2018/2019	2019/2020	2020/2021	2021/2022	2022/2023	2023/2024
Outpatient	9,769	7,957	5,325	5,845	5,603	6,206
Outreach	856	577	130	551	1,244	1,651
Home Visit	1,711	890	379	1,094	1,672	1,711
Hospital Visit	1,820	990	117	625	1,229	1,215
Telephone contacts	1,877	2,362	1,418	1,684	1,020	1,004

# **Our Models of Care**

### **Outpatient Care**

Out-patient services remains the primary method of service delivery at HAU, enabling affordable and accessible care. HAU had 6,206 outpatient contacts.

#### **Home Visits**

Home-based care is a cornerstone of HAU's work, supported by research that aligns with patients' and families' preference for treatment in a familiar environment surrounded by loved ones.

#### **Outreach Clinics**

Outreach clinics aim to address gaps in palliative care, reaching underserved populations, including those in urban informal settlements and refugee communities. These clinics provide critical services such as clinical reviews, medication, health education, and referrals for specialised treatments like chemotherapy and blood transfusions. Collaboration with community volunteer workers plays a vital role in their success. This year, outreach teams served a total of 1,651 patients through the following activities:

**Kampala Site (HKLA):** HKLA has a long-standing history of conducting outreach clinics in Mukono. Research showed a significant unmet need for palliative care in some of Kampala's informal urban settlements. In response, new monthly outreach clinics were initiated in Namuwongo-Kisugu and Katanga settlements, where 25–35 patients are seen at each clinic.

**Mobile Hospice Mbarara (MHM):** MHM organises regular outreach clinics at Ishaka Adventist Hospital and across Isingiro District, focusing on refugee populations. Each clinic serves 35–45 patients monthly. Additionally, roadside clinics deliver care to patients in remote areas, often setting up under trees or in community spaces. These innovative services ensure that patients in isolated villages receive much-needed care.

**Little Hospice Hoima (LHH):** LHH conducts three regular outreach clinics. The Kyangwali Refugee Settlement clinic, located 82 km from Hoima, serves 25–35 patients monthly. Similar services are provided in Masindi and Kakumiro, serving 25–35 and 15–20 patients per month, respectively.



**HAU Nurses at an outreach clinic** 



Palliative care nurse Roselight with an outpatient in Makindye

# **Hospital Visits**

All three Hospice Africa Uganda (HAU) sites conduct regular hospital visits to extend palliative care to hospitalised patients, particularly those with cancer. These visits occur weekly or more frequently, depending on invitations from hospital team. A total of 1,215 patients/contacts were seen in hospitals and other health units this year.

**Kampala Site (HKLA):** HKLA collaborates with Mulago National Referral Hospital and provides care to patients admitted at the Uganda Cancer Institute (UCI).

**Mobile Hospice Mbarara (MHM):** MHM conducts hospital visits at Mbarara Regional Referral Hospital, offering palliative care to oncology outpatients and those in the oncology ward.

**Little Hospice Hoima (LHH):** LHH extends its services to patients at Hoima Regional Referral Hospital These visits provide critical support, ensuring that palliative care reaches hospitalized patients who might otherwise lack access to these essential services.

### **Daycare**

The Daycare programme provides holistic support to patients and their caregivers through psychosocial, physical, and spiritual care. Patients spend a day at HAU sites under the attentive care of nurses and volunteers, enjoying a supportive environment where they can connect with others facing similar challenges. These interactions foster encouragement and resilience, helping patients cope with their conditions. Meanwhile, caregivers benefit from a much-needed respite and a day off. On average, 15–20 patients attend daycare sessions at each HAU site every month.



A spiritual hug at daycare

#### **Bereavement Care**

This year, HAU registered **638 deaths** across its three sites. The HAU team provides bereavement support to grieving families, ensuring cultural norms and practices are respected while offering comfort and condolences. Each site conducts monthly bereavement meetings reflecting on how patients and families were supported. Challenges are also discussed, and opportunities for improving future care identified.

In addition annual memorial services were organised at all three sites, attracting strong attendance. Family members shared heartfelt testimonies about the value of palliative care and the support they received from HAU during difficult times. As part of the service, families lit candles in remembrance of their loved ones and shared a meal with the HAU team, creating a comforting and supportive atmosphere.



Family members lit candles in remembrance.

# **Psychosocial support**

Beyond pain and symptom management, psychosocial support remains a cornerstone of HAU's holistic care approach. Many patients and families face financial hardships, as serious illnesses like cancer often exacerbate their economic struggles. HAU's support extends to addressing social and emotional needs, helping families navigate the challenges associated with long-term illnesses.

### **Give a Chance Project**

The Give a Chance (GAC) project provides educational support at primary, secondary and vocational levels to vulnerable children from families whose parents died of cancer or HIV/AIDS while under HAU's care, as well as children who are cancer survivors. In the financial year, the GAC programme supported 25 children with tuition fees.

### **Patient Support Fund**

Across all three sites, the Patient Support Fund provided essential assistance to patients with basic needs, and those requiring medical investigations. This support included the procurement of physical items such as mattresses, bedding, food, rent payments, medical procedures, investigations, and medications. The fund targets the poorest and most vulnerable patients on HAU's programme, particularly those who are destitute and lack family support. The demand for basic necessities like food and other essential items continues to be greater than available resources.

# Road to Care (RTC) Programme

The Road to Care (RTC) Programme focuses on enhancing the quality of life for vulnerable women diagnosed with early cervical cancer. It supports women with access to oncology treatments such as chemotherapy and radiotherapy, helping to alleviate the burden of the disease. In the financial year 2023/24, the programme supported a total of 423 women through cervical cancer screening, investigations, and treatments. Among these, 366 women were newly enrolled in the programme, while 57 women continued their care from the previous year.

### **Patient story**

#### How Road to Care helped Nankya and Irene's to remission





In 2016, Uganda's only radiotherapy machine broke down, leaving cancer patients in desperate need of radiation therapy. For many, this meant making the difficult journey to Aga Khan Hospital in Nairobi, Kenya. However, the poorest of patients, unable to afford the costs of transport and accommodation, were stranded and left without access to essential care.

In 2016 and 2017 Road to Care (RTC) supported Nankya (52) and Irene (55), to travel to Nairobi for life-saving chemo-radiotherapy. Today, both

women are in remission and leading healthier, more fulfilling lives. They are now working and contributing to their communities, a testament to the life-changing impact of RTC. In February 2024, Nankya and Irene visited Hospice Kampala and openly shared their stories. They told how the critical support they received from RTC, at a time when their prospects of receiving cancer treatment were bleak, has changed their lives. Both women expressed their heartfelt gratitude for the generosity of RTC and HAU, which made their recovery possible.

### Strengthening Palliative Care through Our Community Volunteer Worker (CVW) Network

Hospice Africa Uganda (HAU) leverages the support of Community Volunteer Workers (CVWs) to extend palliative care services into communities. CVWs are laypersons identified by their communities as trusted people who are trained by HAU in essential caregiving skills. They serve as critical liaisons between the HAU palliative care team and their communities, ensuring the sick are identified, supported, and referred for appropriate care.

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CVWs also play a vital advocacy role within their communities. They visit patients in their homes or workplaces, offering basic health education and promotion messages, particularly targeting individuals with chronic conditions. CVWs identify palliative care needs, especially for patients with cancer. Referrals are then made to the nearest HAU. CVWs also provide practical support, including wound dressing for patients. This hands-on care significantly improves the quality of life for patients in underserved areas. Currently, HAU's palliative care network is supported by a total of 63 dedicated Community Volunteer Workers.

#### **Breakdown - Modes of contacts**

	Kampala Site	Mobile Hospice Mbarara	Little Hospice Hoima
Contacts recorded at the Outpatient Department	1670	3242	1294
Home Visit Contacts Made	772	474	465
Hospital Contacts	499	326	390
Outreach Contacts Made	472	485	694
New Patients	330	543	243

# **Mobile Hospice Mbarara**

#### **Focus on MHM**

It was another busy year for Mobile Hospice Mbarara. A big focus during the year was the start of a major renovation project on our clinic and offices, which were not fit for purpose and which required serious upgrading. We are delighted that significant progress has been made, and it is expected that the team will move back into its new premises in early spring 2025. In the interim a temporary building is being rented to work from. Our new building will not just provide better conditions for patients and staff, but it will also allow us to grow our services and to reach more critically ill patients in need. A huge thanks to our UK donor for the initial substantial amount of over £55,000 sterling to allow us to start this project. We are currently embarking on more fundraising to allow us to complete the renovation.







Before

MHM Site Manager Antonia Kamate

Progress so far

During the past year, MHM hosted a diverse group of students, including five Anglophone and seven Francophone students for placements, two IHPCA students for clinical placements, and Kampala International University students on a one-day placement led by palliative care advocate Dr. Amandua Jacinto. In October, MHM also hosted a Health Professionals Course for 21 nurses from Mbarara Hospital, sponsored by Dr. Bethany Rose Daubman from the Global Palliative Care Program and Global Health Collaborative-MUST.



Francophone students



Anglophone students with MHM team



MHM team members and Mbarara Hospital nurses

#### **Visitors**

MHM welcomed supportive visitors and volunteers from Ireland and the UK, including Drs. Ollie and Kate Sykes; Adam Sweetman, Chair of Hospice Africa Ireland; Chris and Maria Merriman from Hospice Africa UK; and Niall O'Sullivan from Hospice Africa Ireland.







# **Advocacy and communications**

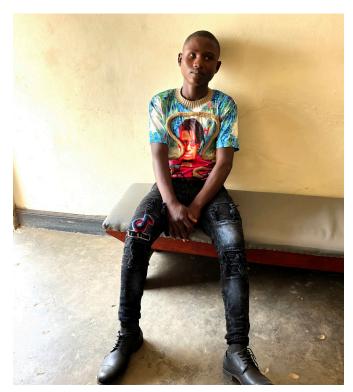
The team actively raised awareness about the need to expand palliative care services in Uganda. They participated in the Uganda Colour Run for paediatric care in July, delivered awareness talks on cervical and breast cancer at the Rotary Club of Bushenyi Health Camp in August, and hosted Bless a Child during September's child cancer awareness month. At the 4th Conference on Cancer and Palliative Care, two team members and a volunteer presented their work, and Dr. Anne's book That's How the Light Got In was launched. On October 24th, a PCAU team visited for discussions on MHM's successes and challenges, followed by a visit to Mbarara Regional Referral Hospital to meet with the Hospital Director and Senior Principal Nursing Officer.



The entire HAU family was very sad to mark the retirement of one of our first nurses, Martha Maabwoni, after 29 years of dedicated and compassionate service.

Martha was the backbone of Hospice and spent most of her career with HAU in MHM. She not only touched the lives of hundreds of patients and their families in her time with HAU, but she was also an inspiring guide and mentor to many nurses and doctors who passed through our doors.

#### We all wish Martha many happy years of retirement



A young MHM Daycare patient



The MHM team at morning prayer

### **Patient Story**





Alice (44), lived in a small village outside Mbarara, and had been on the Hospice Africa Uganda programme for over a year. The gentle mother-of-six children had Aids and was bed bound due to severe pain in her limbs, which were twisted and deformed.

Alice was completely dependent on her children for support. None of them worked and the family lived in very bad conditions. The family home consisted of two small, bare rooms with five of the children sleeping together in one room along with two grandchildren, and Alice sleeping in her bed in the other room. In fact, her entire life for the previous two years was spent in bed. Alice had no sheets on her bed and her pillow was a bundle of rags and old clothes. A bowl had to be put under her when she had to go to the toilet.

Two of her daughters Anna (20) and Charlotte (24) occasionally managed to get work in local fields in return for food. On one of the HAU visits, two of Alice's sons returned from nearby woods with sticks they collected for the outdoor fire they used to cook food. Despite the desperate situation she was in Alice managed to smile - and what a smile and what bright eyes.

Alice's link to the outside world was through a radio by her bed which she used to listen to gospel music and the news. Her daughters shared with the HAU team that in the evenings they often danced for their mother to music on the radio, something which brought a smile to Alice's face and helped her forget her pain for a little while. In January 2023 a plan was made to see if HAU could support Alice with a special bed where she could be more comfortable, and with tests to determine exactly what was the cause of her serious joint and bone issue.

Alice's biggest wish was to get better. Her second wish was to get a bigger house for her family. She said praying helped her to keep hope and keep going. Thanks to the oral liquid morphine which hospice provided, Alice's pain was under control, and being pain free and comfortable ensured that Alice was able to have some better quality time with her family.

Alice passed away suddenly, in her sleep, just after she had had lunch, in late January 2024. Her daughters were with her when she died, and afterwards they said they will be forever grateful for the support that they family received from HAU. They were comforted by the fact that she died pain free, and peacefully.

#### **May Alice Rest in Peace**

# **Focus on Little Hospice Hoima (LHH)**

It was a busy year for Little Hospice Hoima (LHH) as they continue to be the main provider of palliative care in the Bunyoro region. LHH held outreach clinics to Kakumiro, Kikuube, and Masindi districts. These efforts brought essential care to underserved communities which may otherwise be unable to access palliative care services.

### **Community Volunteer Workers**

Community Volunteer Workers (CVWs) are essential to LHH's outreach efforts, playing a key role in patient referrals, providing nursing care, offering psychosocial support, and promoting health education. To strengthen their ability to deliver high-quality palliative care, LHH enhanced its support for CVWs in 2023-2024. This included refresher training, supervision sessions, and providing essential tools such as medical supplies, notebooks, and bicycles to improve mobility in remote areas. These initiatives have empowered CVWs to deliver more effective care and increased their recognition as vital healthcare providers within their communities.



CVWs after receiving brand new bicycles at an update meeting held at LHH in September 2023

The CVWs shared stories demonstrating the profound impact of their work:

"I have treated seven patients with chronic wounds. One was a 7-year-old boy with cerebral palsy who had deep wounds on his buttocks for over five years. Despite multiple visits to the referral hospital, the wounds did not heal. His grandmother called me, and I used the chlorhexidine (hibicet) and Flagyl powder provided by LHH. The wounds fully healed. Now, I'm highly respected in the area as a 'musawo' [health worker]. I also conduct health talks at gatherings including church services and burials, proudly wearing my green Hospice CVW t-shirt." — Aculera Doreen, CVW at Buhanika Health Centre III

#### **Visitors**

Little Hospice Hoima (LHH) welcomed several supportive visitors and volunteers from Ireland and the UK, including Adam Sweetman, Chair of Hospice Africa Ireland; Drs. Ollie and Kate, and Alice from the UK; and HAU Treasurer Mr. Michael Corless with visitors from Basingstoke Hospital. Heather and Dr. Stephen Miller participated in various clinical activities, gaining exposure to outpatient care, hospital and home visits, roadside clinics, and community outreach.



Drs Ollie and Kate, and Alice with the LHH team



Heather Miller and Dr. Stephen Miller with the LHH team



HAU Treasurer Mr. Michael Corless with visitors from Basingstoke Hospital, England, and the LHH team



Chris Merriman, Maria Merriman, and members of the HAU team visited Betty Kasigwa (center) at her home in Hoima. Betty, the first nurse at LHH, is now enjoying her retirement.

### **Advocacy**

In July 2023, Board Chair Ms. Joy Mirembe, along with Hospice Africa UK Board Chair Mr. Chris Merriman and his wife Maria, made important visits to influential leaders in Uganda. They met with His Grace Stanley Ntagali, Emeritus Archbishop of the Church of Uganda, and Rt. Rev. Vincent Kirabo, Bishop of Hoima Catholic Diocese, as well as members of the Little Hospice Hoima Board. In October 2023, Germans Natuhwera gave a talk at the Rotary Club of Hoima-Kitara, strengthening partnerships and encouraging support for the community. The Rotary Club expressed their pride in collaborating with Little Hospice Hoima to bring hope and transformation to the surrounding communities.



Joy Mirembe, Chris & Maria Merriman, His Grace Ntagali, emeritus Archbishop, Rt. Rev. Kirabo, Bishop of Hoima Catholic Diocese and the LHH Board Committee



Maria Merriman, Germanus Natuhwera, Rtd. Archbishop Ntagali, Joy Mirembe and Chris Merriman at the Archbishop's home



Germans giving a talk at the Rotary Club of Hoima-Kitara fellowship



LHH team at St Mathew's Cathedral, Masindi launching a donation box

# LHH Awarded by the International Association for Hospices and Palliative Care (IAHPC)

Little Hospice Hoima (LHH) participated in the IAHPC 2023 Photo Contest and emerged as second-place winners. The winning photo, captured by Sarah Kitalikyawe, a palliative care nurse at LHH, shows her providing compassionate care to a patient with advanced esophageal cancer at home during the peak of the COVID-19 pandemic in 2021. As part of the award, LHH received a \$200 USD prize and a 1-year IAHPC membership extension.



# **Patient Story: Kakuru's Journey**

Kakuru, a 33-year-old man with a young family, had been living with a facial tumour but was reluctant to access medical care due to financial constraints and a lack of trust in medical treatment. In 2021, he was referred to Little Hospice Hoima (LHH), but after being advised to return for a biopsy, Kakuru chose not to follow up, delaying his care. His mistrust of medical treatment led him to avoid further medical attention, and as a result, the tumour continued to grow. By April 2023, it began obstructing his airway, causing severe breathing difficulties.

Kakuru eventually returned to LHH, where he was urgently treated with high-dose steroids to relieve the airway obstruction. The hospice team also assisted him with funds to undergo further medical investigations at Mulago Hospital. The histology report confirmed the tumour was non-cancerous, and he underwent successful surgery to have it removed.

Today, Kakuru has recovered well and remains deeply thankful to the hospice team for their timely intervention, which helped save his life.



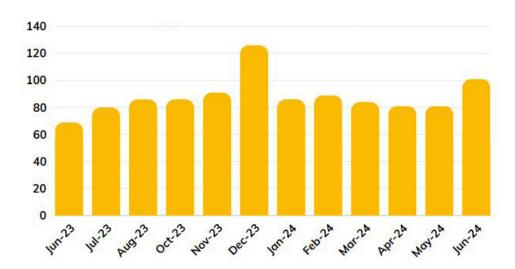


# Institute of Hospice and Palliative Care in Africa (IHPCA)

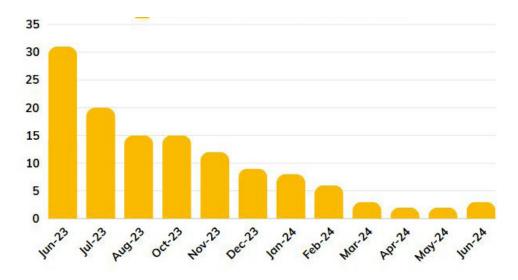
The IHPCA continues to train healthcare professionals across Africa in palliative care through Diploma, Bachelor's, and Master's programs, alongside specialized courses for health workers in Uganda.

Established in 1993 as the education and training arm of Hospice Africa Uganda (HAU), the IHPCA promotes education, training, research, and best practices in palliative care, as well as introductory education for caregivers. In 2003, it became affiliated with Makerere University and was recognized as a tertiary institution by the Ugandan National Council for Higher Education (UNCHE) in 2009. It was later granted Private Other Degree Awarding Institution status in 2014, with its Research Ethics Committee (REC) accredited by the Uganda National Council for Science and Technology (UNCST).

#### Number of active students during the year



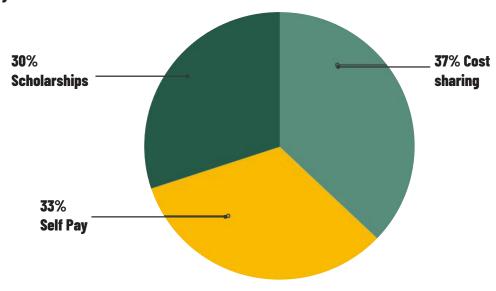
#### No of blocked students during the year



# **Student Tuition and Scholarships**

In 2023/2024, 33% of students met their tuition obligations independently. The year saw increased financial stability, with fewer students requiring a gap year or facing enrollment blocks due to financial constraints.

#### **Tuition Payments**



#### **Scholarship Funders**

SN	Funder	No of Students
1	IHF (29 IHPCA; 6 IP)	35
2	BCGC	3
3	PCAU	6
4	Woodleigh Impact	3
5	Global Partners in Care	01
Total		48

Several funders, including the Irish Hospice Foundation (IHF), generously supported scholarships for students at the Institute of Hospice and Palliative Care in Africa (IHPCA). Established in 2022, the IHF scholarship programme addresses the critical need for skilled palliative care providers across Africa. In 2023/2024, it provided healthcare professionals with education, clinical placements, and essential resources to enhance palliative care in their home countries, working toward its goal of awarding 67 scholarships by 2025.

On July 24, 2023, IHF Chair Jean Callanan visited IHPCA, highlighting the organization's three-year funding initiative supporting scholarships for 29 students, upgrading the Moodle platform, and developing a Student Information Management System (SIMS). Students and stakeholders, including HAU founder Dr. Anne Merriman, engaged with Jean Callanan virtually and in person during her visit.



IHF Board Chair Jean Callanan (centre) officiated at the Anglophone placement's Closing Ceremony & met the grants beneficiaries

### **Graduation**

In January 2024, IHPCA presented 33 candidates for Makerere University's graduation ceremony, including 15 students from the pioneer cohort of the Master of Science in Palliative Care program.

### **Graduates' countries of origin**

Programme	Uganda	Кепуа	Tanzania	Malawi	Total
BSc	6	8	-	2	16
MSc	6	5	01	3	15
PGD	01	27	74		01
DPC	-	-	-	01	01
Total	13	13	01	06	33





IHPCA MSc Graduates January 2024. This was the pioneer class in the Master's Programme

# **Governing Council**

To enhance functionality, the Governing Council established two subcommittees:

- Student Affairs Committee
- Academic Affairs Committee

These subcommittees convene a week before the full Governing Council meeting to deliberate on key issues and prepare recommendations.

# **International Programmes**

The International Programmes are substantially funded by Hospice Africa France and Hospice Africa Uk. This support is supplemented by way of collaborative planning with a view to achieving its support, team works with partner organisations to train healthcare workers, raise awareness, lobby governments, and provide information on the initiation and sustainability of palliative care in various African settings. Two ways of achieving this is through the Anglophone and Francophone courses with students from all over the continent of Africa enrolling.

### **Anglophone Course**

The online session of the Anglophone course ran from 27 March to 23 June 2023, with 42 participants. A student placement held from 10-28 July 2023 included 11 participants from six countries. The Irish Hospice Foundation (IHF) provided great support, with Board Chair Jean Callanan visiting HAU and officiating at the closing ceremony.

The subsequent Anglophone PC Initiators course, which commenced on 18 March 2024 and concluded on 14 June 2024, had 38 participants. The placement was held from 8-26 July 2024, with 10 participants from four countries (Nigeria, Ghana, Sierra Leone, and Uganda). HAU is grateful to IHF for reallocation funding that allowed for more participants.



This year's Anglophone class pictured on their last day at HAU with the Director of International Programmes Dr Eddie Mwebesa and HAU Executive Director Prossy Nakyanja



The Anglophone class receiving their certificates

### **Francophone Course**

The online section of the Francophone course ran from 4 September to 1 December 2023. Out of 53 applications, 48 were enrolled, and 43 completed the online portion. The placement took place from 15 January to 2 February 2024, with 19 participants from eight African countries and one from Haiti. This was one of the largest groups ever, with three participants from earlier online cohorts joining the placement, demonstrating the success of the alumni model.

External facilitators included Dr. Stephen and Heather Miller, Prof. Sr. Marie Ouedraogo, and Emma Matthews. The placement was also attended by Amanda Rees Hanley, President of Hospice Africa France Board, and her husband Jonathan, who experienced African palliative care during home visits and interacted with participants during their action planning.



Opening Ceremony of the Francophone course placement in Jan 2024



The Francophone course's placement & candle lighting ceremony was officiated by the HAF Board Chair Amanda Hanley

### **International Programmes International Work**

#### **Ethiopia**

Ethiopia has a centralised system with challenges around morphine availability and political dynamics. A major goal is to support a Technical Working Group led by the Ministry of Health in resuming morphine production. From 26-31 May 2024, HAU welcomed two professionals from Jimma University and Teaching Hospital - a pharmacist interested in morphine reconstitution and supply chain, and an oncologist aiming to establish a palliative care team at their hospital.

#### **UK and Ireland**

After a two-month stint as a volunteer at HAU, UK nurse Emma Matthews organised a visit to St. Luke's Hospice in Sheffield for Anglophone Nurse/Trainer Dianah Basirika and Palliative Care Nurse/Coordinator Roselight Katusabe.



Nurses Dianah & Roselight at Sheffield Hospice in UK

#### Benin

Benin held its second national palliative care congress in October 2023. The first congress in October 2022 recognised HAU's role in starting palliative care in the country. Sylvie Dive and Dr. Anne Merriman participated in the 2023 conference, advocating for increased morphine production and integration of palliative care into national health systems.

#### Ghana

In March 2024, the IP team conducted in-country training at SDA Hospital Asamang in Ghana, funded by COMPASS Ghana. Thirty healthcare workers were trained to start a palliative care service at the rural hospital, with six participants enrolling in the Anglophone course.

#### Malawi

CIPD-supported facilitators taught the Health Professionals Course at Ndi Moyo Hospice in Salima, Malawi, from 15-19 April 2024.



Dr Eddie Mwebesa (seated 3rd left) at Ndi Moyo Hospice teaching at their Health Professionals Course

#### **South Africa**

Dr. Eddie Mwebesa and Ekiria Kikule attended the 16th International HepatoPancreatoBiliary World Congress in Cape Town from 15-17 May 2024. HAU was recognised several times, and Dr. Anne spoke at the APCA event during its 20th anniversary celebration.

#### **France**

The IP team supported Hospice Africa France with a proposal to the Brittany region for advancing palliative care work in Francophone Africa. The application was submitted in January 2024.

#### **Other Work**

#### **University College Dublin**

HAU continued its collaboration with University College Dublin in 2023, hosting four undergraduate medical students for research projects. One project was specially recognised at the UCD SSRA award ceremony. On 1 June 2024, HAU welcomed another cohort of four medical students for an eight-week placement.



UCD medical student, Roisin Sheehy, was awarded the SSRA Bronze Medal for Research Excellence for research she carried out at HAU in May 2024. Her project titled "Profiles, Needs and Survival of Women Diagnosed with Cervical Cancer on the Road to Care Programme of Hospice Africa Uganda" highlighted the immense struggles faced by many women diagnosed with cervical cancer in Uganda. She presented her findings to the Hospice Africa Ireland 25th anniversary celebrations.

# **Morphine Production Unit**

Central to the work of Hospice Africa Uganda is the manufacturing of affordable oral liquid morphine which is used to control the pain of critically ill patients. The Morphine Production Unit at HAU is a model facility for low and middle-income countries who want to manufacture their own oral morphine for pain relief. HAU produces oral liquid morphine for the whole of Uganda through a Public Private Partnership arrangement with the government, under licence by the National Drug Authority.

While initially morphine powder was reconstituted into an oral liquid morphine solution using a sink and bucket, today production takes place in a fully equipped manufacturing unit that meets all recommended regulatory requirements. Oral liquid morphine is the World Health Organization's recommended painkiller for moderate to severe pain associated with cancer and other life-threatening illnesses. It is one of the essential medicines for palliative care in Uganda.

There has been an annual increase in morphine powder consumption in Uganda, reflecting the increasing access to palliative care in the country. In 2004, 1.3kg of morphine powder was used compared to 60kg used in 2023

HAU supplies oral liquid morphine to the Government of Uganda through the National Medical Stores (NMS) which in turn distributes it to public health facilities accredited for palliative care in Uganda, and private facilities through Joint Medical Stores.







**Dispatch of Finished Product** 

Oral liquid morphine is packed in two different strengths - 5mg/5mls (green colour) and 50mg/5mls (red colour). The green morphine is in two volumes, 250mls and 500mls, while the red morphine is in 250mls only.

# **Training**

The Morphine Production Unit (MPU) collaborates with the International Programmes Department, the Institute of Hospice and Palliative Care in Africa (IHPCA), clinical departments, and partner organisations to train healthcare workers from various institutions and countries.

We emphasize the principles of Good Manufacturing Practices (GMP), ensuring that both the traditional kitchen sink method and the manufacturing unit method remain effective in relieving pain. Our core message across Africa is that these methods can effectively meet the needs of palliative care settings, achieving the primary goal of relieving patient pain.

# **Employees of the Year 2024**

The success of HAU is powered by the dedication of our exceptional staff. This year, we proudly honor three outstanding employees, one from each site, for their remarkable contributions.

#### Kampala: Resty Nakanwagi

Resty, a Palliative Care Nurse, has shown unwavering commitment to patient care, consistently going above and beyond to support patients and their families.

#### Little Hospice Hoima: Elizabeth Mpabaisi Karungi

Elizabeth, an Administrative Assistant, stands out for her adaptability, kindness, and teamwork. Her sharp, approachable nature has made her an invaluable team member.

#### **Mobile Hospice Mbarara: Allen Muhumure**

Allen, a Caterer, exemplifies dedication and reliability, delivering quality work with consistency and creating a positive environment for her team.

We celebrate Resty, Elizabeth, and Allen for their inspiring contributions to our mission in 2024!



Resty Nakanwagi



Elizabeth Mpabaisi Karungi



**Allen Muhumure** 

# **Volunteers**

Hospice Africa Uganda is fortunate to benefit from a steady stream of dedicated volunteers who generously share their skills and support our teams. Their visits and fundraising efforts play a vital role in enabling HAU to continue its important work. This year was particularly active, with volunteers from Ireland, the UK, the USA, and France contributing their time and expertise. Among them were medical students from University College Dublin, whose efforts were greatly appreciated. Looking ahead, HAU is excited to establish a Volunteer Office to better support our volunteers and expand their numbers. This initiative will initially be led by Irish volunteer Miriam Donohoe, who will also take on responsibilities in communications and advocacy.

Niall O'Sullivan from Ireland spent six months with us and made a huge impact, sharing his accountancy and organisational skills. He proved himself to be passionate about the HAU mission and befriended many of our patients during his time here. We thank Niall for his invaluable support. Another Irish volunteer was Adam Sweetman, Chair of Hospice Africa Ireland who visited to have consultations with staff across our three sites to prepare for the development of our next 5-year strategy.



Irish volunteer Niall O'Sullivan, who spent 6 months volunteering with HAU, pictured with a young patient and her mother during daycare in Makindye.

# **Our Country Boards**

There are four boards – in Ireland, the UK, France and the USA – which work hard to support the work of Hospice Africa Uganda, and we are deeply grateful for this assistance.

#### **Hospice Africa UK**

Hospice Africa UK was set up as a limited company in 1992 to support our work. It is based in Liverpool, the home of our founder Dr Anne Merriman for many years. It runs two successful charity shops – in Liverpool and Southport – which raise important funds. work to providing 'palliative care for all in need in Africa'. In addition to the shops, the board raises funds through quiz nights, sponsored events including marathons, half marathons and bike rides, and the Big Give Christmas Challenge.



New sign for the Ainsdale shop, March 2024



The Liverpool charity shop, with faithful staff and trustees, past and present



Trustees and their families, cycling between the charity shops in celebration of 30 years of HAU

#### **Hospice Africa Ireland**

Hospice Africa Ireland (HAI) supports the work of Hospice Africa Uganda (HAU), and its mission to ensure palliative care is available for all in need in Uganda and across Africa. As well as promoting awareness of the work of HAU and it's impact, HAI organises fundraising initiatives with partners and donors throughout Ireland. The Founder of HAU, Dr Anne Merriman, has Irish blood running through her veins. The granddaughter of Irish emigrants who moved to Liverpool and become part of the Irish diaspora there, she joined the Medical Missionaries of Mary (MMMs) in Ireland, and studied medicine in UCD.

A significant number of Irish people with both medical and non-medical backgrounds travel regularly to Uganda to give their time and experience volunteering.



The Irish board celebrating 30 years of HAU



HAI's 30th Anniversary fundraising walk in UCD



HAU Board member and treasurer, Michael Corless, pictured with Sr Brigid and Sr Angela of the Medical Missionaries of Mary at a Hospice Africa Ireland fundraising event.

#### **Hospice Africa USA**

Hospice Africa USA was established in 2013 by a small group of Americans who had volunteered at Hospice Africa Uganda (HAU), and who were inspired to help HAU thrive through ongoing financial support and visits to Uganda, fully funded by the volunteers themselves. HA-USA's purpose is to support and strengthen Hospice Africa Uganda (HAU) as it continues its mission to provide end of life care for critically ill Ugandans, and to expand the availability and impact of its high-quality palliative care in Uganda and across Africa for patients with cancer and other life-threatening illnesses.

#### **Hospice Africa France**

Hospice Africa France (HAF) was established in 2009 in a small village in Brittany with the objective of raising funds to support Hospice Africa Uganda's International Programmes (IP) department, and in particular its outreach to Francophone countries in Africa.

This support includes funding the running costs of IP's Francophone Course as well as funding any shortfall on the costs of Francophone training, mentoring IP alumni and for participants to attend training in Uganda.

This remains its main focus. However, it also works with other French organisations to raise awareness in France of Africa's need for palliative care. In addition to this, we finance visits to France by IP personnel for that purpose.

Our links with these different groups have made it possible to provide French-speaking professionals to support IP's francophone training both in Africa and online. HAF has also provided funding to young French-speaking volunteers to work with the IP team in Uganda.



The HAF Board Chair Amanda Hanley with HAU founder Dr Anne Merriman on a visit to HAU in spring 2024



Dr Judy Hills, the Treasurer of the USA Board, and a long time supporter of LHH pictured on a visit

# **International Partnerships**

# **Funding from Hinds Hospice**

The generous Hinds Hospice USA funding allowed us to purchase two vehicles to support patient care which arrived in september 2024.







# **Repairs to the Reception and Parking areas**

Repairs to the parking areas have been completed, enhancing the appearance of our compound.







**After Repairs** 

# **IHPCA computer lab upgraded with 8 computers**

Funding from Woodleigh Impact allowed for the purchase of equipment in our computer lab in the IHPCA



Students at the computer lab



# A milestone: 30 years of HAU

When our founder, Dr Anne Merriman, saw her first patient in a room in a rented house in the grounds of Nsambya hospital in 1993, little did she think that 30 years later almost 40,000 critically ill people in Uganda would have been supported by Hospice Africa Uganda.

This year proudly marked our 30th anniversary—a significant milestone in our mission to champion palliative care across Africa. Friends, supporters and team members gathered in September 2023 to celebrate this special birthday. It was a wonderful, uplifting day with powerful addresses from our Patron, HRH Sylvia Nagginda, Nnaabagereka of Buganda Kingdom and our founder Dr Anne.

Also in September our anniversary was marked at the 4th Uganda Conference on Cancer and Palliative Care which featured a moving dance performance led by Dance with Valentino on the history of palliative care in Uganda.

Dr Anne had a singular vision when she founded HAU: to bring comfort and dignity to those living with life-limiting illnesses. Over three decades, it has not only provided compassionate care to thousands of patients in Uganda, but it has also been a trailblazer in spreading the philosophy and practice of palliative care across the African continent through the Institute of Hospice and Palliative Care in Africa (IHPCA) which has trained thousands of health professionals from Uganda and other African countries in palliative care.

We remain steadfast in our commitment to expanding access to palliative care across Africa and will enhance our education programmes and strengthen partnerships to reach even more people in need.

The 30-year journey of Hospice Africa Uganda is a testament to the transformative power of dedication, vision, and love.

#### Here's to another 30 years of service, hope, and healing.



# **Research, Publications and Presentations**

Author/s	Title of Publication	Place of publication, presentation and date
Germans Natuhwera & Eve Namisango	'Palliativversorgung in Afrika bei beschränkten Ressourcen und prekären Situationen – Lektionen für Wachstum und Resilienz '(German) Delivering palliative care services in resource limited and fragile settings: Key lessons for growth and resilience (English)	Book chapter in Leidfaden magazine, Germany, May 2024, https://doi.org/10.13109/9783666806278.12

Title of study	PI- Principal Investigator(s) Name	Pl's -Institution of affiliation
Factors associated with readmission of patients with Bipolar in Butabika National Referral Mental Hospital	Esther Musaasiz	Uganda Martyrs University
Pain and quality of life before and after ambulatory inguinal hernia repair among adult patients at Kyabirwa Surgical Center, Jinja City - eastern Uganda	Ambrose Nuwahereza	Kyabirwa Surgical Center
Lived experiences and Coping strategies for Guardians providing home health care to terminally ill children in Lilongwe Malawi	Mercy Butia	IHPCA - Student
Community Attitudes Towards Hospice and Palliative Care Services in South Western Uganda	Francisca Nagujja	Mobile Hospice Mbarara
Factors affecting the transfer of palliative care nursing knowledge into practice among nurses who completed an advanced diploma in palliative care program piloted at Mulago School of Nursing and Midwifery	Anna Ayugi	IHPCA - student
The circumstances around the end of life of pediatric patients receiving palliative care at Hospice Africa Uganda	Sally Vaughan	University College Dublin
Factors associated with late-stage presentation of cervical cancer patients at Zomba Central Hospital-Malawi	Ambrose Nuwahereza	Kyabirwa Surgical Center
Bereavement care; experiences of caregivers from Blantyre district, Malawi	Mercy Butia	IHPCA - Student
Satisfaction with ambulatory surgery and its correlates among adult patients at the Kyabirwa Surgical Center - Budondo sub-county, Jinja City	Francisca Nagujja	Mobile Hospice Mbarara
Comparison of Communication Channels for Utilization of an Ambulatory Surgical Center in Rural Uganda	Anna Ayugi	IHPCA - student
Exploring the psychosocial needs of heart failure patients at Moi Teaching and Referral Hospital	Rebecca Kavuru	IHPCA - Student
The Role of Spirituality on Perceived Quality of Life in Palliative Care Patients at God's Glory Ministries, in the Hhohho Region, Eswatini	Nompumelelo Mhlanga	IHPCA - Student
Knowledge, attitudes, and practices of breast- and cervical cancer in a rural setting of a low- and middle-income country: A cross-sectional study in the Busoga Region of Uganda.	Troels Einarson	Aarhus University
Factors influencing cancer patients' adherence to oral liquid morphine	Catherine Mlenga Chisunkha	IHPCA - Student
Knowledge, Attitude and Practice towards prostate cancer screening among male patients and caregivers at lira university teaching hospital	Ogwal Pius	IHPCA - Student
Factors Associated with Non-adherence to Chemotherapy Amongst Adult Cancer Patients at Cancer Center Lilongwe, Malawi	Maria Chikasema	IHPCA - Student
Renegotiation of Kinship how forced migrants utilize Kinship during asylum in Uganda	MaryBeth Chrostowsky	Uganda Martyrs University
Assessing Knowledge Attitudes and Practices of Palliative care among Health workers in Private For-Profit Hospitals in Kampala	Beatrice Bulandhina	IHPCA - Student
Exploring lived Experiences of Health Professionals in Identifying patients for Palliative care a case of Ntchew District Hospital Malawi	ldah Lajabu	IHPCA - Student

Title of study	PI- Principal Investigator(s) Name	Pl's -Institution of affiliation
Economic and Environmental Impacts of Infrastructure improvement in Kampala Land Acquisition	Jeanne Sorin Le Guevel	Dyadic Research Impact Limited
Living near Uganda's Queen Elizabeth National Park ; Evaluating alternative livelihood initiative	Beatrice Kyasiimire	University of Florida
Knowledge Attitudes and Perceptions of Health workers on Palliative care services in Uganda – Namyumba town Council Wakiso district	Jacob Ssempijja	IHPCA - student
Project evaluation for the increasing equitable access to effective cataract services in west, south, and south-western Uganda project	Dr Patience Kinengyere	Africa University
Impact of the Global Laparoscopic Advancement Pro Training Program on the Fundamentals of Laparoscopic Surgery (FLS) Test Pass Rate among COSECSA Trainees and Members in Sub-Saharan African Countries	Dr Okello Damoi	Kyabirwa Surgical Centre
The needs of Hospice Africa Uganda's patients living in Kampala's informal urban settlements	Laura Govan	University College Dublin
Demographic and clinical characteristics and needs of Hospice Africa Uganda's long-term cancer survivors	Dearbhla McDonnell	University College Dublin
Survival and its predictors among cervical cancer patients treated with radiotherapy with or without chemotherapy: a retrospective cohort study	Germanus Natuhwera	Hospice Africa Uganda
Psychosocial Problems and Impacts on Quality of life of Cancer Patients Attending Ocean Road Cancer Institute Dar es salaam Tanzania	TheodoraNdun Ndunguru - Ocean Road Cancer	IHPCA - Student
Profiles and survival of women diagnosed with cervical cancer on the road to care programme of Hospice Africa Uganda	Roisin Sheehy	University College Dublin
Perspectives about patient end of life care among family members offered bereavement support by Hospice Africa Uganda	Aisling McCabe	University College Dublin
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Survival and its predictors among cervical cancer patients treated with radiotherapy with or without chemotherapy: a retrospective cohort study	Germanus Natuhwera	Hospice Africa Uganda

### 4th Conference on Cancer and Palliative Care

Fourteen team members presented their abstracts at the conference which celebrated the 30th anniversary of HAU and palliative care. Our founder Dr. Anne Merriman's Autobiography 'How the light got in' was launched. HAU received a partnership award, while Dr. Anne received a leadership award from Global Partners in Care-US









LHH Hoima site manager Germanus Natuwerha and Karima Amin Kamru, morphine production, presenting at the conference. Also the autobiography of our founder Dr Anne Merriman "How the light got in" was launched at the conference and HAU received a partnership award from Global Partners in Care-US

### **Financial Overview**

### Treasurer's Report to the members of Hospice Africa Uganda

### **Dear Members,**

It has been another year of progress.

### **International Donors' Boards**

Each international donor entity (based in UK, Ireland, USA and France) is composed of volunteer Board members many of whom have spent time in Uganda supporting the activities of patient care. International donor receipts have continued to improve annually since Covid.



### **HAU Volunteer Contributors**

Our HAU International Volunteer Corps includes medical doctors, nurses, social support and individuals with specialist skills across a range of disciplines, who engage with the entire Ugandan team that serve and manage all HAU's activities. In addition, the Community Volunteers Group, who have a significant role in identifying patients, enables us to seek funding for their care.

### **Service Delivery And Benefits**

Our Ugandan team's remit extends to many countries throughout Africa, supported by international donors. The cultural exchanges and experience gained both by international volunteers and Uganda team members on the ground, have contributed substantially to the strength of the bond that is evident across all three sites. This has been nurtured relentlessly over the past 31 years by Dr Anne Merriman, our Founder and in turn ensured that the core donor pool has been maintained.

### **Financial Objectives**

All international and local funds directly support the two-fold objectives namely, targeted initiatives and the overall operational and strategic development of HAU. Monthly reporting details are specific, such that accountability and transparency is evident in numbers and narrative.

### Relationships

HAU is unique in terms of its significant donor participation, volunteering and advocacy. The key relationships with the Ministries, PCAU (Palliative Care Association of Uganda) and APCA (African Palliative Care Association), have been essential to HAU's continuing support to palliative care.

### **Financial Outlook**

Funding, as with many NGOs, remains a challenge. The increasing emphasis on the recognition of palliative care as a human right and the increasing demand for services to adults and children, are challenges to our leaders' aspirations to ensure that significant funding support becomes a reality. Developing new and enhancing existing partnerships between HAU and other like-minded Ugandan and international organisations together with the support of the Ministries within Uganda, will enable palliative care services to grow. The challenge is significant. The will to succeed at HAU is unbounded.

### Thank You

As Treasurer, on behalf of our Board, together with each and every member of our team that serves the cause of palliative care and our patients, I wish to thank our partners and donors, both national and international, whether as individuals, philanthropists or corporate.

### Michael Corless, FCA

### Financial Report - Caroline Alony, HAU Finance Manager

### **Overview of Financial Year Ending 2024**

Over its 31 years of operation, HAU has consistently relied on donations from its founding bodies [Hospice Africa Limited – UK (HAL-UK); Hospice Africa Ireland CLG (HAI): Hospice Africa France (HAF), and Hospice Africa USA], along with contributions from individuals both locally and internationally.

### Banked donations received during the year Ushs 1,961m include:

- £55,000 from Hospice Africa Ltd UK (a legacy donor The Estate of Ken Stone deceased) for the renovations of the Mobile Hospice in Mbarara.
- U\$\$200,000 towards capital expenditure and patient care from Hinds Hospice in partnership with Hospice Africa - USA.
- £40,000 from a philanthropist donor (Woodleigh Impact) for support in patient care, education and our production unit in partnership with HAU.
- €30,000 from Irish Hospice Foundation representing scholarships to students to attend the HAU's Palliative Care Institute in partnership with Hospice Africa Ireland and HAU.
- **Annual Funding** from HAL-UK; HAI; HAF; HA-USA.

### **Generated incomes 1,674m include:**

- Morphine production income based on contractual obligations
- Student income
- Local donations and other sources include Irish Embassy and society

### Donations in kind received during the year:

**Drugs:** For the benefit of patients, including morphine.

**Other:** Hospice Africa Ltd - UK: Colostomy Bags and other Sundries Ugx 3.3m; Hinds Hospice: Colostomy bags Ugx 1m; Hospice Africa Ireland: Colostomy bags Ugx 18.7m; PCAU Sundries to LHH: Ugx 3.5m; JD Scholastics Material and 50 Bags: Ugx 1.8 million; Toys for Children from Sinead and Ciara, Irish volunteers: Ugx 1m.

### Financial Summary extracts from the audited financial statements are as follows:

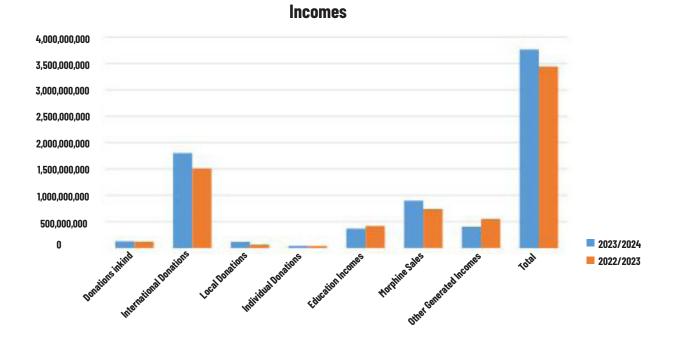
**Income Ushs 3,764m:** Increased by 9%, from 2023 to 2024.

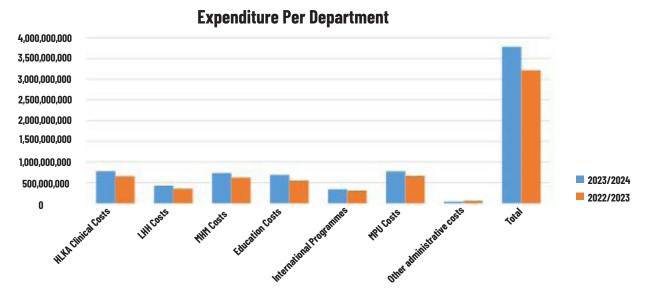
**Expenditure Ushs 3,786m:** Increased by 18%, from 2023 to 2024. This was largely due to the resumption of daycare services, outreach programs and operational costs across activity heads of expenditure.

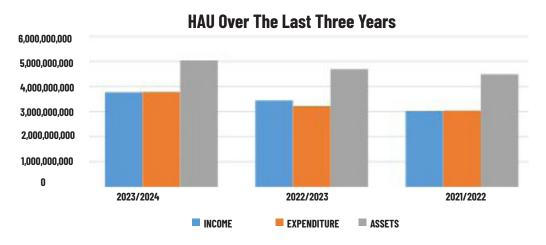
**Total Assets Ushs 3,454m:** Increased by 7%, from 2023 to 2024 and is attributed to building renovations (Mobile Hospice Mbarara) and information technology supports.

**Current Assets Ushs 1,587m:** Increased by 24%, largely due to an increase in Cash and Cash Equivalents, most of which was restricted for the purchase of vehicles.

**Funds and Liabilities:** Overall funds increased by 9% and Liabilities decreased by 14%.







Thank you for your continued support.

Finance Manager, Hospice Africa Uganda FCCA, CPA,MSc-HRM,BBA

### REPORT OF THE DIRECTORS

The Directors present their report together with the audited financial statements for the year ended 30 June 2024, which disclose the state of affairs of Organization.

### PRINCIPAL ACTIVITIES

Hospice Africa Uganda Ltd (HAU) is dedicated to alleviating suffering in Africa by providing affordable and accessible palliative care, primarily in Uganda. Our core activities include:

Palliative Care Services: We offer comprehensive support for patients with cancer and HIV/AIDS, along with their families, at three key locations: Kampala, Mbarara, and Hoima.

Morphine Production Unit: In collaboration with the Ugandan government's Ministry of Health and other partners, we manufacture oral liquid morphine to ensure that patients have access to essential pain relief.

**Training Programs:** Through the Institute of Hospice and Palliative Care in Africa, together with our International Programmes department HAU trains health professionals in palliative care services through various courses, aiming to extend our reach to other African countries.

Through these initiatives, we strive to bring peace and dignity to those facing serious health challenges throughout the continent.

### RESULTS

The results for the year ended June 2024 are set out on page 3 of this report.

### MEMBERSHIP OF THE BOARD

The Directors who held office during the year are set out on page 6 of this report.

### INDEPENDENT AUDITORS

TMK & CO. Certified Public Accountants were appointed on 03<sup>rd</sup> November 2022 and continue in office in accordance with the Non-Governmental Organizations Act, 2016.

### APPROVAL OF THE FINANCIAL STATEMENTS

The financial statements were approved	on 29th day of.	Nov	2024
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By the order of the Board

Chair

Secretary/Treasurer

7

TMK & CO.

Making Performance Happen

### STATEMENT OF MANAGEMENT RESPONSIBILITIES

Management is required to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the organisation as at the end of the financial year and of the results of its operations for the year then ended. In preparing those financial statements management is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgments and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed;
- Prepare financial statements on the going concern basis unless it is inappropriate to presume that the organisation will continue in operation.

The organisation's management is responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the organisation and enable them to ensure that the financial statements comply with HAU Ltd's financial policies and international accounting standards.

It is also responsible for safeguarding the assets of the organisation and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The organisation's management accepted responsibility for the annual financial statements set out on pages 15 to 18 which have been prepared using appropriate accounting policies supported by reasonable and prudent judgments, and estimates, in conformity with HAU Ltd's financial policies and international accounting standards.

The organisation's management is of the opinion that the accounts give a true and fair view of the state of financial affairs of HAU Ltd and of its operating results. The organisation's management further accepts responsibility for the maintenance of accounting records, which may be relied upon in the preparation of accounts, as well as adequate systems of internal control.

Nothing has come to the attention of the organisation's management to indicate that HAU Ltd will not remain in operation for at least twelve months from the date of this statement.

Approved by the organisation's management on 29 day of 2024 Signed on its behalf by:

Ag. Chief Executive Director

Finance Manager



# TMK & CO. Certified Public Accountants

### REPORT OF INDEPENDENT AUDITORS TO THE MANAGEMENT OF HOSPICE AFRICA UGANDA LTD

### Opinion

We have audited the financial statements of Hospice Africa Uganda Ltd, set out on pages 13 to 16. These statements comprise of the statement of income and expenditure, the statement of financial position, statement of changes in accumulated reserves as at 30 June 2024, statement of cash flows for the year then ended and a summary of significant accounting policies and other explanatory notes.

In our opinion, the financial statements present fairly, in all material respects, the financial position of HAU Ltd as at 30 June 2024, and its financial performance and cash flows for the year then ended in accordance with HAU Ltd accounting policies and procedures set out on pages 17 to 19.

### **Basis for Opinion**

We conducted our audit in accordance with International Standards on Auditing (ISAs). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the organization in accordance with the International Federation of Accountants' Code of Ethics for Professional Accountants (IFAC Code) and other independence requirements applicable to performing audits of HAU Ltd. We have fulfilled our other ethical responsibilities in accordance with the IFAC Code, and in accordance with other ethical requirements applicable to performing the audit of HAU. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### **Key Audit Matter**

Key audit matters are those matters that, in the auditor's professional judgment, were of most significance in the audit of the financial statements of the period 01 July 2023 to 30 June 2024. These matters were addressed in the context of the audit of the financial statements as a whole, and in forming the auditor's opinion thereon, and the auditor does not provide a separate opinion on these matters.

There were no key audit matters.

### Other Information

Management is responsible for the other information. The other information comprises information contained in the report of management. The other information does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express an audit opinion or any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information; we are required to report that fact. We have nothing to report in this regard.

### Responsibilities of the Management for the Financial Statements

The management is responsible for the preparation and fair presentation of the financial statements in accordance with HAU Ltd accounting policies and procedures, and for such internal control as the management determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the management is responsible for assessing the organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the management either intend to liquidate the organization or to cease operations, or have no realistic alternative but to do so.

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements. As part of an audit in accordance with ISAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

• Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit
  procedures that are appropriate in the circumstances and to enable us assess the adequacy and
  effectiveness of the organization internal control system.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by HAU.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the management regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

From the matters communicated with those charged with governance, we determine those matters that were of most significance in the audit of the Financial Statements of the current period and are therefore the key audit matters. We describe these matters in our auditor's report unless law or regulation precludes public disclosure about the matter or when, in extremely rare circumstances, we determine that a matter should not be communicated in our report because the adverse consequences of doing so would reasonably be expected to outweigh the public interest benefits of such communication.

### Restriction on distribution and use of this report

This is a special purpose and confidential report for use by HAU Ltd and HAU Ltd.'s Funders. The financial statements have been prepared to provide information to HAU Ltd and HAU Ltd.'s Funders on the use of donor funds disbursed by HAU Ltd.'s Funders and other donors to HAU Ltd. As a result, the special purpose financial statements may not be suitable for another purpose.

The engagement partner on the audit resulting in this independent auditor's report is **CPA Mariam** Namuyige P0244.

Mariam Namuyige - Audit

Partner

TMK & CO. Certified Public

TMK & CO. Certified Public Accountants, 6th Floor, Workers House, Plot 1 Pilkington Road, Kampala, Uganda.

**Ref: TMK/HAU/019/24** 

Date: 29/11/2024

### STATEMENT OF INCOME AND EXPENDITURE

	Notes	BUDGET 2023/2024	2023/2024 Ushs	2022/2023 Ushs
INCOME	1			
Cash Donations	(a)	1,788,675,343	1,960,744,391	1,610,761,915
Generated Incomes	(b)	1,806,438,470	1,674,232,848	1,709,778,489
Donations in Kind	(c)	96,626,149	128,713,040	120,534,262
Total Income	_	3,691,739,962	3,763,690,279	3,441,074,666
Expenses	_			
HKLA Clinical Costs	5 (a)	656,867,576	778,142,653	653,521,621
LHH Costs	5 (b)	433,174,720	426,066,385	354,970,044
MHM Costs	5 (c)	647,873,630	734,268,161	625,105,154
Education Costs	6	585,887,057	688,289,846	552,147,159
HKLA - International Programmes	7	425,458,670	341,379,672	307,274,292
MPU costs	8.	849,557,544	774,424,936	664,223,447
Other Administrative Costs	9	92,920,765	43,127,847	61,746,949
<b>Total Expenses</b>	_	3,691,739,962	3,785,699,500	3,218,988,666
Deficit/Surplus	_	-	(22,009,221)	222,086,000

The significant accounting policies and notes to the financial statements on pages 17 to 26 form an integral part of these financial statements.

Report of independent auditors is set out on pages 9 to 12.

STATEMENT OF FINANCE	IAL POSITIO	N	
		2024	2023
	Notes	UGX	UGX
Non-Current Assets	2		
Property and equipment	(a)	3,314,157,382	3,268,445,820
Leasehold land	(b)	139,855,859	154,648,327
· ·	_	3,454,013,241	3,423,094,147
Current Assets	3		
Inventory	(a)	196,102,645	67,475,283
Debtors and prepayment	(b)	194,152,514	625,367,371
Cash & cash equivalents	(c)	1,074,706,542	547,275,007
Prepayment (RoU)	2(b,a)	122,320,045	36,080,000
	_	1,587,281,746	1,276,197,661
Total Assets	Konne	5,041,294,987	4,699,291,808
Funds & Liabilities			
Capital Fund		3,454,013,240	3,423,094,147
General Fund		641,682,234	741,753,575
Restricted fund (schd.2)		685,391,895	233,253,863
Total Funds	_	4,781,087,369	4,398,101,585
Current Liabilities	4		
Trade and other payables	(a)	180,013,171	212 524 692
Deferred Income(schd.3)			213,534,682
	(b)	80,194,447	87,655,541
Total Funds and Liabilities	_	260,207,618	301,190,223
Total Funds and Liabilities	-	5,041,294,987	4,699,291,808

**Board Chair** 

Secretary/Treasurer

The significant accounting policies and notes to the financial statements on pages 17 to 26 form an integral part of these financial statements.

Report of independent auditors is set out on pages 9 to 12

## TMK & CO.

# HOSPICE AFRICA UGANDA LTD FINANCIAL STATEMENTS FOR YEAR ENDED 30 JUNE 2024

# STATEMENT OF CHANGES IN ACCUMULATED RESERVES

	Note	Capital Fund	General Fund	Restricted Fund	Total
V 20 1 201		NGX	NGX	NGX	NGX
At start of the year Deficit for the year Receipts during the year		3,423,094,147	741,753,576 (22,009,221) -	233,253,864	4,398,101,585 (22,009,221) 2,274,603,421
Additions to property and equipment Expenses during the year Depreciation for the year		142,389,060	1 1 1	- (1,865,081531)	142,389,060 (1,891,076,180) (96,677,500)
Amortization for the year Prior year adjustments**		(14,792,467)	(78,062,121)	1 1	(14,792,467) (78,062,121)
At end of the year	l	3,454,013,240	641,682,234	685,391,895	4,781,087,369
Year ended 30 June 2023 At start of the year Surplus for the year Receipts during the year Additions to property and		3,545,313,211	559,501,269 222,086,000	133,663,344 - 1,623,258,303	4,238,477,824 222,086,000 1,623,258,303
equipment Expenses during the year Depreciation for the year Amortization for the vear		12,262,120 - (119,688,717) (14,792,467)		- (1,523,667,784) -	12,262,120 (1,523,667,784) (119,688,717) (14,792,467)
Prior year adjustments** At end of the year Note:		3,423,094,147	(39,833,694)	233,253,863	(39,833,694) (4,398,101,585)

### Note:

Prior Year Adjustments:

General Fund Adjustments: The total adjustment amounts to UGX 78,062,121, which includes HAF Contribution of UGX 80,785,034, a 6% WHT Credit of UGX 9,667,630, a GAC Germany Fund Balance of UGX 9,014,667, and Francophone Placement Fees for Sponsored Students of UGX 216,298. This particular amount was recorded as income on two separate occasions in the QuickBooks accounting system over the years 2021 to 2023.

STATEMENT OF CASH FLOWS			
	Notes	2023/2024	2022/2023
Cash Flows from / used in Operating			
activities			
(Deficit)/ Surplus for the year		(22,009,221)	222,086,000
Adjustments in gen fund		(78,062,121)	(39,833,694)
		(100,071,342)	182,252,306
Changes in Working Capital			
Inventories	3(a)	(128,627,362)	(42,562,145)
Trade and other receivables	3(b)	431,214,857	(273,202,337)
Trade and other payables	4(a)	(33,521,511)	95,913,445
Deferred Income	4(b)	(7,461,094)	(40,856,679)
Increase in prepayment (RoU)		(86,240,045)	(36,080,000)
Net Cash Used in Operating Activities		175,364,845	(296,787,716)
Net Cash Used in Investing activities			
Additions – PPE	2(a)	(142,389,060)	(12,262,120)
Net Cash Used in investing Activities	-(")	(142,389,060)	$\frac{(12,262,120)}{(12,262,120)}$
C .			
Cashflow from financing activities			
Capital fund additions		142,389,060	12,262,120
Restricted fund movement		452,138,032	99,590,519
Net Cash generated from financing Activities		594,527,092	111,852,639
Increase/(decrease) in Cash and cash equivalent		527,431,535	(14,944,891)
Movement in cash and cash equivalent			
At Start of year		547,275,007	562,219,898
Increase/ (Decrease)		527,431,535	(14,944,891)
At end of year	3(c)	1,074,706,542	547,275,007

### SIGNIFICANT ACCOUNTING POLICIES

The significant accounting policies adopted in the preparation of these financial statements are set out below.

### a) Basis of preparation

The financial statements which are presented in Uganda shillings have been prepared under the historical cost convention except were indicated otherwise in accordance to the Organization's financial and accounting policies summarized as follows:

### b) Expenditure recognition

Expenses are recognized on accrual basis (when they are incurred). Advances to individuals for activities that have not been accounted for are recorded as receivables. Confirmed obligations to individuals and third parties that have not been settled are recorded as payables.

### c) Revenue recognition

The different categories of revenue are recognized as follows:

- Interest income is recognized on time proportionate basis.
- Donations in-kind are recognized at the market value.
- Receipts under restricted funds are deferred and recognized as revenue only when expenditure is incurred. Unspent funds are recognized as restricted fund balance.
- Internally generated income Tuition fees and oral morphine are recognized on accrual basis.

The fund balance on donations at the end of the period is carried forward to the next period in accordance with the grant agreements.

### d) Deferred income

Deferred income relates to revenue that is received during the current period but the organization has not yet utilized it for the intended purpose nor earned it.

### e) Capital fund

Property and equipment bought using donor funds or donations in kinds are expensed fully to the income and expenditure statement in the year of acquisition. They are then recognized on the statement of financial position; debiting the fixed asset account and crediting the capital fund account. Depreciation of the property and equipment is therefore charged to the capital fund.

### f) Depreciation of Non-current assets

Property and equipment are depreciated at rates calculated to write them off over their estimated useful lives on a straight – line basis using the following rates:

### HAU BOARD OF DIRECTORS

Name	Title	
Ms. Joy Mirembe Abola	Board Chairperson	
Dr. Anne Merriman	Founder Member	
Dr. Alfred Kenneth Kiiza (PhD)	Vice Chairman	
Mr. Michael Corless	Treasurer	
Dr. Edwin Mugume	MHM Board representative	
Dr. Paddy Mugambe (PhD)	Member	Ratified at AGM Dec 2023
Ms. Rose Kiwanuka	Member	Ratified at AGM Dec 2023
Ms. Jackie Katana	Member	Ratified at AGM Dec 2023
Ms. Fazal Mbaraka	Member	Ratified at AGM Dec 2023
Mr. Richard Adubango	Board Secretary	Co-opted April 2024
Ms. Catherine Kobusinge Kamanyire	LHH Board Representative	Co-opted August 2024

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