



Seed  
GLOBAL HEALTH

# 2025 Uganda Annual Report

Strengthening health  
systems through people,  
practice, and policy



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# Message from the Board Chairperson

It is my pleasure to share this message on behalf of the board of Seed Global Health Uganda. The year 2025 has been one of complexity and transition. Global funding shifts and resource constraints have posed significant challenges. Yet amid this uncertainty Seed Global Health Uganda has remained steady in its commitment to strengthening the health workforce and advancing high quality, equitable care for all Ugandans.

What has stood out the most this year is the resilience and dedication of the people who make our work possible. Across hospitals, universities, and communities, health workers, educators, and students have continued to innovate and serve despite difficult circumstances. Their commitment has ensured that progress did not stall but deepened. This report illustrates that impact clearly. These achievements reaffirm a principle at the heart of Seed's mission: health systems are strengthened by people.

On behalf of the board, I extend sincere appreciation to the Ministry of Health, our academic and clinical partners, and our donors whose support has enabled Seed Global Health Uganda to remain a reliable, future-focused partner during a challenging year. Your trust and collaboration are essential to the progress we continue to make together.

As we look ahead, we remain committed to deepening partnerships, expanding impact, and supporting Uganda's health system to meet both current needs and future challenges. I invite you to reflect on the progress captured in this report and to continue walking with us as we strive for a stronger, more resilient health system for all.

Warm regards,

**Dr. Vincent Oketcho**

Board Chairperson, Seed Global Health, Uganda



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As we look ahead, we remain committed to deepening partnerships, expanding impact, and supporting Uganda's health system to meet both current needs and future challenges.

– Dr. Vincent Oketcho

# Message from the Country Director



Greetings from Seed Global Health Uganda. The year 2025 has been a year like no other. From abrupt shifts in the global funding landscape affecting organizations like ours to political and civil unrest across some of the regions we work in, the context in which we operate has been deeply challenging. Yet through it all, one thing has remained constant: our unwavering commitment to strengthening Uganda's health system and supporting the health workers who keep it functioning every day.

In the face of uncertainty, our team and partners have shown resilience, adaptability, and remarkable dedication. We have continued to show up for our communities and our country, doing the work that needs to be done; the work that matters. This steadfastness has enabled Seed Global Health Uganda to not only sustain but expand our impact during a year defined by complexity.

I am proud to share that our programs have continued to drive meaningful change across the health system. Through both national and regional initiatives, our programs have strengthened

emergency, maternal, child, and newborn care across all 146 districts, reaching thousands of health workers with high-quality, context-specific training, and improving care for hundreds of thousands of patients through quality improvement initiatives, infrastructure, and equipment.

The stories in this report illustrate Seed's contribution across all six building blocks of Uganda's health system: from service delivery and health workforce development to leadership, governance, financing, medicines/technologies and information systems. They reaffirm our identity as a reliable, trusted, and solutions driven health system strengthening partner.

I extend my deepest gratitude to our partners in the Ministry of Health, our academic and clinical collaborators, our dedicated educators and health workers, and our donors who continue to believe in our mission. Your support has enabled us to remain steadfast during a turbulent year, and together we have continued to advance a stronger, more resilient health system for Uganda.

As you read this annual report, I hope you are encouraged by the stories of commitment, innovation, and impact that define our work. Thank you for walking this journey with us.

Warm regards,

**Irene Atuhairwe**

Country Director

Seed Global Health, Uganda



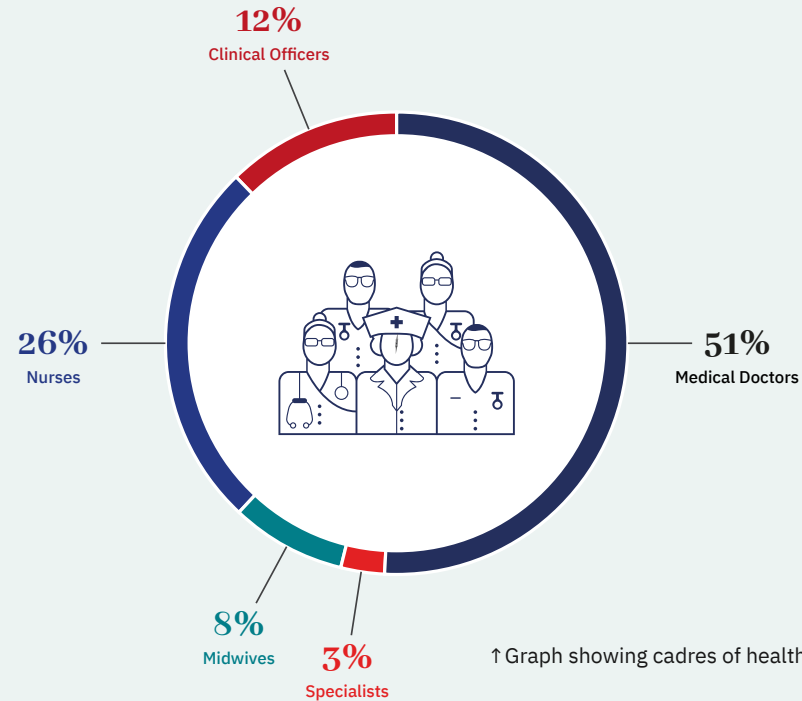
**In the face of uncertainty, our team and partners have shown resilience, adaptability, and remarkable dedication.**

**– Irene Atuhairwe**

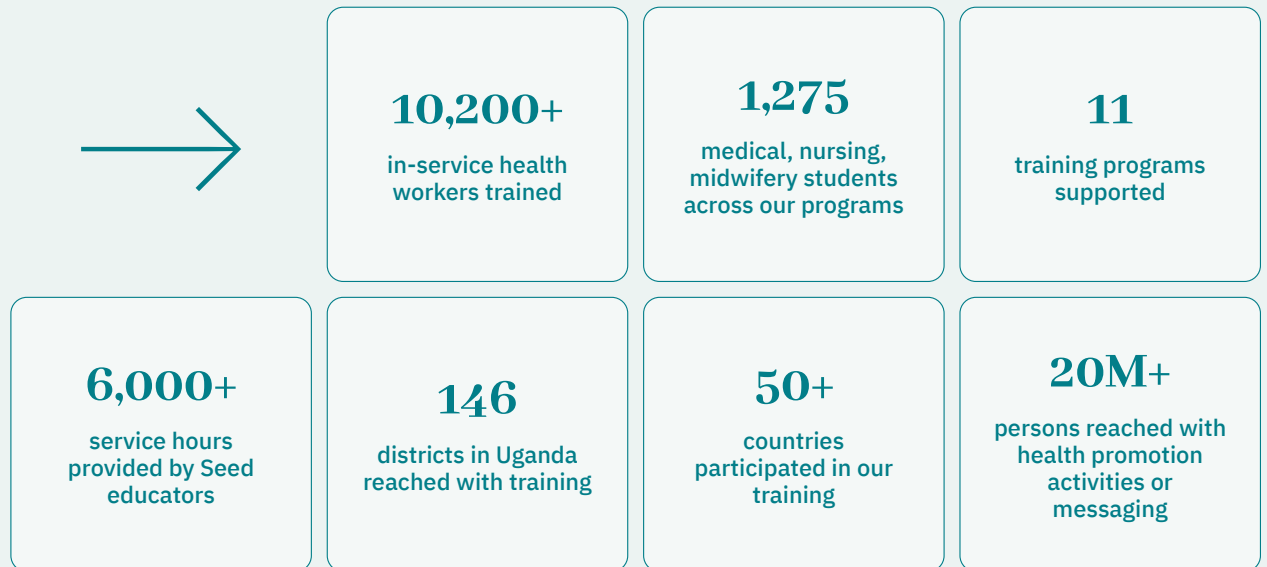
# 2025 impact at a glance

In 2025, through integrated investments in education, clinical practice, and health policy, Seed supported measurable improvements in maternal, newborn, and emergency care across the country.

## Our Reach



↑ Graph showing cadres of health workers that were trained.



## Health and education outcomes

These outcomes highlight the measurable gains in patient survival and learner progression resulting from Seed's investments in education and clinical practice:

**23%** reduction in institutional maternal mortality ratio across supported sites

**4%** reduction in institutional perinatal mortality ratio across supported sites

**4%** reduction in institutional neonatal mortality ratio across supported sites

**18%** reduction in institutional child mortality ratio across supported sites

**272** graduates from medical, nursing, and midwifery programs

**100%** of the active students in Seed-supported programs progressed to the next academic year

## Why this matters

By investing in people, strengthening practice environments, and shaping policy, Seed helps ensure that Uganda's health system is stronger, more equitable, and more resilient, thus capable of delivering high-quality care today and in the future.

Dive deeper into the report to find out more about our work.

## Infrastructure

Targeted infrastructure improvements expanded capacity, improved safety, and created better spaces for both service delivery and health professional training.



**2**

operating theaters refurbished or expanded



**2**

skills laboratories constructed



**5**

hospitals supplied with essential equipment



↑ EMS resident in training session.

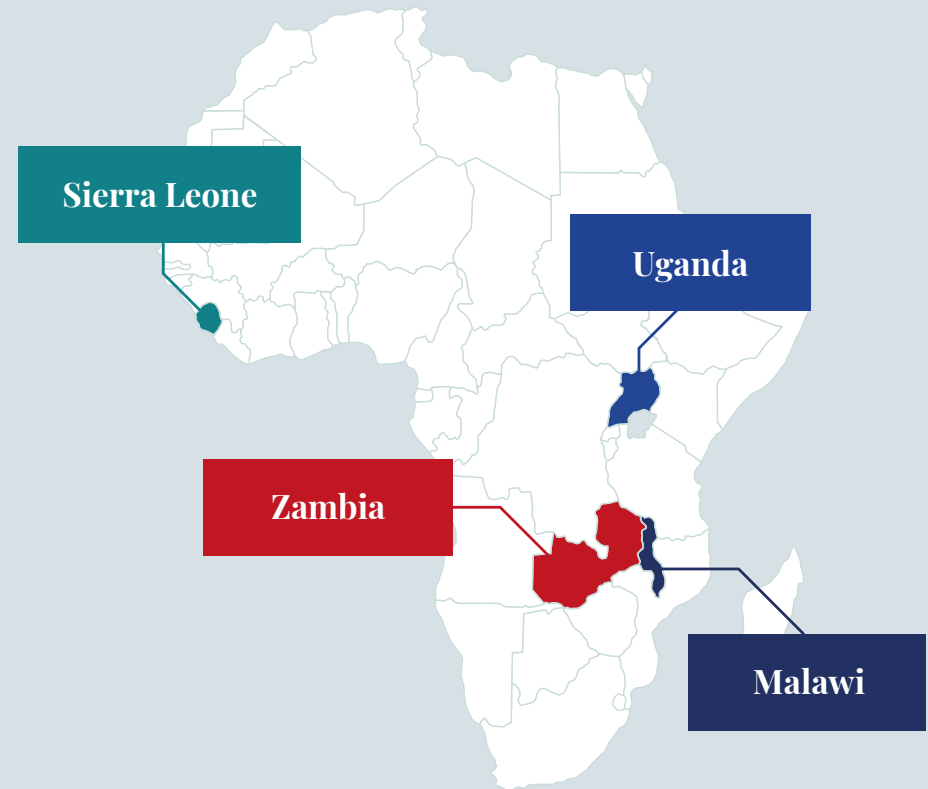
# How We Work

Seed Global Health Uganda is part of Seed Global Health, an international nongovernmental organization founded in 2011 to strengthen health systems. Since then, Seed has partnered with governments, universities, and health facilities to build long-term, sustainable capacity across Africa. Today, the organization works in Uganda, Malawi, Sierra Leone, and Zambia.

In Uganda, Seed operates as a dedicated health system strengthening partner committed to expanding access to high-quality care and improving health outcomes for all. Our work is grounded in long-standing partnerships with the Ministry of Health, academic institutions, and frontline health facilities. We believe that lasting change is driven by people, and our efforts focus on strengthening the essential building blocks of Uganda's health system including service delivery, the health workforce, information systems, medical products and technologies, financing, and leadership and governance.

Our approach is implemented through three interconnected pathways: Education, Practice, and Policy. Through our education pathway, Seed strengthens both pre-service and in-service training by enhancing curricula, supporting faculty development, advancing specialist training, and introducing innovative learning models such as simulation and telemonitoring. These investments ensure that doctors, nurses, midwives, and other health professionals are well-prepared, competent, and confident as they enter and progress within the health system.

Through our practice pathway, we work directly with hospitals and health facilities to improve the quality of patient care. This includes strengthening emergency, maternal, and newborn care services. These efforts ensure that health workers can apply their skills effectively and consistently in real-world settings.



Our policy pathway complements this work by engaging national and global stakeholders to advocate for the investments, policies, and frameworks needed for the health system to thrive. Through this effort, Seed helps to create an enabling environment for high-quality care across the country.

Together, these pathways reflect our comprehensive, long-term approach to strengthening Uganda's health system. As you read this annual report, you will see how these efforts came to life throughout 2025, from building emergency care capacity and expanding neonatal services to supporting specialist impact in underserved regions and empowering students to extend life-saving skills into their communities. Seed Global Health Uganda remains committed to strengthening the systems and the people who make health possible.

# Establishing Uganda's first formal neonatal training programs



In 2025, Seed began the work of establishing Uganda's first formal neonatal training programs. Seed partnered with Makerere University to unlock an accreditation for a neonatology and perinatal medicine fellowship that had stalled for five years, leaving students unable to complete their training. With Seed's support, the program was accredited, and five new neonatologists graduated. They have since been deployed to newborn units across the country.

The need remains urgent. Neonatal mortality in Uganda is still high at 22 deaths per 1,000 live births (UDHS 2022), and the country only has approximately 10 practicing neonatologists. This is far fewer than needed to support newborn units at regional referral hospitals.

Uganda also does not yet have a formally trained neonatal nurse. To address this gap, Seed is partnering with Makerere University and Uganda Martyrs University to establish the country's first postgraduate diploma in neonatal nursing.

↑ Neonatal fellows providing care in the newborn intensive care unit (NICU) at a hospital in Kampala, Uganda.

# Closing the newborn survival gap: The perinatal and neonatal training initiative



**146**  
districts



**1,600**  
health facilities



**4,595**  
health workers trained



↑ Experts pose for a photo at the hub hosted by Seed Global Health.



# PRENATAL AND NEONATAL HEARTS OF BIRTH (HOB) SESSIONS

## Topic

"Approach to respiratory distress in newborns"



### Expert

**DR. KEIZA KIBEEEDI**  
Paediatrician-Neonatology Fellow



### Moderator

**DR. OLUPOT MOSES DONALD**  
Medical Officer



### Case Presenter

**Dr. Norah NABAGGALA NAMUYABA**  
Junior House Officer (Paed) Kawempe National Referral



### Nurse Expert

**Lt. Andrew TUMWINE**  
(RN/BSN/PGDME/MN S-Paed)  
Pediatric Nurse  
Joint Staff Health Services-UPDF.



### Chat Questions

**Dr. Ediam TOM DIDIMUS**  
Senior Consultant Paediatrician/Neonatologist



Register via Link or QR Code  
<https://slink.com/QxDIQ>



**FRIDAY**  
2:00PM - 4:00PM  
14TH NOVEMBER, 2025

Uganda's perinatal and neonatal mortality rate stands at 22 deaths per 1,000 live births, almost double the Sustainable Development Goal target 12, underscoring the urgent need for systemwide improvements in newborn care.



In response, Seed Global Health Uganda launched the Perinatal and Neonatal Training Initiative, a national effort to expand in-service clinical capacity.

The initiative delivers monthly, virtual telementoring sessions where national experts facilitate case based, context-specific learning. This regular engagement has built one of the largest clinical learning networks in the country.

Approximately 400 participants attend each session and to date, the program has reached 4,595 health care workers across all 146 districts, engaging a broad mix of nurses, midwives, clinicians, and pediatricians. This represents a truly nationwide footprint and demonstrates strong demand for continuous professional development across cadres.

Program data indicates that providers report improved clinical confidence, better recognition of neonatal danger signs, and increased use of timely referrals following the training. These are critical drivers of improved newborn survival. By expanding access to expert-led learning at scale, this initiative is strengthening the quality of care delivered at every level of the health system and positioning Uganda to reduce preventable neonatal deaths and move closer to national and global targets.

↑ A flyer inviting health workers to a training.

# Strengthening newborn survival through comprehensive in-service neonatal training



**123**  
health facilities



**180**  
health workers trained



↑ A midwife provides care, Mbale, Eastern Uganda.



↑ Dr. Juliet Adongo Ocol, neonatal fellow, checks on newborn twins at the NICU of the Mulago Specialized Women and Neonatal Hospital

Uganda continues to face a high burden of neonatal mortality driven by preventable and treatable conditions such as prematurity, birth asphyxia, neonatal sepsis, and feeding difficulties. Despite this, Uganda does not have any formally trained neonatal nurses. Care is provided by general nurses or midwives with limited knowledge and skills in delivering neonatal care.

In response to this challenge, in 2025 Seed designed and implemented a comprehensive, skills-based, in-service neonatal training program for nurses, midwives, and medical officers currently manning the country's neonatal units. The goal was to equip these health workers with the skills and knowledge to provide a better quality of newborn care.

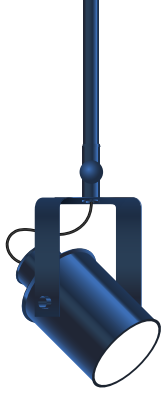
This neonatal training program was designed to strengthen frontline health worker capacity across the continuum of newborn care from delivery room stabilization to inpatient management and follow-up. The training adopted a competency-based approach, combining classroom instruction with simulation, case discussions, and bedside mentorship. Core modules included care of the newborn at birth, neonatal resuscitation, management of preterm and low-birth-weight infants, infection prevention and control, neonatal sepsis, feeding support, and developmentally supportive care.

Beyond technical skills, the training emphasized clinical decision-making, teamwork, and early identification of danger signs. Participants reported increased confidence in initiating timely interventions such as thermal care, CPAP initiation, safe oxygen use, and early referral of critically ill neonates. Pre- and post-training assessments demonstrated measurable improvements in knowledge and clinical reasoning while follow-up mentorship visits showed sustained application of skills in routine practice.

A key strength of the program was its emphasis on systems thinking. Health workers were supported to assess their neonatal units, identify gaps in equipment and workflow, and implement small, facility-led quality improvement initiatives. Several sites reorganized neonatal spaces, improved infection control practices, and introduced standardized admission and monitoring charts as a direct result of the training.

The impact of this investment extends beyond individual trainees. Trained clinicians are now serving as mentors to peers, contributing to a growing community of practice in neonatal care. In regions such as Karamoja and Eastern Uganda, returning specialists and trained nurses are cascading skills to district facilities, expanding access to quality newborn care where it is needed most.

By strengthening both skills and systems, the neonatal training program contributes directly to improved newborn survival and aligns with national priorities to reduce neonatal mortality. The program demonstrates that targeted, context-appropriate capacity building can deliver lasting impact for mothers, newborns, and families.



# Spotlight: Returning to serve: A neonatologist's impact in Karamoja

Seed Global Health's investment in specialist training is delivering measurable impact in some of Uganda's most underserved regions. A powerful example is Dr. Ediamu Tom Didimus, a neonatal and perinatal fellow who was supported through the postgraduate training program at Makerere University. Now a fully qualified neonatologist, Dr. Ediamu has returned to serve at Moroto Regional Referral Hospital (Moroto RRH) in the Karamoja region of Uganda; an area with a catchment population of 1.5 million people.

At Moroto RRH, Dr. Ediamu reorganized and now leads the hospital's 26-bed neonatal unit, which admits over 1,000 newborns each year. His presence has strengthened neonatal care through continuous bedside mentorship, case reviews, and clinical guidance for nurses, midwives, and doctors. This hands-on approach has significantly improved health worker confidence and clinical decision-making for small and sick newborns.

Beyond the hospital, Dr. Ediamu is extending expertise across the region. He recently led a regional in-service neonatal training that reached 20 health workers from multiple facilities across Karamoja, ensuring essential newborn care practices are being consistently applied beyond the referral hospital.

“

The training I received built my confidence and gave me the responsibility to serve where the need is greatest. Returning to Moroto — one of the hardest to reach areas — has allowed me to mentor others and see real improvements in newborn care every day.

Dr. Ediamu reflecting on his journey



↑ Dr. Ediamu leading a ward round in the NICU at Moroto RRH.

“

Since Dr. Ediamu returned, we receive regular mentorship and practical guidance. Our confidence is higher, teamwork is stronger, and we are providing better care for our babies.

A nurse from the unit echoed this impact

This story shows how Seed Global Health’s investment in specialist training, combined with supporting health workers to return to high-need regions, creates a powerful multiplier effect. By equipping specialists and enabling them to lead, mentor, and train others, Seed is strengthening neonatal care not just in one hospital but across an entire region.

# New rooms, new hope: Investing in the spaces mothers and newborns depend on



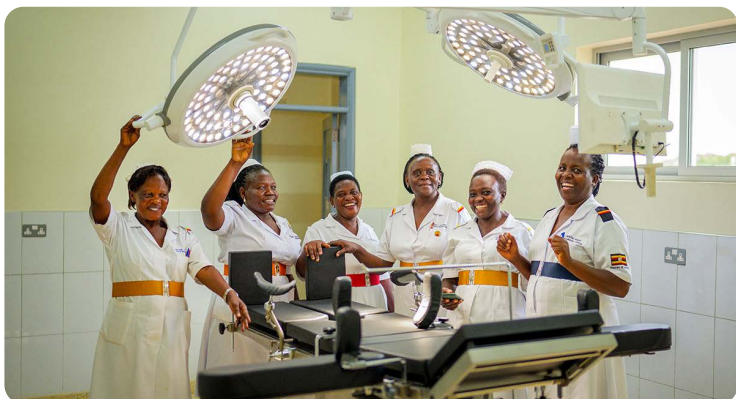
↑ The Minister of Health, Dr. Jane Ruth Aceng opens the newly renovated theater at Lira RRH.

At Lira RRH, Seed renovated the entire theatre complex, improving the operating environment for mothers and all surgical patients. This investment was designed in direct response to persistent delays in performing emergency surgeries, particularly for women experiencing obstetric complications. The expanded space has reduced congestion, improved decision-to-incision time, and created a more conducive learning environment for trainees rotating through the theater. Staff report smoother workflow, better coordination, and increased confidence in managing high-volume emergency cases.

These investments demonstrate the critical role that targeted infrastructure upgrades play in strengthening Uganda's health system. When paired with ongoing workforce development, mentorship, and governance support, improved physical environments help to build resilient surgical services that will continue to serve communities long after construction is complete. Seed's work in Lira and Mbale underscores our belief that strong health systems are built through the combined power of people, infrastructure, and sustained partnership.



➤ The opening of the renovated Mbale theater.



➤ Health workers pause for a photo in the new operating room.



➤ Health workers tour the new skills laboratory at Busitema University.

## Skills laboratory construction at Makerere and Busitema Universities

In 2025, Seed Global Health made a significant investment in strengthening health professional education by supporting the construction and establishment of modern skills laboratories at the nursing departments of Makerere University and Busitema University.

These new laboratories provide dedicated spaces where students can practice essential clinical skills in a safe, controlled, and well-equipped environment before performing them in real patient settings. By integrating simulation-based learning into their education, learners can build competence, confidence, and clinical judgment through repeated hands-on practice.

The facilities are expected to benefit thousands of students each year across both institutions, improving the learning experience for current trainees and future generations. The laboratories also expand access to training for learners from surrounding regions, strengthening the broader health workforce pipeline beyond Kampala and Eastern Uganda.

Beyond pre-service education, the laboratories will also support continuous professional development, allowing faculty, practicing clinicians, and visiting trainees to refine skills, conduct simulations, and participate in interprofessional learning.

By investing in these infrastructure upgrades, Seed is helping to ensure that Uganda's nursing and midwifery graduates enter the workforce better prepared, more confident, and more capable of meeting the needs of the communities they serve.

# Building Africa's largest emergency care learning platform



**52**  
countries



**146**  
districts across Uganda



**7,904**  
health workers



↑ Experts delivering a virtual training session using the ECHO platform.

The Emergency Medical Services (EMS) ECHO initiative continues to transform how in-service health care workers access high-quality, context relevant emergency care training in Uganda. By delivering expert mentorship directly to providers at their workplaces, the program minimizes service disruption while expanding access to continuous learning.

In 2025, EMS ECHO reached a major milestone: over 100 consecutive, biweekly sessions. This is a testament to its sustainability, reliability, and growing national and global influence. What began as a bold telemonitoring experiment in 2021 has evolved into a cornerstone of emergency care capacity building in Uganda and a model for the continent.

In 2025, the program trained 7,904 health care workers across 30 sessions. Each session averaged 600 participants from all 146 districts and every tier of the health system. Participation now extends beyond Uganda with learners and

partners from 52 countries partaking. This positions Uganda as a leader in innovative emergency care workforce development.

This year also marked a shift from traditional didactics to integrated, interdisciplinary simulation-based learning, blending clinical expertise with essential non-technical skills communication, teamwork, leadership, and rapid decision-making critical for high-stakes emergency settings. This approach is equipping providers to manage complex, time-sensitive emergencies more confidently and effectively.

The initiative's impact is reflected in the voices of participants (see below). Today, EMS ECHO stands as a national platform for standardized emergency care and an emerging reference point for similar programs across Africa. This is driving improved readiness, stronger teamwork, and better outcomes for patients in critical need.

“

EMS ECHO sessions are proof that Uganda can lead in building solutions that empower health workers and save lives nationally and globally.

Dr. John Baptist Waniaye,  
Commissioner, EMS, Ministry of Health

“

EMS ECHO has enabled me to engage with experts and super specialists I would never otherwise access.

Alice Kabasoga,  
Nurse, Mbale Regional Referral Hospital

“

The sessions are highly informative and have significantly improved our clinical skills. Bravo.

Participant feedback

# Preparing the next generation of emergency care providers

**Early recognition and timely management of emergency conditions are critical determinants of patient survival.**

To strengthen these skills among upcoming health professionals, Seed Global Health launched the Clinical Pathological Case (CPC) Initiative in 2025, an educational innovation transforming how learners master emergency care.

The CPC model is a student led, expert guided virtual learning platform that simulates real emergency department decision-making. Designed to address the absence of a formal emergency medicine curriculum in undergraduate training, it provides medical students, emergency medicine technician trainees, and residents with a safe, interactive, and context adapted environment to practice clinical reasoning, diagnosis, and management of common emergency conditions across Uganda.

Between January and December 2025, the program delivered 12 sessions, training over 1,480 learners with support from carefully selected national experts. Participation has grown steadily, drawing strong interest from both local trainees and international observers eager to learn from Uganda's approach to emergency care workforce development.

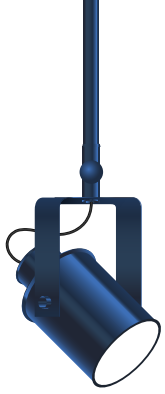
The CPC Initiative is shaping a more confident, better prepared generation of emergency care providers and strengthening clinical decision-making skills that are essential for improving outcomes in time critical situations.



↑ Students pose for a photo in the skills laboratory.



↑ Students attend a training session in the skills laboratory.



# Spotlight: From delays to lifelines: Strengthening referral care in Mbale, Eastern Uganda

**In emergency care, time can mean the difference between life and loss. For years, in Mbale that time was often lost within the referral system.**



Maternal mortality ratio reduced by

**47%**



Referrals declined by

**35%**

Mothers and critically ill patients travelled long distances from lower-level facilities to Mbale Regional Referral Hospital without early decisions, advance communication, or predictable transport. By the time they arrived, delays had already shaped their outcomes.

Health workers were committed and working under pressure, but weak communication between facilities, late referrals, limited stabilization before transfer, and minimal feedback created a fragile system. Patients often arrived without warning, leaving frontline providers navigating urgent decisions amid uncertainty: Should I refer now? Can I manage this patient? Will the receiving team be ready?

The transformation in Mbale began with a simple shift in understanding: an effective referral system is not just about moving patients, but about connecting care. Working alongside staff at Mbale Regional Referral Hospital and district leaders, Seed supported practical solutions to strengthen this connection. Health workers were supported to recognize emergencies earlier, stabilize patients before transfer, apply clear referral criteria, and document cases accurately. This restored confidence in clinical decision-making.

Communication, once a major gap, became a foundation of care. Seed supplied phones to enable pre-referral communication, allowing health workers to call the referral hospital before transferring patients. This simple change transformed care: receiving teams could prepare in advance, and treatment effectively began before the journey.

Seed also supported referral hospital teams to extend mentorship beyond hospital walls. Through fuel support, vehicle repairs, and facilitation for allowances and meals, teams conducted regular visits to referring facilities. These mentorship visits – combined with simulation drills on emergencies such as postpartum hemorrhage (PPH), pre-eclampsia, and newborn resuscitation – strengthened skills, improved teamwork, and enabled health workers to stabilize or manage conditions that previously required referral, bringing care closer to patients.

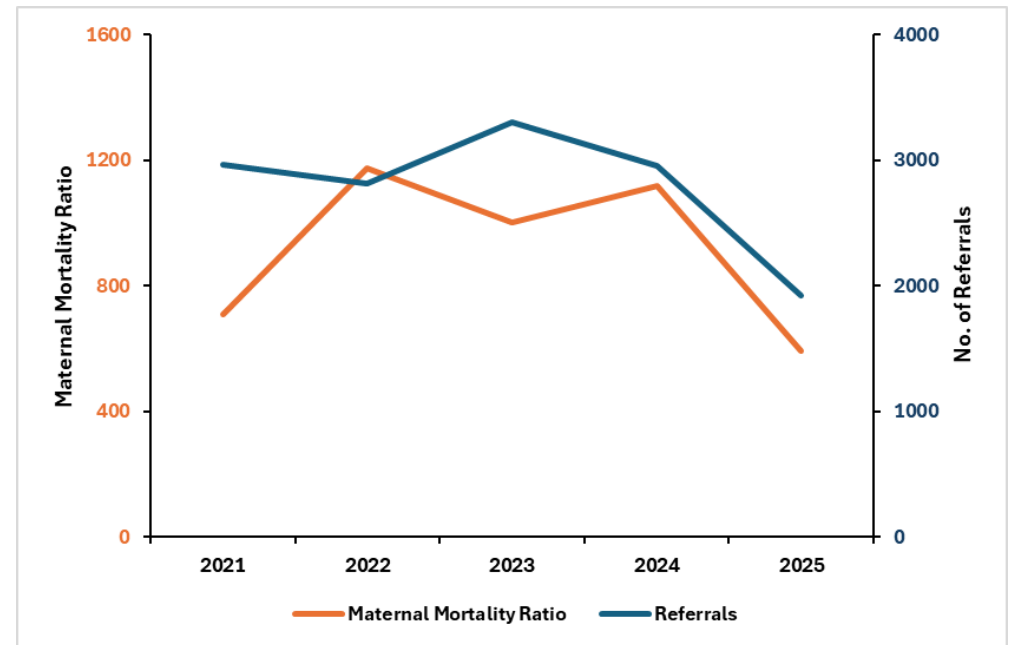
Data became a tool for improvement rather than judgment. With Seed’s support, referral data was reviewed to identify facilities with high referral rates and underlying challenges. District leaders and hospital teams worked collaboratively to address gaps through accountability and targeted support.



↑ Health workers review referral forms at Mbale RRH.

Over time, referrals became fewer but more appropriate, and decisions faster and more confident. Improved access to blood further reduced high-risk transfers, allowing treatment to begin sooner.

The impact became visible. Patients arrived earlier and in better condition. Collaboration across facilities strengthened. The number of maternal referrals declined by 35%. The maternal mortality ratio at Mbale Regional Referral Hospital declined by 47% in 2025.



↑ Graph showing maternal mortality ratio and referrals.

In Mbale, referrals are no longer a desperate last step. They are deliberate, coordinated actions within a system that works. Building on these results, Seed is now scaling these learnings to other regions, adapting this referral strengthening approach in partnership with district leaders and referral hospitals to deliver timely, high-quality emergency care for more patients, in more communities.



↓ Mentorship visit by Mbale RRRH staff to Budaka Health Centre, Eastern Uganda.

↑ Simulation drill in progress, Lira University.

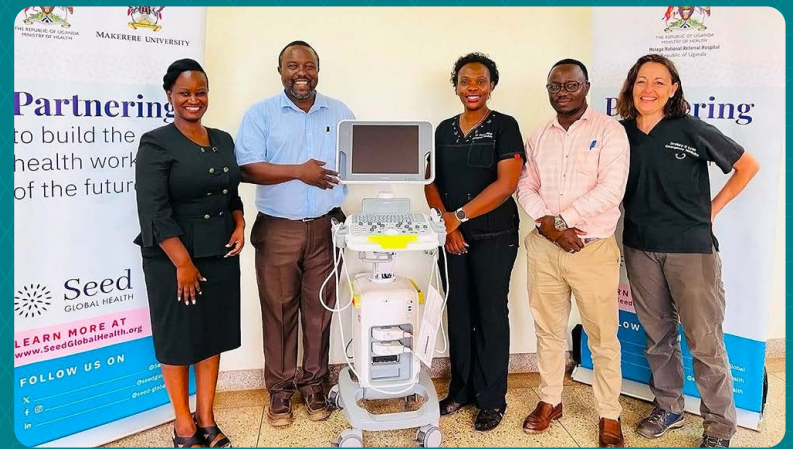


# Closing critical gaps through essential equipment support

In 2025, Seed Global Health provided critical medical equipment to partner hospitals across Uganda to help address long-standing gaps that affect the quality and timeliness of care. Many facilities continue to struggle with shortages of basic and life-saving tools, which limits their ability to respond effectively to emergencies and routine clinical needs. To strengthen service delivery, Seed supplied a range of essential items, including theater beds, autoclaves, vital signs monitors, glucometers, ultrasound machines, patient beds, and mattresses.

These investments have directly improved surgical capacity, diagnostic accuracy, infection prevention, and the overall safety of inpatient and maternity services. Hospitals report smoother workflow, fewer delays linked to equipment breakdown or shortages, and greater confidence among staff who now have reliable tools to support patient care.

Most importantly, these donations have benefited hundreds of thousands of patients nationwide by enabling faster, safer, and more dignified care. When paired with ongoing mentorship and training, this equipment strengthens the foundation of facility-level service delivery and contributes to a more resilient health system.



↑ Equipment handover to hospitals.

# Bridging human resource gaps through technical expertise



8

expatriates placed in universities



1,200+

students taught



4

midwives placed in hospitals



50,000+

patients taken care of



↑ Dr. Alain, a pediatrics Seed educator provides mentorship to health workers.

A strong and well-trained health workforce is the foundation of every effective health system. Yet across Uganda, critical shortages of qualified faculty and frontline health workers continue to limit the quality of training and the delivery of essential services. In response, Seed Global Health continues to invest in bridging these gaps by placing experienced health professionals where they are needed most.

## Seed educators strengthening academic and clinical training

In 2025, Seed placed eight expatriate health workers and educators, known as Seed educators, in partner universities and hospitals across Uganda. These educators serve as full-time faculty for a minimum of one year. This is an approach that is significantly more cost-effective than sending small numbers of Ugandan students abroad for specialist training. By pairing experienced educators and clinicians with local teams for at least one year, Seed helps build long-lasting capacity within Uganda's health system, strengthening both pre-service education and frontline service delivery.

This model has enabled Seed Uganda to establish and sustain specialties that previously lacked local faculty, including emergency medicine and neonatal nursing. In addition, existing programs such as midwifery, pediatrics, and general nursing have been strengthened through the presence of experienced educators from more advanced health systems.

Seed educators contribute far beyond classroom teaching. They offer bedside mentorship, support curriculum development, co-deliver simulation-based learning, and help academic departments build long-term institutional capacity. Their presence accelerates skill transfer, builds confidence among trainees, and expands the

pipeline of well-trained specialists who are essential for Uganda's future health system. Throughout 2025, Seed educators have taught thousands of students and provided care to tens of thousands of patients.



↑ Emergency medicine Seed educators, Dr. Tracy (top) and Dr. Tenaya (right), demonstrate skills to students.

## Supporting critical shortages at Arua Regional Referral Hospital

In 2025, Seed also deployed four midwives to Arua Regional Referral Hospital in response to severe staff shortages. Serving a catchment population of more than 3.5 million people, the hospital manages a high volume of births every month and remains one of the busiest maternity units in northern Uganda.

The Seed-supported midwives have played a key role in direct patient care, supporting labor wards, providing emergency obstetric care, and strengthening infection prevention practices. Their presence has reduced provider burnout, improved continuity of care, and supported safer deliveries at a facility that receives large numbers of high-risk cases.

These staffing and faculty placements demonstrate Seed's commitment to technical support that is strategic, sustainable, and responsive to partner needs.

Through these efforts, Seed continues to address Uganda's human resource gaps in a meaningful and practical way, ensuring that health workers and the institutions that train them are better equipped to deliver high-quality care today and for years to come.



↑ Dr. Tenaya teaching the BLS course.

# Students rising to the challenge: Strengthening community health through Seed supported initiatives

Seed Global Health is committed to nurturing the next generation of health professionals, not only as future clinicians but as leaders, educators, and advocates. Across Uganda, this commitment is taking shape through student-driven initiatives that are extending life-saving skills beyond universities and into communities.

Two powerful examples from Mbarara University of Science and Technology (MUST) and Lira University show how young trainees, when supported with the right tools and mentorship, are already strengthening Uganda's health system.

## **Empowering the next generation of first responders in Mbarara**

In Mbarara, the MUST Emergency Medicine Interest Group (MUST EMIG) launched a community-based effort to equip secondary school students with essential basic life support and first aid skills. With support from Seed Global Health, EMIG members were trained by emergency medicine residents to deliver practical, hands-on sessions in local schools.

These student trainers then reached 220 learners across three schools: Welden High School, Global High School, and St. Joseph's Vocational High School. Through a peer-to-peer learning approach they created a safe and engaging environment where learners practiced cardiopulmonary resuscitation (CPR), choking management, and first response techniques using mannequins and interactive demonstrations.

Seed's support, including training materials, facilitation, and transport, enabled this outreach to thrive. The initiative now plans to expand to more schools, form first aid clubs, and continue mentorship as part of a growing culture of youth led emergency preparedness.



➤ Students lead community outreach visits in Lira, Northern Uganda.

### Student-led maternal and newborn health education in Lira

In Northern Uganda, students from the Lira University Midwifery Society, supported by Seed Global Health, took health education into the heart of communities.

Focusing on two leading contributors to maternal and newborn mortality, prematurity, and postpartum hemorrhage (PPH), the team conducted community outreaches during market days and religious gatherings. Their efforts reached more than 1,500 people within the communities.

The students are now planning integrated outreach efforts in collaboration with Lira University Hospital and Lira Regional Referral Hospital. Future services will include cervical cancer screening, HIV testing, family planning, and nutrition assessments. This will expand their contribution from awareness raising to service delivery support.

### Building tomorrow's health leaders today

Together, these initiatives reflect the power of student-led action supported by strategic investment. With Seed Global Health's guidance, mentorship, and logistical backing, students are:

- Applying classroom knowledge in real world settings;
- Strengthening emergency response capacity;
- Elevating maternal and newborn health literacy;
- Cultivating leadership, teamwork, and community engagement skills; and
- Contributing directly to healthier schools, families, and communities.

From Mbarara and Lira, Uganda's future clinicians are not waiting for graduation to make an impact. They are already shaping a stronger, more community-centered health system. Through these partnerships, Seed Global Health continues to champion a generation of health professionals who are skilled, confident, and deeply connected to the communities they serve.



➤ Students lead community outreach visits in Lira, Northern Uganda.

# Building an informed and prepared Uganda: Community engagement for better health outcomes



**20M+**

people reached across Uganda

Community awareness and advocacy are essential components of a responsive health system. During the reporting year, we supported and participated in multiple community engagement and advocacy initiatives aimed at improving recognition of danger signs, timely care-seeking, and public support for emergency and maternal health services.



↑ Health promotion activities across the country.

Key advocacy moments included campaigns around PPH, pre-eclampsia and eclampsia, World Prematurity Day, and EMS Day. These events were leveraged as opportunities to engage communities, health workers, policymakers, and the media in dialogue about preventable causes of maternal and neonatal mortality.

Through community dialogues, radio talk shows, health facility outreaches, and commemorative events, we amplified critical messages on early warning signs, birth preparedness, and the importance of timely referral. Emphasis was placed on prematurity and newborn survival, highlighting both the challenges faced by families and the simple, life-saving interventions that can make a difference.

EMS Day activities focused on increasing public understanding of emergency care systems and the role of coordinated referral and transport in saving lives. Demonstrations, stakeholder engagements, and health worker testimonies helped demystify emergency services and build trust between communities and providers.

Importantly, these advocacy efforts were not standalone events. They were intentionally linked to ongoing service delivery improvements, training programs, and referral system strengthening. Community members were informed not only about risks, but also about where and how to seek care reinforcing the connection between awareness and action.

The result has been increased visibility of emergency and maternal health issues at community and district levels, stronger engagement between health facilities and their catchment populations, and growing advocacy for sustained investment in lifesaving services. These efforts underscore the importance of community partnership in achieving lasting health outcomes.



↑ Health promotion activities across the country.

# Strengthening health management information systems (HMIS) in Uganda



↑ Health facility documentation of patient data after EMR implementation.



↑ Health facility documentation of patient data before EMR implementation.

The Ministry of Health is advancing a nationwide plan to transition all health facilities from paper-based systems to an electronic medical records (EMR) system, beginning with national and regional referral hospitals before gradually extending to lower-level health centers.

In 2025, Seed Global Health supported the rollout of the EMR system in four partner regional referral hospitals: Mbale, Mbarara, Lira, and Arua. This support focused on building the foundations required for effective digital data management.

Seed's contribution included training health facility teams, facilitating technical teams to install EMR infrastructure, and procuring laptops and printers to support accurate and efficient data capture. Seed also continues to provide ongoing mentorship through refresher trainings and routine data quality assessments to strengthen system, data quality.

Early results show clear improvements in data quality. The four hospitals report better-quality patient data, timely reporting, and enhanced efficiency in record keeping. These gains are helping facilities make faster, more informed decisions while contributing to stronger national health information systems.

# Policy: Shaping Uganda's health workforce reform

In 2025, Seed Global Health advanced policy change by connecting frontline workforce realities, robust evidence, and national decision-making processes to strengthen Uganda's health system.

Through strategic convening, technical engagement, and partnership with government and stakeholders, policy engagement supported reforms aimed at building a resilient, accountable, and adequately staffed health workforce.



↑ Seed and Ministry of Health Uganda at COP30 in Brazil.

## From evidence to action: Informing national policy

Throughout the year, Seed Global Health engaged in key national policy processes shaping Uganda's health sector. Participation in consultations around the National Health Compact, the Human Resources for Health Strategic Plan, and Universal Health Coverage (UHC) reforms helped ensure workforce realities and data informed national priorities.

Support to the Ministry of Health on the National Health Workforce Accounts strengthened coordination among partners involved in workforce data collection and analysis. These engagements underscored the importance of reliable, disaggregated data — particularly at district level — and highlighted gaps in capturing private sector workforce information critical for national planning.

## Convening for alignment and accountability

A core element of Seed Global Health's policy approach was convening diverse actors to address shared health workforce challenges. Engagement in national coordination platforms, technical working groups, and stakeholder consultations facilitated dialogue across government institutions, referral hospitals, academic institutions, development partners, and civil society.

These platforms enabled alignment around workforce priorities and reinforced a shared commitment to coordinated, government-led reform; principles reflected in the development of Uganda's National Health Compact.

## A compact built on country leadership

Seed Global Health played a vital role in supporting the development of Uganda's National Health Compact, working alongside government and partners to ensure health workforce priorities, implementation realities, and accountability mechanisms were embedded.

Anchored in national strategies and UHC goals, the Compact represents a shift toward a more coordinated approach to health sector financing and reform. Approximately 54% of financing is planned from domestic sources, underscoring Uganda's commitment to sustainable, country-owned health system transformation. Seed Global Health will continue to support implementation of Compact commitments.

## Elevating frontline voices into policy

Field engagements with regional referral hospitals and universities grounded national policy discussions in frontline realities. Across referral facilities, severe staffing gaps — such as having only a fraction of the required midwives while managing hundreds of deliveries each month — illustrated systemic workforce challenges facing hospitals nationwide.

Similar constraints were evident across multiple regions with hospital leaders consistently highlighting acute shortages of key specialists, including anesthesiologists and emergency physicians. Engagements with academic institutions pointed to progress in expanding health training programs, alongside persistent challenges related to faculty capacity and adequate internship placements for graduates.

Together, these frontline insights informed national policy conversations, ensuring that workforce planning and reform efforts reflect the lived realities of those delivering services and training the next generation of health professionals.

### **Expanding the agenda: Climate and health workforce**

In 2025, policy engagement also expanded to address the intersection of climate change and health systems. Participation in national climate and health coordination meetings and a climate-smart health workforce workshop advanced discussions on how Uganda's workforce can respond to emerging climate-related health threats.

These engagements supported implementation of Uganda's Health National Adaptation Plan and helped integrate workforce considerations into broader climate resilience efforts.

## **Looking ahead**

By aligning evidence, frontline experience, and government-led reform, 2025 marked a pivotal year for policy engagement in Uganda.

These efforts are laying the foundation for a coordinated, resilient health workforce; one capable of advancing UHC and responding to future challenges.

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