Interviewing From the Shores of Lake Victoria with @child2youthfoundation754 Transcript

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Intro and Uganda Trip Overview

Welcome to the Doctors Making a Difference podcast, where we help physicians to be empowered with the tools they need to successful in medicine, in finance, and in life.

Join us as we highlight doctors and other professionals around the world who are making a difference. This week's episode is a little bit different. I was able to go to Uganda to work with Child to Youth Foundation at the beginning of June 2025, and the interviews in this podcast were recorded on-site in Uganda.

You'll note that the audio quality is different because of being recorded onsite. I hope you'll be able to detect the amount of enthusiasm and excitement in the voices of those who are interviewed.

The work being done with Child to Youth Foundation is amazing and it's wonderful to return and work with this foundation that I've worked with off and on for the last 10 years.

I invite you to listen and I help you enjoy it. Today, we're here with my friend Ronnie. We're in Uganda on the north shores of Lake Victoria, the second largest freshwater lake in the world, second only to Lake Superior.

And we are in a beautiful fishing village here next to the shores Lake of Victoria and it's gorgeous. The birds you can hear are going crazy. They're so excited about being here.

lots of people who live in this beautiful village. And I was telling others on the trip, it's so beautiful here. If we were in California or somewhere in the United States, this would be the most premium property because it is right on this gorgeous lake with a beautiful view.

Here, it's a remote fishing village, and people are privileged to live in this gorgeous spot. But I'm here with Ronnie, who is one of the directors of The Child to Youth Foundation.

I've known Ronnie for, what, 10 years, quite a while. We've had several adventures in Uganda before. Ronnie why don't you introduce yourself to the audience?

I am Ronnie Chamberde. And Child Youth Foundation, it's an organization, is a child's organization that was started in 2005. With the knowledge of my dad, having the knowlege of education, he wanted to reach out to many children who need help with education.

Being a teacher he saw that so many our children were missing out of schools because of school fees. So he initiated the foundation to be set up and Slowly, it has been growing slowly and slowly.

But one of the activities of Child to Youth Foundation, they have two programs or projects that are running. One is a child sponsorship, where the children are being sponsored.

We get sponsors from all over the world, those who are willing to sponsor children from primary.

Ronnie on Child to Youth Foundation

level to university level or tertiary institution. Those who would love actually to end in between, they can go and gain skills. So with this education, it doesn't apply only on school fees or the tuition, but it goes along with what the children will need for the school.

When we talk about scholastic materials are provided, school uniform is provided and also the shoes, the socks, books, pens and pencils, they are all provided so that the children can be comfortable in class.

I didn't know that shoes and socks were part of it, because I know we've done child sponsorship for lots of students, but it's the books, the fees, and the tuition.

The basic school supplies, that uniform, which includes shoes, socks. Yeah, we include shoes because at one point we saw that some of the children may not feel comfortable going to school barefooted.

And most of schools actually at this moment put children put on shoes. So we found out that our children, they miss out a lot. So, we decided to provide them shoes and also the school bag where they can keep their books.

My wife and I have helped sponsor several students for the last 10 years through Child to Youth. The fee used to be about $330 per year. I think it went up a little bit this year just to try to make up for inflation, but it's by U. S.

terms, a relatively small amount, but that pays for a whole year of school fees and all that stuff. So Ronnie, one of the things I've thought about over the last 10 years as you and I have interacted is when we come for week and support you, and do medical clinics, we make a difference to maybe 2,000 or 3, 000 people.

We impact the lives of a small group, the foundation goes on and impacts Many thousands. And you have a presence in those communities every week. Some communities everyday.

Yes, that's right. Because for us as a foundation, we really want to go on the grassroot, where people actually stay. At the grassroots level. Yes. And be in position to see that the impact is being felt to the person who is the last one, the less person on their ground.

We don't focus more on leaders, because we work with them in order for to have that harmony. and a good relationship with them. But we've seen so many people that work with leaders.

And at the end, the impact may not be felt because most of the leaders, they really want to gain something out of that. Gotcha. Yeah. So for us, we try as much as we can to go to the grassroots.

Right. To the schools, right to children. Yes. The direct sponsorship of a child. That's right. Well, and if I'm right, Uganda doesn't have a large education system where children are automatically provided with schooling, is that correct?

Yeah. Well the government has, I think they are going to start to that, the sponsorship of children, but The schools for the government, they don't have most of the facilities, even the teachers, teachers are always poor quality teachers.

So you found that most our children go to private schools. Where private school is they take care of good children and they have the ability to see that the children, after their schooling, can do something out of that.

Yeah, well, that's, you know, they say you can't spend your way out of poverty, but you cannot educate your own way of the poverty. Yes. And that is what I have really enjoyed working with you these last few years.

The Foundation has been in place for 20 years now, from 2005 to 2025 now. but the impact that's left on these children. Now, many of the sponsored children have completed university studies and are working in various fields of employment, and they pull themselves out of poverty piece by piece.

Yeah. Actually, one of our lab technicians was actually a product of Childhood Foundation, he has graduated and is now working with us. That's been a fun thing this week.

We worked with that young man, Abdul. He has been part of a product of the program and is now serving back with Child to Youth and helping many people.

Yes. Well, one thing I was wanting to ask you, Ronnie, as we think about how this, the audience for the podcasts are almost all physicians in the United States.

And as I talk to people, sometimes people think like, well, how, How would I get involved in something like that? It's so far away from me or I don't, I have knowledge of.

of another language or another land. How would I get involved in something like that? And does it leave a lasting impact? So I wanted to hear your thoughts on what kind of a difference does that make or how does help you to have physicians from other countries come?

Or how would you suggest for people to get involve if they wanted help? Yeah, basically with Child To Youth Foundation, the good thing that Child to Youth foundation Inc.

is registered in Idaho. Yes. And that's the great opportunity, number one opportunity that we have, that through that child to youth foundation, Inc., we can be in position to get more people to come on board because the impact that we get when people see different people around and they see the knowledge they give to them really gives a great impact on them.

And in this way, we try as much as we come to see that these people, they come and get exposed to the light. people living in Uganda, especially people from the village.

So at the end you see that the impact is being felt and the people actually get whatever work they need and they feel like what they are doing is really right.

It's really great. But when they come, well they can so people you know the foundation will always use money you that's very helpful to sponsor children and yes and progress the work of medical care and yeah and we found that you have found the medical and education must go hand in hand because the children who have some of these families with with great poverty if the family's in in great Poverty and can't send their child to school child doesn't receive an education so the health And maintaining their health is an important part of maintaining education.

Yes. But they have the Child to Youth Foundation in Africa, in Uganda, and Childs to You Foundation, Inc., which is a registered non-profit foundation in the United States.

And Ronnie's a part both foundations, And it's way for people to get involved monetarily. Like I think you said, when people come here on a service trip, we put them to work.

but they get to see the impact that they're having in it. It does leave an impact on those who are being served. And I think when we go home, people take home with some of the knowledge of what it was like to be in the village with the people working with their families and with children.

Yeah. She's very meaningful for both sides. That's not, it's, not somebody coming from the outside saying we're better than you and therefore come do it our way.

Gets an exchange of cultural ideas. we gain as much from it as we give. That's true. Yeah, like we believe that, of course, to set up this service trip, contribution needs to be done in order for us to buy the medicine, and to run here and there, get a registration.

But also, at the end of the day, every penny that is being donated, we account for it. We do the accountability. You see that there's transparency in everything.

And with the health, with a childhood foundation, we set up a clinic whereby most of these sponsored children can go and get these services for free. Those who are staying nearby.

So the sponsored kids get the service for a free? Yeah, they get service. For health care, for sure. Yes. Even their guardians or even their stewards, you see they come and are being positioned to get this services.

And even we have every Friday for the first of the month, that's when we get other people with diabetes and pressure where they commune and be able to get treatment, which is not easy.

We've done actually this for I think 10 years, ever since you came here. We've maintained it. And you see that the impact that we get, people always love to come to this because the medication that's we give to them is always of quality, not quantity, whereby they feel like, yes, we need to go back to…

To the clinic and together medication, because you know, the medication where they buy it, it is really of quality. Right. Well, we bring to them, I mean, We've found us the last five days that we've been here.

Yeah. So many people that have never seen a doctor ever their whole lives, or if they have, It's maybe been a long time and.

Medical Outreach and Community Impact with Ronnie

And this podcast will include interviews from a couple of other folks. And we talked to a clinical officer who will do a lot of the follow-up. So the Follow-Up Care is really what moved the needle because people, they get the care they need now, but we identify those with serious life-threatening illnesses and they'll get to follow up care, the surgeries or the chronic care or referrals that they needed.

Otherwise they simply wouldn't have that. That's right. Well, Ronnie, it makes such a big difference like what the Child to Youth Foundation is doing in this part of Uganda.

And I'm excited to see what happens, you know, over the next 20 years. Think about what's accomplished in the past 20 and over. The next twenty, think how people take these services and they pull themselves out of the deep poverty cycle, which is really impressive.

Yeah, that's true. Because on top of that, we also do spring well protection and protect the water spring. Well. and the water and sand station for the project or program that we have.

This actually so far we've done we projected over 35 springs. Oh really? Between Mokono district and Buyukon district. But there are thousands of people if you have 35 large springs?

Yes. Of course, there are so many people that have been, individuals and families are benefiting from this because we believe that in the communities, people have to get clean water.

These springs have shared with animals, come and drink water, and also people come fetch water to take for cooking, for washing. So we decided to protect those springs so that they can be able to clean the water It's not funny, but it's true.

This spring actually gives out clean water that you can drink directly from the spring. Most of the people actually do that, especially the children. You don't need to boil water.

You just drink because it's just from the spring. It blows very well. That's awesome. Yeah, Child to Youth does so many things. Clean water, education sponsorships, health, and they have social workers that follow up with these children in challenging circumstances.

You mentioned projects where people are given a cow. A cow, send a cows. And after the cow gives birth and they have a calf, they send the calf on to another family.

And if the cows another calf and that says cow goes on another. Yes. I know there are similar projects, the pigs. The pigs that go projects. This is more like income generating activity for the families and the community members.

where when they have a cow, they can get milk out of that, and be able to probably pay for school fees for their children, or go to health services and get the service or even pay now they had electricity, you can pay those bills

for three years.

Well, that's what I wanted to spend this podcast episode highlighting is the tremendous difference that this foundation has made for many thousands of people.

And over the past 20 years, there's been so many success stories and I'm interested to see what will happen over. The next 20, the next 50 years next hundred years as people do this kind of work, you know, if.

I guess, Ronnie, if somebody wanted to get involved, would you welcome them to come to Uganda, or how would suggest for them? Well, Uganda being the pearl of Africa, and we really welcome anyone to join us because we have a great course to fight for.

At the end of the day, we give a little bit that we People will be blessed. Children will get blessed, even the communities will bless. Myself, I studied development studies.

I have a bachelor's in development. But that one happened after visiting different countries like England. And when I served my mission there, The same development that I saw I know we cannot reach at that level but at least the idea that i got there I want those same ideas to be within our communities so that we can evolve together slowly and I've been positioned to see that all people they are happy they're healthy and that their mindset is really positive.

Yeah, and it helps. Again, they say a rising tide lifts all boats. As we build, as this kind of work happens, people really, just gain opportunities that they would have never had.

And so, I guess the final point I wanted to make with Ronnie is when we've come before, this is my fourth or fifth time to come and work with Childhood Youth directly in Africa, outside of some of the sponsorship stuff we have done.

Well, we've come. We have not brought wealthy people by U. S. standards. But we just brought regular folks. And you made that point. People give a little bit of what they have, whether it's their time or their money or the resources to help somebody.

You can't make all the difference, but you can make a difference. Piece by piece, person by person. It's really impressive to see what can happen. Yeah, that's true.

Because we believe that if we work together jointly we can create a great impact through that. Ronnie, I want to thank you for what you do here. Thank you so much.

We really love you. And we know that every time you come here, keep us so blessed. Likewise, always delighted to see you and your dad and other members of the organization.

I know people are blessed by the service, by work you're doing. We appreciate and we call upon all those who could be able to join us, please join and make an impact to this great cause of reaching out to our needy children and also the communities.

Because at the end of the day, We believe that every father will be able to bless us in everything that we do. This service is not for us alone. It's not us to benefit.

it is actually the children and the community members to be benefit from this. Absolutely. Raleigh, thank you. I am so appreciative of what you do and I thank for taking the time to do this interview with me.

Thank you so much. Today, we're in the town of C, spelled SSI, which is on the northern shore of Lake Victoria in Uganda. And I'm here with my friend, Angela McKellar.

We've been here for about four days doing medical service, and it's been kind of an exciting time. But I wanted to

spend some time today with Angela. I am Angela McKellor.

Am an ER doctor in Salt Lake City, Utah, here, with Peter, for the week. In Uganda, yep. Angela and I first met years ago. We were classmates in medical school.

So it's kind of fun to reacquaint years later on a medical service trip. And we're in, like I say, in Uganda. This is an organization I've worked with off and on for several years.

It's really kind amazing to see what they've developed. Specifically, we were talking before when I started coming They just weren't very self-sufficient.

They didn't have very much stuff. And over the last 10 years, they've developed so much. We've got more health professionals. I don't know if they're doctors, but they got health professional, more nurses.

Pharmacy, the lab. Good clinic going here, portable clinic, I guess. Portable clinic. I talked to one of the chief health officers, is what they call them, at the other site.

And today we're at an outreach clinic in this town called Sea. It's actually quite beautiful. Almost over 4,000 feet elevation right by that beautiful lake.

You can't see the lake because it's so misty and cloudy and green, but it is just a really beautiful, tropical place. Well, one of the questions for you, Angela, just thinking about this is why, why did you come?

Why would you do medical service? You think about all of us that are doctors, you know, have all these things we do at home and it's so busy. Why Would you take time out of your busy schedule and fly halfway across the world to come and do Medical Service for people that Are so far away from home?

Yeah, that's a good question. It's probably a complex answer, honestly. I think it's fun. Part of it is fun, right? It is. But I've done stuff like this since I was an undergrad, but it was really fun to do it with real training now to come and do stuff this.

Obviously, there's needs all around the world, including in our own communities. Especially work with an organization that in the country knows the ins and outs knows what people need knows how to make the system work in their own country and to come and support as best as we can.

It's been really fun to kind of come do that. I also think from two other points why I probably do it one is from a medical sort of nerdy standpoint it's fun.

To actually see the diseases and things it is not fun but it s very interesting to see some of these tropical diseases that we haven't seen or thought about since medical school for a lot of us anyway.

So I think just seeing how medicine is done and their different clinical guidelines for their specific needs has been just just from a nerdy medical standpoint, it's been really fun and fascinating.

And I It's good to kind of get a change of perspective too. I think burnouts hit a lot of us hard after COVID and seeing we have our own challenges with our each individual systems and to be able to just sort of recheck in a place where most people never have access to any type of medical care.

It really is a good reminder of just how lucky we are to even have been able to take out a loan to get an education and to come do this stuff. It really just makes you feel way more grateful and kind of a shift in perspective just to be able say oh I do have something that might be helpful for someone somewhere because you don't always feel that at home for some reason.

Well I think sometimes at part of the machine. You have to order the tests and you have do this, you want to get sued and there's this expectation that when somebody comes in for care, they're gonna get a whole bunch of tests,

and a bunch care we're going to be really specific, which lends itself to more specificity in our diagnoses.

But it's really interesting here, the resources are so limited, all we have is like point of care tests.

Angela on Why Doctors Join Service Trips

And just a few of them and they Maybe they use those a little bit more than maybe I would, but they used them a lot. But they can't go order a CBC. You can go or a CAT scan on somebody with abdominal pain, you have to go with your clinical diagnosis.

And it seems different than what we have at home. It's also kind of fun to use these skills. And I think it really helps people. We are working along these health officers in which they have some training, but they're the ones who are doing the work.

And when we leave, this organization has got a long-standing good reputation in these communities in this district of Uganda. Yeah. They're going to do all the follow-up care and the working.

The ones we identify that have like real serious health needs, it's going be them that do the following. So they do come across a range of diseases we really don't see very much at home.

And they're very self-sufficient, but it's fun to be able to help to kind of help them get through bigger numbers with these bigger camps that we're doing together with them to really reach out to more people than sort of the normal.

So it has been really, really cool. Yeah. And I don't think we could do that much good, long lasting good if we just showed up with a duffel bag full of medicines.

It just really wouldn't move the needle. But working with this organization. I love that it is a Ugandan organization from people who live here. They can make it be way more long lasting and more effective in the long term and we just are here to do what they want us to Do and however, they need to need our help.

We're happy to. Do it. Yes Well, i'm just reflecting what you said a minute ago. Like I mean doctors are weird. Were such nerds and so like we've each Talked to each other like hey come see this interesting crazy thing.

Have you ever seen this before and and So it's academically, you know, just personally fascinating. I think it's really interesting to see some of the diseases you studied about and now you are seeing them.

And it is also good to kind of escape the craziness of this system at home. Even though it was good, it It's kind of pure. Yeah, it's way more basic and it kind cuts at the heart of the matter, if you will.

It really gets to what people really need right now. And it has been really great. You're not dealing with some of this stuff like in my world, especially on the outpatient side.

Prior authorizations and whether this is going to get paid for by insurance. People here very much worry about money, like how much is this going cost.

But a chest x-ray here costs $2. I mean, a doctor that we hire to come and help these clinical officers, I think they pay about $12 a day. It's just an incredible difference.

And so we've raised some money from our local community to help buy some of the medicines and stuff. If we leave them $1,000, that will fund what they do, their operations for months.

I means, it's incredible what the do. The objective of the, we talked about before, the organization, this child to youth organization is to keep kids in school.

What are your thoughts as you observe the health side of it? Can you see how that helps or what do you think how

it connects? Education is just key to everything, especially in a country like this for sure because if The talking to the the health worker that I'm working with today was telling me a lot about how they do a Lot of health education in schools even just basic hygiene and things like that to even prevent a, lot of diseases they got taught in school so that's a part of their general Education if they get the chance to go to school, so even that from a health standpoint is good let alone That's kind of the only way to a lot of the only ways to kind of make money is if they do get that education to get a little bit ahead from that standpoint to be able to pay for medications for their children or all that stuff.

It really just gives that much of a huge advantage to have that kind education. And we've found just, you know, even here this week, the organization has found longer term, just like everywhere, You can't spend your way out of poverty, but you can educate your ways out poverty.

Yes, for sure. There's not really much of an education system or health system like we would think of it. And so if these families can't send their children to a private school because they're unhealthy, then they just don't go to school and the kids are kind of stuck in that same poverty cycle.

So it is quite neat to see what they are doing. Yeah, it's great. I love that that's the emphasis of too and that this is sort of a appendage to it to kind to help with that medical stuff because it can stop the schooling in its tracks if you get too sick or can get you know, the malaria medications or whatever you might need.

So it really keeps it moving forward. Yeah, it's pretty cool. What would you tell another doctor from home and most of the people to listen to this podcast or physicians, what would tell a doctor who says, yeah, I kind of want to try that.

Like, is it worth it? Is it a waste of time? You've come on this. Something like this, you've done multiple of these in other countries as well. Well, would.

You tell someone who's who is considering? Just go, just go do it. It'll it'll even You may have some expectations coming in doing something like this, no matter what your horizons are going to get broadened and in ways you're not going even think about before you go, whether it's just learning, meeting just wonderful people that are so different from you, but really not that different for me, seeing how other people live.

If you Like we talked about the medicine and everything before, you really get a good sense of, it's kind of weird how quickly you can build community on one of these things, which is I think half the fun is really getting to know people, not just being a tourist in a country, but really going to where people live and trying to work with them as best you.

So just go, go do it. You'll gain stuff that you cant even think about. you can't even prepare for, I guess, or you couldn't expect it. You'll just see so many different things.

It's really a broadening of your horizons experience that is really, really cool to do. I think these kind of experiences are so much different than when I've gone just as a tourist to see the highlights because the people are trusting us with their children.

The thing that's most important to them and they invite us into their homes and you're interacting with the other caregivers. We just kind of right there with them for days and they welcome they for whatever reason or so welcome welcoming us in their communities and it's it spend really I mean you just can't put words or value on that type of experience is really really cool.

Yeah, I've come several times have just been surprised at the end of how much I like restored by that yeah, but really like my batteries are charged. I'm here ready to help you because it's a job.

I need to get paid to do the job at home. But if you kind of go back to like, why did I become a doctor? I wanted to helped people. Comes back the core of why we put ourselves through this in the first place.

You know, in that the long schooling and the hard hours that we have. It really does cut back that kind altruistic thing that all had on our personal statements.

Why did we do this? This is why you did this. So, it is rejuvenating for sure. And certainly we can find echoes of that at home. There's lots of opportunities to help people.

And you don't need to travel to Uganda to make a difference in your own community. But I agree with you. It's just unlike anything else. If you take yourself out of the US system for a little bit, go help some people that have some needs that really aren't going to be met unless you show up.

And we can't make all the difference, but every day we have found people that have stuff that it will kill them if they don't get the help they need. Yeah, we're able to set up those interventions and it's huge.

It's a good perspective shifter, if nothing else. And the little amount of money that we will leave that was raised as part of the funding for this trip and people.

I mean, it is just really not that money compared to U. S. terms, But that will fund all these people who need follow up if specialist consultations or whatever it may be, it really will move the needle.

And so that's what I found is working with this foundation is so helpful. Maybe it's selfish. I love coming because it just helps me so much. It's a two-way street for sure.

We get plenty out of this as well for. Sure. Thank you, Angela, for coming. Like I say, It has been so fun to kind of reacquaint with you over this. Been too long.

No, we started medical school in 2004. I was like, oh my goodness, all those years go by. But it's fun, like we all kind of have that same core root of what we want to do.

That's awesome. Well, thanks for taking time to the interview. Thanks for letting me come along. Yeah, it was awesome, and I think our listeners will really enjoy this because it is kind fun to be on site.

This is what were doing it. We have our little lapel mics, so it maybe not quite the same audio quality as what do with the normal podcast, but I will think it will mean a lot.

Thank you so much, Angel. Of course, of course. This is my friend Steven. Steven has been working with the foundation for 20 years. In fact, he is the originator of the Child to Youth Foundation.

So I grabbed him for a minute in the middle of our busy clinic. And I appreciate him taking the time to sit down and talk about what this foundation is and why he started it.

Would you mind introducing yourself to our audience, Steven? Oh, yeah. Thank you so much, Dr. Peter Crane. I'm senior on your Steven, the appropriate director of this organization.

The essence why I started this organization was based on my poor background. Where my parents were really very poor. They had no money to educate me. However, because I was bright, the government sponsored me in my education.

right from secondary up to university. Then from there I graduated as a teacher, physics and chemistry teacher. After graduating within two years, I was given to be a principal of a secondary school.

So in that secondary I met many poor children. Poor, poor, so I repeated it back.

Stephen on Founding the Organization

how my background was. So what I did, I used to help them out of my salary to pay their tuition. And the number

became too big. Too big to do by yourself.

Well, think about that, Stephen. You had this gift, you were bright, and you're able to become a teacher despite very challenging circumstances. Yes. Instead of taking that This is my favorite part of your story.

Instead of taking that and saying, well, I'll just keep for me in mind, you said, these children are just like me. Yes. You could see yourself in them.

And I can hear the emotion in your voice. But you can see what the impact was that it meant for you to have an education. So with your own salary, which is by, it's a small salary and you were paying for the tuition of these Children, and then it got to be so many, You couldn't do it on your.

I could not. because the number of children in the village were so big, so that I had to find resources. I went to the government. The government said, no, we cannot do that.

So I have to start an organization, Chair of the Foundation, where I could mobilize resources, talk to friends, to partners, So that they can bring in some money to educate these children.

Yeah. That's when I registered this organization and we started working. Good enough I got a friend from Canada, called Art Baron. Oh yeah, I know Art.

Yeah, who visited Uganda and he was really… When I told him about my story, he really touched and started sponsoring 26 children by that time. Wow, wow.

So from there, we started moving forward. So as I was doing that, my son Ronny Chambade went to serve a mission in Manchester, UK, where he met a couple missionaries.

called the looks. Barbara Luke. Yeah, and I've been privileged to know the Luke's as well. Yes, no. The Lukes were interested to what I was doing, the father of Ronny Chambady.

So Ronni told them what was I doing and they were very much excited. When they went back after their mission, they tried to look for sponsors again to help children through Childhood Research Foundation.

And they really have done and still doing a very good job. So from there, the program of sponsorship expanded, many children being sponsored. Within these poor children families, what we found out is that they are lacking even medication facilities.

Right, they didn't have medication. They didn´t have education. Yes, I did. Very, very poor. So I talked to Art Barron of Canada and he mobilized two sisters, the court sisters of St.

Joseph. who donated funds to construct a clinic, Sisters of St. Joseph Clinic, Chambabwe. So in support of child sponsorship, then also from there we found out that the villages had poor water sources.

water and sanitation. So we are also helping people, community people to construct water sources so they can have clean water. Then also we started another project called the Community Development Project.

where we give the families of these children income generating projects. We are giving them pigs, goats and cows. And the project is also flourishing very well.

Because in a family, you cannot sponsor all the children. No. Maybe you can take two or three, then the remaining also they need to have education. So with that, Now the program is moving forward.

And I'm so grateful to people like Dr. Crane. who has really participating, helping us a lot with the facilities. Well, it's my honor, my privilege to be a part of it.

And like I said, Stephen, the thing that I was so impressed with when I first knew about the organization and met you is this wasn't a group of outsiders just coming in and deciding to try to make a difference in Uganda.

It was Stephen who grew up in a village and who… I'll edit that out. Hmm. The reason I was so impressed is because it was Stephen and your people who grew up in the village who are from here who say we're going to make a difference for our community and do it in a way that's sustainable and ongoing.

And that is unique. It is. Because many people go to do service organizations and they'll come in with outside people and outside money and resources and certainly you need those.

But this is taking care of your own community, your village, and people and I love it. I think you've dedicated your life to this. And I'm seeing changes.

Yeah, and you're seeing these changes? Yeah. People are changing. For example, in our organization now we're employing two people whom we sponsor the education.

Now you are employ them. We employ one of them is our medical lab. There's many others that have not only finished primary but secondary and now university level education and those folks, you couldn't have paid them the money, but you can give them education.

And they now have risen above that poverty and they can bless so many others. For sure. Stephen, thank you for what you're doing. I just love what your doing and I find yours, this is not some made up story.

This is the real deal. When I come and see you Stephen I always know that I'm in the presence of greatness. Yes. Someone who walks the walk. Thank you so much.

Thank you so much, Dr. Crane, for also helping us, helping as people, volunteering, to provide their money, their time to come to Uganda and to treat people.

Full of church, thank you, so, much. I'm really so grateful. Thank You. You keep up the wonderful work. Today we are here with Maureen. I'm going to have her introduce herself.

We're in rural Uganda at the Sisters of St. Joseph Clinic. Pretty excited to be here. So I want you to introduce yourself so you say your name correctly because I wanna make sure I do it right.

Thank you so much. My name is Saatchi Mauren. Yeah, I am a medical clinic officer working at St Joseph Medical Clinic located in Chambongo in the Buikwe District.

It's awesome. So I've been coming to the same place in Uganda off and on for about 10 years. And it's been really fun to get to know the Child to Youth Foundation and the team.

I loved getting to you, Maureen. You've the one that's kind of been taking care of this patient population. We're kind north of Lake Victoria in the rural areas of Uganda where there are tremendous needs.

Whenever I've come here, I have observed that there are things that people, the ones who work here are very good at treating tropical diseases. Things that I don't see very often and Maureen and I been taking care of people a lot the last couple of days here.

What diseases do you see the most here? Mostly here the commonest diseases we have malaria. We have pneumonia and in elderly, mostly we have hypertension and diabetes.

Yeah, I've been surprised at how much hypertension, diabetes, a lot of the things that we see at home. This podcast is mostly for doctors and they'll agree, you know, they will recognize all this stuff.

Maureen on Rural Clinic Care

But when we talk about global health and being able to extend your reach beyond where you normally practice, this is a place where Maureen has tremendous experience treating malaria, HIV, diseases that we may not see quite as commonly at home, but it sounds like you see those every day.

Yeah, but the highest percentage we see is diabetes and hypertension. But sometimes we also get those tropical diseases. We have the hermithiasis, we have typhoid, malaria.

STIs, sexual transmitted infections, syphilis, HIV, gonorrhea, they are also common in our area. Yeah. We have a lot of that stuff. Well, so another question that I think is relevant to people who listen to the podcast is why do you think it's important to bring a clinic like this, you know, it to a rural area?

Like we do it at home. In the United States, we have people that work in rural areas, but we're, In a very rural area, in a country that has some places with excellent medical care and other places that doesn't, what do you think the benefit is to have a clinic located here?

What are some of the challenges that people face? Like you see our district, most of our clinics, the heavy health, hospitals are really far from the rural settings because now the nearest hospital It is very far.

In fact, it is not, you can, the transport from here to the hospital is like 20,000. It's very expensive. So it's expensive and very fat from the lower setting.

This clinic has really helped to serve the local people. In fact it has managed emergencies. It has delivered mothers all over because those some couldn't afford to go to the hospital because of the setting that transport means.

You see we use motorcycles most of time and the motorcycles are also few. So we enjoy the medical facilities this way because at least we can afford to get cheaper things at a cheaper price here and almost services are almost free here so this facility has really helped the local people to make medical care to better antenatal care, to help mothers who can deliver from here, so it has saved the community from the burden of traveling to a very far where the hospital is located to medical services One, I think it saved lives too, because like you say, if it's thousands of shillings and a long distance to go to a hospital, antenatal care, prenatal care is something that's so important.

So that is one service. Outside of all the infectious disease that you treat, everything here brings it close to home. And like, you pointed out, there's not an ambulance service, people have to where they want to.

Typically on the back of a motorcycle or a boda bode. So it has really helped the community in getting access to medical care services, especially those people who really need urgent care.

There are conditions that can't wait, so we can manage those emergencies from here before they are referred to a bigger hospital. And we make proper referrals, at least we've saved lives of people, like those ones who have really chronic care conditions at least we've been able to identify early before sending them to a bigger hospital for further investigations.

Right and ideally if we catch them early enough we try to keep them out of the hospital so they don't need the big resource but in a small clinic like this you've be able help lots of people and I thought it was interesting the comment about the motorcycle earlier today we had a child who presented who's very ill, very dehydrated and sick and at home we would call an ambulance to transfer but here there's not an Ambulance Service so and the child would have been very hard for the mom to just automatically take the Child directly to a hospital but by being here you were able to see the children along with me today because I'm here But we were able to identify a very sick child.

And then the mom hopped on the back of a motorcycle taxi, the Boda Bota, to take the sick to the bigger hospital. The foundation that we work with can help cover some of the costs.

It has done a great job in this place. People here most of time, even the source of employment, they do a lot of digging and the sources of income is not there.

poverty is too much so sometimes these medical services we bring closer to them they really help to at least to save lives of these people in these communities in the villages.

Well and I just want to highlight you Maureen like we sometimes people will criticize mission-based medicine where you go to do a medical service because we can't be here all the time.

But you are, you're here frequently and you able to really, we're kind of here to support your efforts so that you find people who are the sickest and help keep them so they stay out of the hospital based care and try to your very best to keep the population very healthy.

So you the one who have the boots on the ground who's here, frequently following up with those people. Yeah, the best we do most of the time we give health educations to those communities, how to prevent malaria.

Sometimes we even give out mosquito nets. Oh, mosquito net, yeah. Yeah we gave out mosquitoes nets, they gave mama kits for those mothers, pregnant mothers.

At least we try to health educate them, at least to come in case of anything, seeking medical care. Preventive services we always offer. Wow. What do you think the value is of, will you partner with the foundation, Child to Youth Foundation, and then you have outside groups like us come in and help, what do think is the benefit is for what you do of having a foundation or groups, like like, us from the United States who come and These groups, they do a tremendous work.

They do some good work, surely because sometimes these people they come present with cancers, present those chronic serious cases. Like today we've identified the patient with ectopic pregnancy.

Yeah, exactly. A topic pregnancy. Anything could happen. Yeah. But because she just came and she was taking it lightly, but it was a serious condition.

And we saw it with an emergency, she had no transport to the facility. So this foundation at least it has supported her. to get the best medical care because she has gotten the funds for the transport up to the facility where she can do the abdominal ultrasound scan.

So these foundations are really doing some good work and supporting the communities. The vulnerable people are already benefiting from these foundation.

when you're trying to build something that's going to produce a long-lasting result where you really help people get out of that horrible poverty cycle and lift themselves back to where they can care for themselves, health is one of the big things.

And so the foundation, Child to Youth Foundation, which we work with, helps with education, clean water, healthcare systems, and then they do projects like with cows and pigs and goats so that people can build sustainability and it just makes a tremendous difference for people.

Your influence influences, I mean, tens of thousands of people and this week we'll go to multiple communities and I know that we will serve so many people Yeah, surely it has helped.

Because we are doing, because we see most of the students from those schools, they have some infections. Yeah. But once they are sick and they get proper medical care, yeah, the organization is really doing some good work assisting those children right from poverty, from home, their school, then from school.

Medical care also accessible.

Closing Remarks and Podcast Outro

So they're doing well. And yeah. It's awesome. We appreciate the services they offer. Well, Maureen, thank you for

taking the time. I just want to commend you and I appreciate you letting us work alongside you this week.

And I would invite any of our listeners who are interested in international work to look into it. There's lots of opportunities to get involved with organizations that extend this type of care to communities and they have very mission focused on health.

education and good outcomes for people who live in low resource environments and it's been my privilege to be here many times over the last 10 years and its been great to work with you these last couple days.

Thank you so much. You're welcome. Thanks for tuning into the Doctors Making a Difference podcast. And thank you for what you do to help your patients and your community.

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