



KAMULI MUNICIPAL COUNCIL

OFFICE OF THE MUNICIPAL HEALTH OFFICER | P.O. BOX 127, KAMULI

Website: <https://www.kamuli.go.ug> | info@kamulimc.go.ug | +256 (0) 773 245 766 / +256 (0) 704 458 986



RE: REPORT ON THE COMMUNITY DIALOGUE CONDUCTED ON WEDNESDAY 13TH MAY 2026

Venue: Budhumbula Trading Centre

Background

The ministry of health has emphasized accountability and community participation as key strategies for strengthening health systems and improving service delivery in the country. Therefore, all institutions are encouraged to hold dialogue meetings aimed at promoting accountability, community participation and collaborative problem solving within communities. In line with this guidance, the municipal health department in partnership with Kamuli General Hospital and Uphold the Girl Child Organization (UHGCO) organized a community dialogue meeting at Budhumbula trading centre, where stakeholders including the local leaders, community members, health workers, and administrators came together to address the prevailing gaps.

Objectives of the dialogue meeting

- To discuss the current health status of Kamuli municipality, with more emphasis on Budhumbula T/C, siting HIV, TB and Malaria indicators as the precursor to the choice of the venue
- To identify key challenges affecting access and utilization of health services at the government health facilities in Kamuli Municipality
- Promote community participation
- Develop action points for improved health outcomes

Categories of participants

1. Representatives from the Municipal Health Team
2. Health facility in charges from Kamuli Municipality
3. Local council leaders
4. Village health team members
5. Opinion leaders
6. Religious leaders
7. Youth representatives
8. Women representatives
9. Implementing partners
10. Health workers
11. Administrators from the Municipality including the Municipal Clerk and division clerk



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Activity Description

The activity followed the agenda below

1. Arrival of participants
2. Opening prayer
3. Anthems (Busoga, National & East Africa)
4. Welcoming remarks from the Municipal Health Educator (MHE)
5. Welcoming remarks from the LC1 chairperson
6. Communication from the LC 2 chairperson
7. Health education sessions on
 - Tuberculosis and Malaria by the MHE
 - HIV/AIDS by the district ART focal person
 - Family planning by the district Family planning focal person
8. Communication from Implementing partners (UPHOLD the girl child)
9. Feedback from the community
10. Reactions to the issues raised by the community by
 - Laboratory in charge Kamuli General Hospital
 - Medical Superintendent-Kamuli General Hospital
11. Remarks by the Senior Assistant town clerk southern division
12. Remarks by the Municipal clerk
13. Closure

Agreed Actions and Recommendations

Gap	Action	Responsible Person
Poor sanitation at the Health Facility especially-especially latrines	Increase the number of times latrines are cleaned daily	Medical Superintendent
Long waiting hours at the health facilities especially at the Laboratory	-The laboratory team to identify those with tests that take long and initiate the testing as early as possible - The lab team to sensitize the patients and attendants about the various tests so that they are reassured	Medical Superintendent & Lab in charge
Health workers attending to the books that have money, instead of following first come first serve approach & Asking for money from patients	-The community was tasked to use the tollfree lines to report any health workers who refuse to work on them on grounds that they refused to give them money - The community was also warned against tempting and corrupting the health workers since it was revealed that many patients and care givers initiate the giving of money	Medical superintendent Community
Most drugs are bought from outside the hospital. Yet the hospital receives drugs	-The medical superintendent to advocate for an increase in the budget for drugs at the health facility coz the available budget doesn't effectively address the demand, so the Hospital management had to prioritize procuring emergency drugs as opposed to outpatient medicines	Medical superintendent
Some health workers are rude to patients	The clients/ community was encouraged to mention the names of those who are rude and were encouraged to use the toll-free lines and suggestion box to report such incidents to the management	



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Achievements

- The meeting brought together key stakeholders for dialogue
- There was increased community awareness on various health issues such as malaria, HIV/AIDS and Tuberculosis
- The community was informed about the services offered in our health facilities in the Municipality
- The action plan was developed with key recommendations
- Strengthened accountabilities of government office holders and increased community ownership of health interventions and the health facilities
- Many community members accessed services such as HIV and Malaria testing and FP services

Lessons Learned

- There is a real need to engage the communities so as to address the myths and misconceptions in surrounding the health services in government health facilities

Challenges

- Low turnout of community members
- Limited resources made mobilization quite hectic
- Competing community activities such as burial ceremonies affected community attendance



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Activity Photos



Figure: The Medical Superintendent addressing Queries from the Community During the Dialogue



Figure 1 The Laboratory in charge responding to the Queries from the Community



Figure 2 the ART in charge sensitizing the community



Figure 3 The Town Clerk addressing the community Members During the Dialogue