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THE WAVE

ISSUE 07 | JANUARY 2026



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The Power of Mentoring Through Vocation



Helen Nanteza Kawesa
RC Kampala Ssesse Islands



Esther Mwambu
RC Kampala South



Robert Walakira
RC Kasubi



Amayo Roseline
RC Kirinya-Bukasa



Innocent Ndawula
RC Kampala South



Peter Nyanzi
RC Kampala-Naalya

At one of the mentorship sessions for the Girls for Girls Cohort 7, a young lady posted in the chat room "I am so scared of ever raising my hand or voice to speak even in class, and now at my workspace. I joined Girls for Girls so that I can get this confidence." At Project Girls for Girls (G4G) Uganda, we believe that every woman and girl has the potential to lead. We empower young women with the courage, vision and skills needed to take on leadership in their different spaces.

In a period of 4 months, a mentorship class; be it virtual or physical will have covered areas of: (i) Building Trust, (ii) Courageous leadership, (iii) The Art of Communication, (iv) Negotiation, Advocating for yourself and others, (v) Public service and Running for Office; and (vii) Ethics and Values in Decision Making. By graduation time, the girl who didn't know she could ever raise her hand, gave testimony, she stood in front of the whole session, spoke with confidence and gave the end of session speech. What a transformation. This, ladies and gentlemen is what vocational service is to some of us- ensuring you take someone by hand, and help them to cross the bridge, through your own stories and experiences.

As Rotary upholds the focus area of Vocational service in the month of January, - I find myself reflecting on the profound impact of the G4G-Uganda. Having to be the one supporting young females to conclude a session isn't just an administrative success; it is a front-row seat to the transformation of fear into fortitude.

Using our vocations as a bridge always enables us share

our professional journeys, our triumphs, the crushing setbacks, and the "boring" logistics of our daily work; this- to some is inspirational and provides them a clear roadmap on how to focus. In this edition, catch up with Dr Richard Kalungi- well known for family doctors. He uses his vocation to extend medical cheer to Rotary. You will meet the head of the Ntinda Vocational Institute Ms Harriet Kagezi whose passion for vocational hand holding started way in time, and you will also meet Ms Christine Kirungi- formally a cerebral palsy victim now turned advocate; using her own experience to help others.

Dear reader, what is your vocation? Have you lived it through others? Can we hear your story? Our stories in such spaces help us to demystify Success, they help us provide a safety net for others, and also help us wiggle our way through systemic barriers and cultural shocks.

In this edition you will also meet amazing literature from numerous Rotarians on subject matters like the Rotary Foundation, Governance and ethics in club leadership, navigating career paths and holding young peoples' hands, and many others. We also have a new years package- go take a cancer screening.

As you flip through the pages, I hope you see more than just stories. I hope you see the blueprint of a future where every member of the communities around us is looking for Hope from us Rotarians.

A Happy New Year Friends

Rtn Sheila Naturinda
RC-Kampala Central



RI PRESIDENT'S MESSAGE: ▶



More than job training

Consider our commitment to ending polio. For nearly 40 years, we have promised the world's children we will eliminate this disease. Despite obstacles, we persist, and today we are closer to defeating the virus.

In a garage outside Salinas, California, young people who are learning to restore classic cars are doing more than developing a skill; they are reclaiming their futures. This training program provides mentorship and, for some, a path away from gang involvement toward meaningful employment. Graduates leave with certifications, practical experience, and hope.

This is what Rotary's Vocational Service Month celebrates each January; the power of bringing together people with unique skills to do good in the world. It reminds us that integrity isn't just about our actions matching our words. Integrity is in everything we do.

The California automotive program has been such a success because it was built on integrity. Members of the Rotary Club of Carmel-by-the-Sea didn't assume they knew what the community needed. They listened. They learned there was a shortage of skilled mechanics as well as a large number of young people lacking job training. They recognized that technical skills alone wouldn't

be enough, so they partnered with Rancho Cielo, a nonprofit offering counselling and support services alongside vocational training.

That is The Four-Way Test in action. Those four simple questions help us not judge others but guide us toward genuine, effective service.

Consider our commitment to ending polio. For nearly 40 years, we have promised the world's children we will eliminate this disease. Despite obstacles, we persist, and today we are closer to defeating the virus. Keeping this promise is the very definition of integrity.

The same integrity must drive our vocational service. With 1.2 billion young people in emerging economies reaching working age in the next decade and only 420 million jobs projected, we face a critical gap. Communities long excluded from economic opportunities need our support.

But support doesn't mean imposing our will. It means listening to local needs, building partnerships, and designing projects that communities can sustain themselves.

You have knowledge that can transform lives. Whatever your profession, your expertise combined with Rotary's values creates lasting change. The question isn't whether you have something to offer, it's how you'll use your skills to serve.

This January, I encourage you to ask how your club can address vocational needs in your community. What skills do your members have that could change someone's life? How can your networks open doors for young people? What partnerships can create sustainable jobs?

Let integrity guide you. Let The Four-Way Test light your path. And let the young people in California and the multitudes worldwide who need job skills remind you why vocational service matters.

Let us celebrate putting our professional skills to work for humanity with integrity at the heart of everything we do.

FRANCESCO AREZZO
President, Rotary International

DISTRICT GOVERNOR'S MESSAGE: ▶



Vocational Service: The Heart of Rotary in Action

In our Rotary clubs we frequently host discussions on corporate social responsibility, workplace ethics, and sustainable business models. By encouraging fair practices and social accountability, we help build healthier economies and stronger communities.

Vocational Service is one of the Five Avenues of Service in Rotary, and it reflects a simple but powerful idea: our professions are a pathway to serve society. For Rotarians, work is not only a means of livelihood but also an opportunity to uphold integrity, share expertise, and contribute meaningfully to the general community development.

Through Vocational Service, Rotarians practice the highest ethical standards in their professional lives. Rotary's Four-Way Test; asking whether actions are truthful, fair, beneficial, and conducive to goodwill, guides our decision-making across all occupations. By living these values, as Rotarians we build trust in our workplaces and set examples of professionalism that extend far beyond our Rotary meetings.

One of the most visible expressions of Vocational Service is the sharing of skills and knowledge. Rotarians in Uganda come from diverse fields such as medicine, education, engineering, business, law, agriculture, and the arts. Through vocational talks, mentoring programs, and career guidance sessions, we have helped students and young professionals make informed career choices and develop confidence. Many Rotary

clubs have organized career days, especially for youth from underserved communities.

Through Vocational Service we play a vital role in community development. As Rotarians we often use our professional expertise to address local needs; doctors support Rotary Family Health days and medical camps, engineers advise on water and sanitation projects, accountants provide financial literacy training, and entrepreneurs mentor small business owners. These initiatives do more than offer short-term assistance; they empower individuals with skills and knowledge that create lasting change.

In our Rotary clubs we frequently host discussions on corporate social responsibility, workplace ethics, and sustainable business models. By encouraging fair practices and social accountability, we help build healthier economies and stronger communities. Through vocational service, members learn about each other's professions, creating opportunities for collaboration. This exchange of ideas often sparks innovative service projects and partnerships that blend professional expertise with humanitarian goals.

In today's rapidly changing world,

emerging challenges such as unemployment, skills gaps, and technological disruption demand practical solutions. As Rotarians we are uniquely positioned to respond by aligning our professional capabilities with community needs. Programs focused on entrepreneurship, digital skills, and vocational training help prepare people; especially the youth for meaningful employment and self-reliance.

Ultimately, Vocational Service reminds us that service does not begin and end with projects. It is embedded in everyday work. By acting with integrity, sharing skills generously, and using professions as instruments to Unite for Good, we Rotarians demonstrate that true service is a way of life. Through Vocational Service, we prove that when professionals commit to ethical standards and community service, they can create positive, sustainable change.

I encourage all of us Rotarians this month to recognize those individuals and organizations that demonstrate outstanding vocational integrity and service.

#RotaryEyamba

Geoffrey Martin Kitakule
Rotary District Governor District 9213

A Vocation Shaped by Lived Experience

How Christine Kirungi transformed personal experience into a life of dignity, rehabilitation, and community service.



By Rtn Diana Kagere Mugerwa

Christine Kirungi does not approach cerebral palsy as a concept, a diagnosis, or a distant cause. She approaches it as lived reality. Long before she became a rehabilitation specialist and community leader, Christine was navigating a world that rarely made space for children like her. What could have remained a deeply personal struggle instead became the foundation of a vocation built on empathy, professional skill, and quiet determination.

At the age of five, Christine contracted cerebral malaria, which affected her ability to move and coordinate her limbs, leaving her with cerebral palsy. Childhood was marked by exclusion, limited access to services, and society's painfully low expectations. Yet those same experiences shaped her resilience and outlook on life. "I learned very early that disability is not inability," she often says. "The real barriers are attitudes, systems, and lack of support." That understanding continues to guide how she lives and works today.

Against considerable odds, Christine completed her education up to university level, earning a Bachelor's degree from Makerere



Christine Kirungi receives the RC Sonde Vocational Service award from PDG Anne Nkutu in Bukerere

University. Her academic journey reinforced a belief that would later define her work: that with opportunity, skills, and the right support, persons with disabilities can thrive and contribute meaningfully to society.

The turning point from personal survival to vocational purpose came when families of children with cerebral palsy began seeking Christine out for guidance and encouragement. Parents overwhelmed by fear and uncertainty found comfort in someone who understood their journey from the inside. Christine recognized herself in their confusion and anxiety. In those moments, rehabilitation stopped being an abstract idea and became a calling. Her lived experience, she realized, was not something to overcome but something to transform into service.

To turn compassion into competent practice, Christine pursued formal training in Community-Based Rehabilitation, complemented by

continuous learning in disability inclusion, leadership, advocacy, safeguarding, and program management. She also gained hands-on experience working with national and international disability organizations. This blend of professional training and lived understanding now defines her approach to service—child-centered, respectful, and rooted in dignity.

Today, Christine serves as the Executive Director of the Umbrella Cerebral Palsy Network Association (UCPNA) and is the Founder of the St. Charles Lwanga Cerebral Palsy Day-Care and Rehabilitation Centre in Bukerere, supported by the Rotary Club of Sonde. At the centre, rehabilitation goes beyond therapy. Services include early childhood motivation, basic physiotherapy, inclusive play, psychosocial support, caregiver training, and referrals to specialized services. Families often speak of feeling seen and understood—sometimes for the first time.

The centre was established in response to a clear gap in cerebral palsy care. Early intervention services were limited, caregivers lacked safe and affordable spaces for their children, and many families relied on myths or harmful practices. Christine envisioned a professional, inclusive, and family-centered space where children with cerebral palsy could receive care while caregivers gained knowledge, confidence, and community.

That vision has steadily taken shape. The centre currently supports over 35 children with cerebral palsy on a rolling basis, with some children transitioning into primary education alongside their peers. Just as importantly, caregivers have organized themselves into a SACCO, enabling them to save, support one another, and build economic resilience while caring for their children. This collective growth reflects Christine's belief that rehabilitation must strengthen families, not just individuals.

Partnerships have been key to sustaining this work. The Catholic Church donated the land on which the rehabilitation centre is built, providing stability and permanence within the community. The Rotary Club of Sonde has played a vital role through structural development, material support, mentorship, and advocacy. Their involvement has strengthened the service environment and increased community trust in the centre.

Christine's work embodies the core of Rotary's vocational service—using one's profession, skills, and calling to create lasting impact. In recognition of her contribution, she was named the Rotary Club of Sonde Vocational Service Award recipient for Rotary Year 2024/2025. For Christine, the award affirms a philosophy she lives by: rehabilitation is not charity, but a professional, rights-based service that promotes



Christine explains the operations of the center for DG GK during his visit



Christine with IPP Dr. Charles Olaro at the opening of the play shade at the center

independence and inclusion.

Running a rehabilitation centre in Uganda is not without challenges. Limited funding, shortages of trained professionals, and persistent stigma around disability remain significant barriers. Yet demand for services continues to grow. Christine remains firm in her purpose, focusing on what is possible rather than what is lacking.

Looking ahead, she envisions a fully equipped, inclusive rehabilitation centre offering multidisciplinary services and serving as a model for community-based cerebral palsy care. She hopes it will also become a training hub for caregivers and professionals, addressing the urgent need for occupational therapists, speech and language therapists, special needs

educators, and social workers.

To young people living with disabilities, Christine offers a message shaped by experience and hope: disability does not define limits—it defines perspective. With education, skills, and confidence, lived experience can become purpose, and purpose can transform not only individual lives, but entire communities.

In Christine Kirungi's story, vocational service is not a theory or a slogan. It is a life's work carefully built, deeply personal, and quietly changing what inclusion looks like, one child and one family at a time.

Rtn Diana Kagere Mugerwa is the Public Image committee Chair, the Rotary Club of Sonde.

Living Our Vocations with Purpose

Later this year, from 29th September to 3rd October 2026, we will gather in Kampala City for the 7th All-Africa Zone Institute. This will be more than a meeting. It will be a continental moment to learn from one another, to sharpen our leadership, and to reconnect with why we serve. I believe it will strengthen our shared vision of an Africa that leads with confidence, innovation, and global relevance.



By PDG Emmanuel Katongole

Dear Rotarians, Rotaractors, and partners across Africa,

Happy New Year. As 2026 begins, I greet you with gratitude and hope. A new year always carries a quiet promise. It asks us to begin again, to choose purpose, and to believe that our best work still lies ahead. Across our continent, I sense a renewed determination to serve with heart, skill, and integrity.

January invites us to reflect on Vocational Service. Our vocations are not just what we do to earn a living. They are expressions of who we are. When practiced with ethics, excellence, and compassion, our professions become powerful tools

for dignity and transformation. A teacher shaping confidence in a classroom. An engineer building systems that last. An entrepreneur creating honest work for others. This is service in its most practical and human form.

Across Africa, vocational service is restoring trust and opening doors. It is helping communities stand taller and look further ahead. Our professionals are not waiting to be rescued. They are leading change with competence and courage, proving every day that Africa's future will be shaped by skilled hands and principled hearts.

As we move through this year, I encourage you to lead where you are. Choose integrity when shortcuts tempt you. Choose excellence when mediocrity feels easier. Choose compassion when the world feels hurried. Our daily work matters more than we may realize.

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Let us step into 2026 with courage. Live our vocations boldly. Serve with skill and conscience. And let us prepare to come together as one continent, one Rotary family, ready to shape the future we believe in.

Let's continue to fix our eyes on our north stars. Africa is rising and growing to serve.

Stay blessed throughout 2026.

The writer is the RI Director 2026-2028, and a member of the Rotary Club of Muyenga.



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ROTARACT Day
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ROTARACT Night
17TH APRIL 2026 FRIDAY NIGHT
DRESSCODE: AFRO-MODERN ELEGANCE

DG'S Banquet
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The Healing Leader: Balancing Private Practice with Global Rotary Service

Our involvement in meaningful projects and spending time together as a family can reignite passion and purpose, providing a sense of fulfilment beyond clinical practice. By leveraging our skills to serve humanity, we can make a lasting impact and find renewed energy in our work. Rotary also provides a number of role models and examples that keep one encouraged and motivated to seek guidance or advice in their life or professional journey.



Asking Rtn Dr Richard Kalungi

If you were to introduce yourself from a purely Rotary perspective, what would that look like?

Also, tell us a bit about your professional life as a doctor.

As a dedicated Rotarian and medical professional, I'm proud to be a member of the Rotary Club of Kampala South since November 2017. My journey with Rotary has been incredibly enriching, offering opportunities for learning, career development, and self-discovery.

Professionally, I'm a medical doctor with an MB ChB from Makerere University, an MBA from Uganda Martyrs' University and Catholic University of Milan, and a Master's in Public Health from Uganda Christian University. I've also received training in project management, leadership, and health innovation. I'm privileged to be serving as Program Manager for Mama Toto Care Program, Board member for Rotary Family Health Days Program, Head of Medical



Rtn Dr Richard Kalungi giving medical education to the communities in Kyaka II refugee settlement

Outreach on Rotary Cancer Program Uganda Board and Chairperson Technical Committee of Rotary Blood Bank Program.

- Served as Chairperson Medical Committee of Rotary Cancer Run for 4 years
- Served on District Community Service Committee
- Trained Clubs in project initiation and implementation
- Led Rotary Club of Kampala South to its first global grant in 2022 to set up a 3-bed dialysis centre at Mengo Hospital. Went on to support global grants in Kyaka II Refugee Settlement and a Maternal and Child Health grant being implemented in 5 health facilities across the country.
- Worked with Home Doctors Uganda, an initiative I co-founded where we are trying to push home medical care,

Digital health, corporate health awareness and other out of hospital care.

- Worked in private hospitals but drawn to community health because of my passion in disease prevention and health education.
- Currently a consultant in Health management and leadership, Health business strategy and Health communication.
- Recently recruited as a Technical Cadre of The Rotary Foundation for the January 2026 Cohort

How do you practically balance clinical duties with high-level Rotary leadership?

Balancing clinical practice and leading large-scale Rotary projects requires PASSION, effective time management, prioritization, and delegation. I ensure that my clinical

practice informs my work in Rotary, allowing me to bring practical insights to the projects I lead. By focusing on high-impact initiatives and leveraging my network, I'm able to maximize my contribution to both my clinical work and Rotary projects.

How does your clinical approach shift when moving from a private hospital to a community project?

Working on community-based projects has given me a deeper understanding of the social determinants of health and the importance of preventive care. Unlike private hospital settings, community-based projects require a holistic approach, considering the broader social and economic context of patients' lives. This perspective has enriched my practice as a doctor and informed my approach to healthcare leadership.

How does the Rotary Four-Way Test change the way you handle a difficult business meeting on a Monday morning?

The Rotary Four-Way Test is a guiding principle for me in work and meetings. Being a Rotarian pushes one to be intentional about the Four Way test in all they do. When faced with a difficult decision, I ask myself: Is it the truth? Is it fair to all concerned? Will it build goodwill and better friendships? Will it be beneficial to all concerned? This framework helps me approach challenges with integrity, fairness, and a commitment to mutual benefit. And the doctor in me will usually add a 5th aspect - Will it help humanity and save a life?

Can community service be the antidote to medical burnout especially for the young medical professionals?

For young medical professionals feeling burnt out or disconnected,



The community's physician is here. Rtn Dr Kalungi at work in the communities

I recommend exploring service opportunities in Rotary. Our involvement in meaningful projects and spending time together as a family can reignite passion and purpose, providing a sense of fulfilment beyond clinical practice. By leveraging our skills to serve humanity, we can make a lasting impact and find renewed energy in our work. Rotary also provides a number of role models and examples that keep one encouraged and motivated to seek guidance or advice in their life or professional journey.

How should Rotary transition from short-term medical camps to sustainable, long-term health impact?

For long, medical camps have been the easy and quick choice. Yes, they offer relief but it's indeed short term. Nonetheless, they offer a huge opportunity for community entry, engagement and mobilisation. They also help in community assessment and identification of community

problems/challenges as well as defining potential projects. They increase the impact and visibility of Rotary in communities.

To ensure the long-term impact of medical projects, I advise Rotary to focus on building local capacity, promoting community ownership, and integrating projects with existing health systems. This approach enables communities to sustain initiatives beyond the initial intervention, creating lasting benefits for generations to come. By prioritizing sustainability, we can maximize the impact of our efforts and create a healthier, more equitable world.

Rtn Dr Richard Kalungi is the chairperson of Uganda Chapter of International Rotary Fellowships of Health care Professionals.

He has also been recently appointed to lead the district community service committee for the rotary year 2026-2027.

Beyond the Leap: The Practical Realities of a Mid-Career Pivot

To thrive after a career pivot, you must embrace the role of the “experienced novice.” This involves maintaining a high level of professional maturity while adopting a radical openness to learning.



By Rtn Wangi Francis

In the modern professional workspace, the “job for life” is no longer as appealing as it used to be. For many adults, the mid-career realization that their current path no longer aligns with their passions or lifestyle isn’t a sign of failure. It’s a sign of evolution, growth, inspiration, long term survival and success.

However, a career change in adulthood carries a different weight than it does in your early twenties. You likely have more responsibilities, a specific standard of living, and a decade or two of specialized identity and networks wrapped up in your current role. A successful transition requires more than just courage; it requires self-reflection, strategic financial planning, professional consultation, and the ability to translate your hard-earned experience into a new professional work sphere.

However, to ensure that your transition is a step forward rather than a stumble, here is what you

need to critically think about to execute your plan successfully:

a) The Big Question: Why Now?

There are many reasons that would make someone change careers in adulthood but one must convincingly answer the why question. Are you running away from a toxic manager or have you over time realised that your current career is no longer sufficiently utilising your natural strength and ability? Is it a case of a shift in what mattered to you then and what matters to you now? Are you suffering from burnout due to repeated tasks and lack of new challenges? Adult career changes often involve a temporary “pay cut” or investment in education. Do you have the resources to sustain you through this period?

b) Transferable Skills

One of the most powerful assets in an adult career change is the mastery of transferable skills; the portable competencies you’ve sharpened over the years that remain relevant regardless of your job title. Unlike industry-specific “hard” skills, these are the universal engines of professional success, such as high-level communication, complex problem-solving, and emotional intelligence. For example, a project manager moving from construction to software development isn’t starting from zero; they are bringing a proven ability to mitigate risk, manage stakeholders, and maintain strict timelines. To successfully pivot, you must perform a “skills audit” to translate your past

achievements into the language of your new field, shifting the focus from where you worked to how you deliver value.

c) The “Test Drive” Phase

Stepping into a new industry as an adult requires confrontation with the reality of being a “beginner” or “entry level professional again”. While your age brings wisdom, it does not always grant immediate authority in a field where you lack a track record, often necessitating a temporary ego check as you report to younger managers or navigate entry-level workflows. Success in this phase depends on your ability to embrace this “apprenticeship” period without resentment, viewing the initial discomfort not as a step backward, but as the necessary friction required to gain traction on a more rewarding path.

d) Determinants of success in the new field

To thrive after a career pivot, you must embrace the role of the “experienced novice.” This involves maintaining a high level of professional maturity while adopting a radical openness to learning. Success in a new field often hinges on your ability to bridge the gap between your existing soft skills and the new technical requirements. Instead of waiting for formal training, take the initiative to master the new industry; the unwritten rules, key influencers, and specific vocabulary that define the new work culture. By demonstrating a relentless work ethic and a lack of ego, you prove to your new peers that your years of experience in another field

have given you a superior “ability to learn,” making you a more efficient asset than a younger, less-experienced counterpart.

Equally important is the strategic expansion of your professional social capital. In adulthood, your network is your most valuable currency, but a career change requires diversifying that network immediately. Seek out mentors who are established in the field regardless of their age and offer your unique perspective as an outsider to solve problems in ways they might not have considered.

Consistently look for “quick wins” where your transferable skills can

make an immediate impact; for instance, using your seasoned organizational skills to streamline a messy workflow in your new department. By combining your fresh technical skills with the reliability and judgment of a veteran professional, you create a hybrid value proposition that is difficult to ignore, securing your status as a successful “reinventor” rather than just a newcomer.

Ultimately, a career change in adulthood is an act of professional courage that demands a temporary surrender of the familiar and a rigorous commitment to growth, the rewards of alignment and renewed purpose far outweigh

the initial discomfort of the pivot. By leveraging your wealth of transferable experience, maintaining a humble learner’s mindset, and navigating the logistical realities with a clear plan, you transform what could be a period of instability. Remember that your career is not a single track, but a narrative that you have the power to edit; it is never too late to turn the page and begin a chapter that truly reflects who you have become.

The writer is a past president of the Rotary Club of Kampala Central, and he is Education Advisor



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Empowering Youth Through Vocational Skills as A Pathway to Sustainable Futures

Vocational education equips young people with hands-on, market-relevant skills that directly translate into employment, entrepreneurship, and self-sustainability. Unlike purely theoretical learning, vocational training emphasizes competence, creativity, and confidence qualities essential for thriving in today's dynamic economies.



By Rtn. Emmanuel Mwaka

As we usher in the New Year 2026, the Rotary Club of Sonde proudly aligns itself with the enduring and transformative theme of Vocational Service a cause that lies at the very heart of Rotary's mission and values. Vocational skills are not merely technical abilities; they are powerful tools for empowerment, dignity, self-reliance, and sustainable development. In a world grappling with unemployment, skills mismatches, and economic uncertainty, vocational training stands out as a practical and impactful solution for youth empowerment and national development.

Vocational education equips young people with hands-on, market-relevant skills that directly translate into employment, entrepreneurship, and self-sustainability. Unlike purely theoretical learning, vocational training emphasizes competence, creativity, and confidence qualities essential for thriving in today's dynamic economies. From artisans and technicians to innovators and small business owners, vocationally

skilled youth play a critical role in building resilient communities and driving grassroots economic growth.

It is against this backdrop that the Rotary Club of Sonde takes immense pride in its initiatives aimed at skilling the youth, particularly within the Sonde community and beyond. Through deliberate partnerships, mentorship, and service-driven action, the club has made meaningful strides in providing young people with opportunities to learn, practice, and master vocational trades that are in high demand.

Central to these achievements is the invaluable contribution of Rotarian Harriet Kagezi, an able and committed member, who serves as the Principal of Ntinda Vocational Training Institute. Her leadership, technical expertise, and unwavering passion for vocational education have been instrumental in translating Rotary's vision into tangible impact. Under her guidance, numerous youths have had the opportunity to acquire practical skills in key vocational areas, including Automotive Mechanics, Electrical Installation Systems and Maintenance, Fashion and Garment Design, Welding and Fabrication, and Plumbing.

These training opportunities have not only equipped participants with employable skills but have also ignited a sense of purpose and possibility among the youth. Many have gone on to pursue apprenticeships, start small enterprises, or secure gainful employment contributing positively to their families and communities.

This ripple effect underscores the transformative power of vocational training when delivered with excellence, mentorship, and a genuine commitment to youth development.

Rotarian Harriet Kagezi's impact extends beyond Sonde. Through her professional competence and dedication, she has supported youth from various parts of the country, opening doors to inclusive learning and national skills development. Her work exemplifies the Rotary ideal of using one's vocation as a platform for service uplifting others while strengthening society as a whole.

As we celebrate the Month of Vocational Service, it is both fitting and necessary to recognize and appreciate Rotarian Harriet Kagezi in a special way. Her tireless efforts in nurturing young talent, championing vocational skills, and fostering pathways to job creation and self-reliance are truly commendable. She stands as a shining example of vocational excellence in action and a reminder that sustainable change is driven by dedicated individuals who invest in people.

Looking ahead to 2026 and beyond, the Rotary Club of Sonde remains committed to expanding its vocational initiatives, strengthening partnerships, and empowering more youth with skills for life. Together, with leaders like Rotarian Harriet Kagezi, we reaffirm our belief that when youth are skilled, communities prosper, and nations grow.

The writer is a member of the Rotary Club of Sonde

Building Futures Through Vocational Training

Inside a government vocational institute where hands-on learning is turning potential into opportunity.



Rtn. Harriet Kagezi, a member of the Rotary Club of Sonde, is the Principal of Ntinda Vocational Training Institute, a government-owned institution at the forefront of vocational skills development in Uganda.

In a one-on-one conversation with **Rtn. Dianah Kagere**, she explores the state of vocational training in Uganda, examining its role in youth empowerment, national development, and the value of vocational service in transforming lives and communities.

Qn: What does it take to lead a government vocational institution today? Do you find that Rotary principles play a role in shaping that leadership?

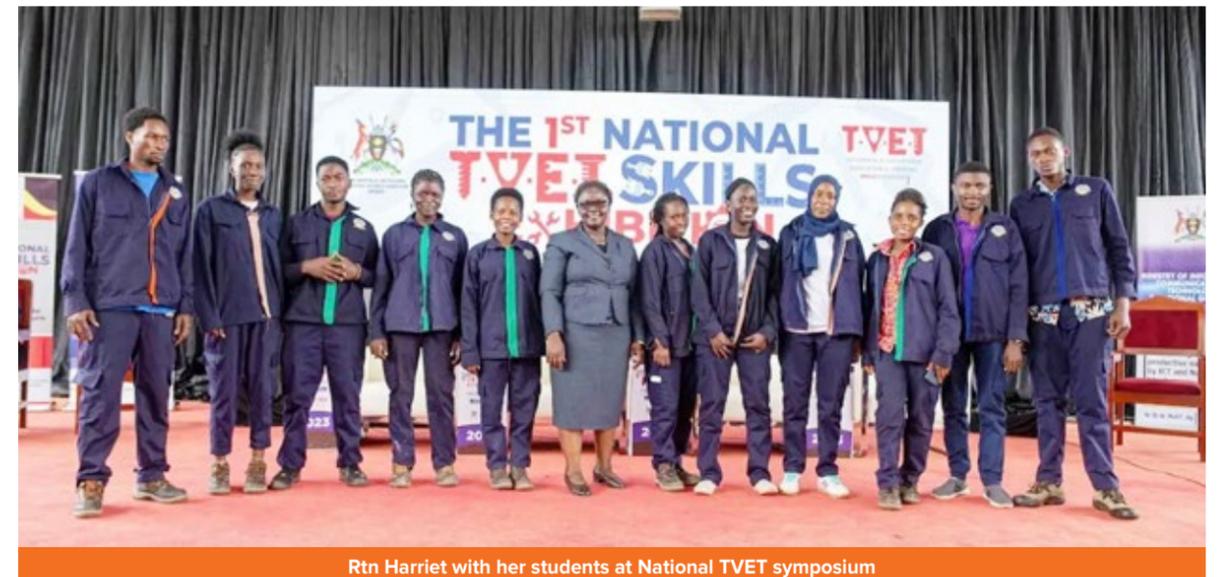
Leadership in public service demands vision, integrity, and adaptability. It requires effective communication with diverse stakeholders from ministries and boards to students, their parents and industry partners while navigating complex legal and policy frameworks. Accountability, ethical leadership, and a deep understanding of the local context are essential. Policy provides structure, but students bring diverse

realities. My role is to interpret policy with flexibility, ensuring compliance without losing sight of learners' needs. This involves continuous stakeholder engagement, student-centered adjustments, innovation in delivery, and advocating for policy refinements where evidence demands it.

Rotary values guide me to lead with integrity, fairness, and service. I apply the Four-Way Test in decision-making to ensure actions are ethical, inclusive, and beneficial. Collaboration and transparency are central to how I engage stakeholders. It shows up in mentorship, especially

of young girls, and in prioritizing student-centered initiatives even when resources are limited. Working with the Rotary Club of Sonde to support youth access skills training is one practical expression of service beyond duty.

Rotary has strengthened my appreciation for partnerships, accountability, and community-centered leadership. I am inspired by Rotarians such as Past President Charles Olaro and current President Christine, whose humility and people-focused leadership continue to shape how I serve.



Rtn Harriet with her students at National TVET symposium

Qn. What inspired you to take the path of vocational education and training?

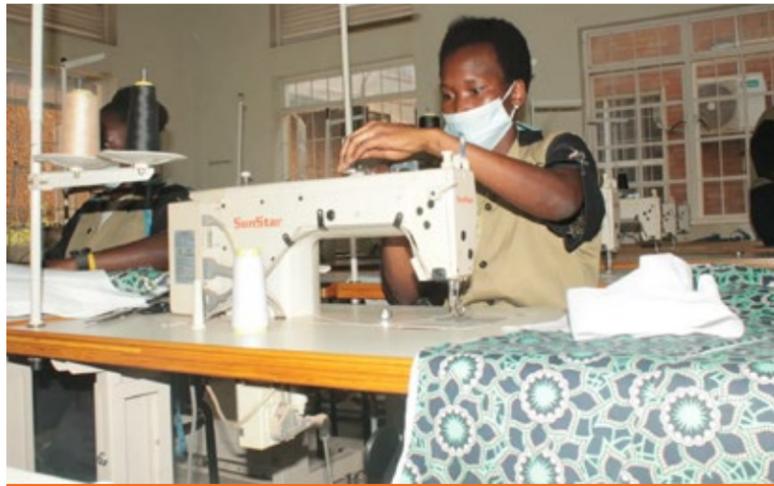
Vocational training offered me a practical and purposeful path. I was inspired early on by my uncle, Abasi Tuzinde, who demonstrated the dignity and opportunity that come with technical skills. At the time, university options were limited by cut-off points, and I was unwilling to pursue a degree without conviction. I chose a technical diploma in Electrical Engineering instead. Over time, my focus shifted beyond personal advancement. I discovered fulfillment in guiding young people especially girls to identify their strengths early and build meaningful careers. That passion led me to train as a TVET instructor and eventually serve as a TVET Manager and I am now a principal.

Qn. How does your current role align with your Rotary classification?

As Principal of a Vocational Training Institute, my work aligns directly with Rotary's focus on Education and Vocational Service. I equip young people with employable skills that promote self-reliance and community development. Rotary's emphasis on entrepreneurship, job creation, and community-based solutions mirrors my daily work, including collaborations with the Rotary Club of Sonde to identify and support youth for skills training at Ntinda VTI. I believe vocation is the intersection of passion, skill, purpose, and commitment. It is not simply what you do well, but what gives you meaning. When people love their work, excellence follows naturally. True vocation is lifelong it grows, evolves, and continues to shape who you are.

Qn. Why is vocational training still critical to Uganda's development?

Vocational training is a key driver of economic growth, equipping youth with practical skills needed in sectors such as construction, manufacturing, ICT, and agriculture. With over 70% of Uganda's population under 30, TVET offers pathways to employment, entrepreneurship, and



A student busy stitching a future during fashion design classes



Mastering the Grid in Electrical Wiring Practical

inclusion especially for learners who may not thrive in purely academic systems. Skilled graduates transform communities by creating businesses and delivering essential services.

Qn. Which skills are most in demand among young people today?

Traditional technical trades; electrical installation, plumbing, carpentry, welding, and automotive repair remain highly sought after. At the same time, demand for digital skills such as ICT, coding, digital marketing, AI, and e-mobility is growing. Entrepreneurship and soft skills like communication, teamwork, and problem-solving are now essential across all sectors.

Vocational training bridges the gap between education and employment. TVET emphasizes hands-on learning

and industry relevance. Institutions work with employers to align curricula to labour market needs, ensuring graduates are job-ready. Vocational training also prepares learners for self-employment, offering a direct route out of unemployment and reducing the number of youths not in employment, education, or training.

Qn. What challenges do public vocational institutions face that are often unseen?

Beyond infrastructure gaps lie deeper issues: funding constraints, weak industry linkages, rapid technological change and persistent social perceptions that undervalue vocational education. Trainers are often under-supported, and regulatory complexity can slow innovation. Despite this, recent frameworks such as the TVET Policy 2019 and TVET Act 2025 offer hope



Behind the Mask in Welding Practical

for stronger governance and quality improvement.

Qn. Which success stories stand out from your institute?

The first is of a young woman who was working as a maid in Sonde. Through a Rotarian, she joined our national certificate in electrical installations systems and maintenance program. Despite limited resources and personal challenges, she excelled in her training, later upgraded and completed a diploma in Electrical Engineering at UTC Kyema, and has now started her own wiring business. Today, she employs two other graduates, an inspiring example of how vocational training can turn potential into prosperity and create opportunities for others.

The second story is of an orphan who was brought to me by his Auntie. While his cousin pursued general education, the Aunt initially believed her nephew should not continue since he was only being supported. However, with mentorship and hands-on training, he discovered his passion in plumbing, studied diligently, and secured a stable job. He is now thriving in his career. His Auntie later visited me and expressed regret that she had not given her own son the

same opportunity, acknowledging the life-changing impact vocational training had on her nephew.

Qn. What role do partnerships play in strengthening vocational training?

The private sector plays a critical role by providing internships, job placements, and helping us align our curriculum with industry needs. NGOs and EDPs contribute through funding, innovation, and capacity-building support. Rotary, in particular, has a unique role in connecting us to community needs and mobilizing resources for outreach and student sponsorship.

KOICA has been our key donor since the very beginning. Its support has been invaluable—ranging from capacity building and equipping our institution, to providing training materials and fostering collaboration with industries.

The Ministry of Education, through the TVETOM department, serves as our mother ministry. It supports us with capitation grants, staffing, further institutional development, and even lobbies partners on our behalf.

Together, these partnerships ensure that vocational training is not

isolated, but fully integrated into the broader ecosystem of development, employment, and empowerment. They remind us that when government, private sector, NGOs, and service organizations like Rotary work hand in hand, we can transform vocational education and training into a powerful engine for national and community growth.

Qn. What reforms would you like to see in vocational education?

- **Trainer Development:** Invest in continuous professional development for trainers, including exposure to industry practices, so they remain current and effective.
- **Curriculum Modernization:** Regularly update training programs to match emerging technologies such as renewable energy, ICT, and e-mobility.
- **Digital Integration:** Introduce blended learning with online modules, simulations, and digital tools to complement hands-on training.
- **Industry-Driven Training:** Strengthen partnerships with industries so that curricula are co-designed with employers, ensuring graduates are job-ready.

- Entrepreneurship Focus: Embed business management and innovation skills into vocational programs so graduates can create jobs, not just seek them.
- Inclusive Access: Expand outreach to rural and marginalized communities, ensuring vocational education is equitable and accessible.
- Free Vocational Training: Advocate for government to provide dedicated funding for vocational education, treating it as a priority in its own right rather than comparable to UPE

Qn. What advice would you give young people who see vocational training as a second option?

Vocational training is not a second option, it is a different option that

leads directly to skills, employment, and independence. Many successful entrepreneurs, technicians, and innovators began with vocational training. It provides practical knowledge, opens doors to self-employment, and equips you to solve real-world problems. In fact, in today's economy, vocational skills are often more in demand than purely academic qualifications. My advice is: **embrace vocational training as a first step toward building your future with dignity, empowerment, and opportunity.**

Qn. How can Rotary clubs better support vocational institutions?

- Advocacy: Use Rotary's influence to elevate the perception of vocational training as a respected and valuable pathway.

- Student sponsorships: Provide scholarships for disadvantaged youth to enrol in vocational programs.
- Mentorship programs: Pair Rotarians with students to guide them in career planning, entrepreneurship, and leadership.
- Resource mobilization: Support institutions with equipment, tools, and materials to enhance practical training.
- Community linkages: Help vocational schools connect with local businesses and industries for internships and job placements.



From the Floor to the Ceiling

A Lifeline on the Water: RC Kampala Ssesse Islands to Launch Region's First Floating Hospital

Grant Title:	Floating Clinic for Ssesse Islands
Host Sponsor:	Rotary Club of Kampala Ssesse Islands
International Sponsor:	Rotary Club of Antioch (USA)
Grant Value:	US\$444,254
Project Duration:	2 Years



By Rtn Nelson Kabwama

Last month, The Rotary Foundation approved GG2462408 worth US\$444,254 sponsored by the Rotary Clubs of Kampala Ssesse Islands and Antioch ((USA). The primary objective of this project is to improve access to primary healthcare by the underserved and isolated island communities in Kalangala district via a hospital ship. The project will directly benefit approximately 40,000 residents, especially in the islands where medical infrastructure is limited and transport challenges often hinder access to the available health facilities. The goal is to provide a more equitable and efficient healthcare system that will reduce health disparities, especially among vulnerable populations including the poor, pregnant mothers, children and the elderly.

The hospital ship will be a sailing vessel equipped with experienced medical staff and essential diagnostic and treatment tools and equipment, plus the needed medicines and medical supplies. The vessel will dock at various islands for a period of time before moving to the next location. The vessel will be manufactured locally by ALUBAM, a Dutch company that has close to 20 years' experience in construction of customer-tailored water ambulances and hospitals.

Project Partners

The project will be executed in collaboration with several partners. Buganda Investments and Commercial Undertakings Limited (BICUL), a holding company of investment and business entities, owned by the Kingdom of Buganda, will be the key implementing partner. BICUL will take responsibility for and assume the day to day operation and maintenance of the vessel; secure the necessary approvals and permits to operate the vessel; provide and pay the needed medical workers and boat crew; make sure the vessel meets the necessary maritime regulations; and ensure compliance with environmental guidelines to prevent pollution by oil spills and medical waste. On the other hand, Buganda Amakula



All the 16 health facilities are located on only 9 islands among the 64 inhabited islands leaving 55 islands without a health facility. Moreover, 8 of the 16 health centers (50 percent) including Kalangala Health Center IV are located on the main island of Buggala, yet there is no public inter-island transport in the district. Worse still, Kalangala has no hospital and is therefore incapacitated to handle major emergencies and surgeries.

Northern California and Nevada USA, a community of Baganda in the United States, will mobilize Ugandans in the diaspora to raise awareness about the project, and to contribute towards the project funding.

Kalangala District Local Government and Kalangala District Health Office will also be key partners to this project. They will support the project through providing the necessary technical



assistance and coordination with relevant departments to facilitate smooth project execution; supporting the mobilization of resources to complement the project's objectives; and advocating for community involvement and ownership to ensure sustainability of the interventions. The host club, the Rotary Club of Kampala Ssese Islands will also engage Rotary Clubs around Lake Victoria region to support with the project funding while the Rotary Club of Kalangala Ssese Islands which is resident in

Ssese Islands will help with on-site supervision and oversight.

The Challenge:

Kalangala district (also called Ssese Islands) is an islands district situated in south western Uganda. The district is made up of 84 islands that are widely scattered in Lake Victoria covering an area of 9,066.8 sq. km of which only 432.1 sq. km (4.8%) is land, and the rest a water mass. Kalangala has 16 health centers composed of 13 public health units and 3 private health centers (2 NGOs and 1

church-based). The nearest referral hospitals are Masaka and Entebbe Hospitals which are 74km and 68km away from the district respectively. Masaka is about 2 hours away by Bukakata - Lukku ferry, while Entebbe is at least three 3.5 hours away by MV Kalangala ship. These 2 public vessels that connect the district to the mainland only dock on the main island of Buggala at scheduled times, moreover only during daytime, though many emergencies often present themselves during the night. To further compound the problem, Kalangala as a hard-to reach/stay area, is unable to attract and retain qualified and motivated staff. A 2024 Kalangala District Health Report revealed that only 31 percent of the approved medical positions were filled as of 31st October 2024. Across the entire district, only 228 out of the 739 positions were staffed.

The above factors have led to complex situation which means that, on one hand, the patients cannot get timely attention, while on the other hand, health workers and supplies cannot get to clients at facility level in time. On the whole, this precipitates poor health outcomes in form of late referrals, worsening conditions that would have been treated at less cost, permanent impairment, and high morbidity and mortality. The poor, pregnant mothers, children and the elderly are disproportionately affected.

The writer is a past president of the Rotary Club of Kampala Ssese Islands



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Transforming Twelve: The Scale of Rotary Impact in Yumbe district

Households using filtered drinking water had just 9% diarrhea prevalence, compared with 34% among those boiling alone.



By Rtn Royce Gloria Androa

In Yumbe District; one of Uganda's most underserved rural regions, Rotary is demonstrating how community-led development delivers lasting health, economic, and governance outcomes. Through Global Grant GG2237714, the Rotary Clubs of Arua and Yumbe, working with international partners, implemented an integrated package of water, sanitation, hygiene, safe drinking water, malaria prevention, and community governance across 12 rural villages, reaching approximately 18,000 people.

Before implementation began, Rotarians conducted formal Rotary Community Assessments in every village, engaging LC1-LC3 leaders, women's groups, youth, elders, and health volunteers. These consultations shaped village-by-village priorities, site selection, and governance arrangements, laying the foundation for strong ownership and sustainability.

Working alongside trained village teams, the project delivered a comprehensive WASH and disease-prevention system: 575 household latrines with handwashing stations, 945 household nanofiber drinking-



Rotarians and the team hand drilling one of the 37 wells

“

What once took women and girls hours each day now takes minutes—freeing time for school, income, and leadership.

water filters with training, and 37 improved borehole wells. Thirty-seven Water User Committees (WUCs) were trained and are now responsible for operation, maintenance, and water user fee collection.

Final baseline-to-endline evaluation results document substantial health gains. Under-five diarrhea prevalence declined from approximately 45–50% at

baseline to 26% at endline. Malaria prevalence among children aged 2–5 years fell dramatically; from about 52% to 10.9%. Functional handwashing coverage more than doubled, reaching over 80% of households, while sanitation access reached 100%, eliminating households without latrines.

Cross-analysis revealed that household water filtration provided the strongest protection against diarrhea. Under-five diarrhea prevalence was just 9.0% in households using filtered drinking water, compared with 33.7% among households relying on boiling alone, highlighting the critical role of safe, treated water even after sanitation access becomes universal.



The community pumping water from the new well



A Woman standing by her latrine and handwashing station

Improved water access also reduced time poverty. Average household time spent collecting water dropped from 2–3 hours per day to under one hour. Women and girls reported improved safety and reduced physical strain, with more time available for caregiving, schooling, and income-generating activities.

Health and time savings translated directly into economic resilience. At endline, 85.5% of households reported investing savings in school fees, 66.9% in housing improvements, and more than half in productive assets or small businesses—evidence that improved health enabled long-term household investment rather than

“

Rather than waiting for outside help, communities now organize repairs, manage funds, and lead their own water systems.

short-term coping.

Qualitative interviews across all villages revealed a consistent “before-and-after” transformation. Women and youth now hold leadership roles in WUCs and hygiene committees, decision-making on water, sanitation, and household finances is shared, and communities organize and finance routine repairs locally—

often through Village Savings and Loan Associations. Rather than waiting for external assistance, communities now solve problems themselves.

GG2237714 demonstrates that integrated, community-governed WASH and disease-prevention systems can simultaneously deliver major child health gains, reduced time poverty, strong local leadership, and economic resilience. With ownership, financing, and governance embedded at the village level, the project offers a replicable model for rural transformation across Uganda and beyond.

WASH in Yumbe: An Impact Snapshot



The Ecosystem of Impact: Your Guide to Leveraging District 9213's Strategic Partnerships

I often get asked, "Are these MOUs just for the District, or are they for my Club?" My answer is always the same: A Memorandum of Understanding is just a silent document until a Rotary Club breathes life into it. In the first half of this year, we have not just signed papers; we have built a marketplace of opportunities. We have exceeded our partnership targets by 40%, but the real "win" is not the number 14 - it is the fact that these alliances are designed to be the "engine room" for your club's next big project.

Think of the District's partnership portfolio as a toolkit. You do not need to build from scratch when the resources, technical expertise, and funding are already on the table, waiting for you to "plug in."



By Rtn Julie Janat Kariisa

1. The Health & Wellness Suite: Scaling Your Medical Outreaches

We have moved beyond simple first-aid camps to specialized, high-impact medical interventions.

- **The DFCU Powerhouse:** With a UGX 1 billion commitment, DFCU is our primary co-funder for medical camps. To date, over **20,000 people** have received care.
 - **How to Plugin:** Do not fundraise for months to hold a camp. Submit a well-structured proposal to the District Corporate Partnerships Committee. We vet it and link you to the DFCU funding pool for surgeries, diagnostics, and medicines.
- **C-Care IHK:** Need a venue or medical personnel? C-Care has committed to **100 annual health outreaches**.
 - **How to Plugin:** Contact us to schedule an outreach where

C-Care provides the experts, while your club provides the community mobilization. In addition, ensure your members get the **C-Care Health Card** for a 15% discount on services.

- **Maisha Meds:** If your project involves vision (eye care) or malaria, Maisha Meds provides the digital tracking and supply chain support to ensure your "last mile" delivery is actually reaching those in need.

2. Water & Environment: Halving Your Costs, Doubling Your Reach

Why pay full price for a borehole or solar system when you can leverage a 50% subsidy?

- **Davis & Shirliff (D&S):** This is perhaps our most practical



Posing for the cameras after a successful MoU signing ceremony between D9213 and UWASNET



A Partnership signing ceremony between D9213 and AMREF



The partnership signing ceremony between Rotary Uganda and UBL



A group picture at the NBS studios after the signing event

"plugin." D&S offers a **50-50 cost-sharing model** for Rotary projects involving solar power, water pumps, and irrigation.

- **How to Plugin:** When planning a WASH or environmental project, get a quote from D&S. Through our MOU, the District and D&S will work with you to cover the cost gap, just as we did for the solar installation at **Butoolo Health Centre III**.

- **EACOP & UBL:** We are planting 80,000 trees and engaging "Green Schools."

- **How to Plugin:** If your club adopts a school, use the EACOP "Green Schools Initiative" framework to introduce climate education and fruit tree planting without reinventing the curriculum.

3. Visibility: Getting Your Club on the National Stage

Your impact deserves to be seen, not

just by your members, but also by the world.

- **Next Media (AfroMobile):** We have a dedicated **Rotary Channel** on the AfroMobile app.
 - **How to Plugin:** Stop keeping your projects a secret. Send high-quality video clips and stories of your club's activities to the District Public Relations and Partnership teams. We will push this content to the AfroMobile platform, giving your club national visibility and making your future fundraising much easier.

4. Education & Welfare: Strengthening the Rotary Family

A strong club is one that takes care of its own and its community's future.

- **Prudential & Old Mutual:** While Prudential helps us renovate schools like **Bulamuka Primary**, Old Mutual is looking out for you.
 - **How to Plugin:** Invite Old Mutual to your fellowship for a Financial Literacy session. It is a free resource that adds value to your members' lives while introducing the Rotary GLE Group Family Funeral Cover to ensure no Rotarian stands alone in times of grief.

Beyond the Signature: A Call to Action

The "Why" behind these partnerships is simple: **Synergy!** When a club works alone, it is limited by its own bank account. When a club "plugins" to an MOU, it inherits the strength of a multi-billion shilling corporation.

My challenge to every Club President and Project Director is this:

Open the District Partnership Directory this week. Identify **one MOU** that aligns with your planned projects for the second half of the Rotary Year. Do not ask, "Can we do this?" Instead, ask, "How do we plugin?"

We have laid the tracks. It is time for your club to run the train.

The writer is the Chairperson, Corporate Partnerships Committee for the district & a past president Rotary Club of Kampala Kibuli

Safeguarding Service: Is Your Rotary Club Future Proof?

By now, we have all understood the benefits of having good governance in our Rotary Clubs. But we cannot forget that as the world evolves, so do the risks that affect our community projects, service and membership. We therefore must anticipate, manage, and mitigate emerging risks through strong governance. As clubs, we should create mechanisms to detect and respond to risks early. Clubs that consistently review their bylaws, strengthen their financial oversight, and institutionalize decision-making processes are better positioned to thrive even in uncertain environments.



By Rtn Irene Namuli

What risks do we foresee?

- Cybersecurity and Financial Fraud:** As clubs adopt digital tools for communication, fundraising, and financial management, especially through platforms like mobile money and online banking, the risk of cyber fraud has grown. Phishing, fake donation requests, and unauthorized access to digital accounts can easily undermine club trust and finances. We encourage clubs to have robust digital financial control policies, authorize limited signatories for electronic transactions, enforce multi-factor verification, and ensure that the treasurer and board review all electronic transfers.
- Reputational Risk in the Age of social media:** False information or inappropriate online behavior by members can quickly erode a club's standing. One misguided post or unverified report can

damage years of goodwill. We propose that clubs adopt clear communications and social media policy, designate official spokespeople, and train members on responsible digital conduct aligned with Rotary's values.

- Compliance and Regulatory Scrutiny:** With Uganda tightening regulations on NGOs and community organizations, Rotary clubs must demonstrate compliance in all operations; from financial reporting to registration and project execution. Clubs should designate compliance officers to ensure filings with the Uganda Registration Services Bureau (URSB) and other regulatory bodies and done in a timely manner. Keep meticulous documentation of minutes, financial reports, and project evaluations.
- Climate-Related and Environmental Risks:** Floods, droughts, and unpredictable weather patterns increasingly disrupt community projects, especially those involving infrastructure or agriculture. We call upon clubs to integrate environmental risk assessment into project planning. Diversify project locations, maintain insurance coverage for key events (where possible), and develop contingency plans for emergencies.



We recommend that clubs explore creative membership experiences as part of their strategic planning, adopt flexible meeting formats, embrace hybrid participation, and develop mentorship programs that integrate younger Rotarians into leadership pathways.

- Safeguarding and Protection of Vulnerable Groups:** Some of our club projects involve work with children (BELEP & MCH), youth (RYLA), and vulnerable adults. Without proper safeguards, well-intentioned initiatives can expose clubs to harm or legal liability. Ensure that all club members are trained on the youth Protection and Safeguarding Policies. Require background checks where necessary and train all members in ethical engagement and consent procedures.
- Membership Decline and Demographic Shifts:** Changing lifestyles and the rise of virtual engagement means traditional club models may struggle to attract younger professionals. We recommend that clubs explore creative membership experiences as part of their

strategic planning, adopt flexible meeting formats, embrace hybrid participation, and develop mentorship programs that integrate younger Rotarians into leadership pathways.

Clubs must move from reactive to proactive in mitigating risks. Have very clear risk management protocols as part of the club's governance structures. For example, every board meeting should include a risk review, and every project should have a risk management plan. Transparency in finances, clarity in communication,

and adherence to policies build trust and credibility both within the club and in the communities we serve.

We highly recommend that every club takes the following actions as part of their annual work plans.

- Conduct annual governance and compliance audits.
- Update club bylaws and policy manuals to align with Rotary International's latest Code of Policies.
- Implement structured orientation for new leaders on safeguarding,

finance, and compliance.

- Develop a risk register that identifies, rates, and monitors club-specific risks.

By embedding sound governance, transparent accountability, and proactive risk management into daily operations, our clubs will not only protect their legacy but also amplify their impact for generations to come.

The writer is the Vice Chairperson, D9213 Governance and Ethics Committee

Rotary District 9213

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Rotary District 9213

D9213 Guidelines for Allocation of District Designated Funds (DDF) for Global Grants (2025/2026)

“The biggest joke on humanity is that computers now ask people to prove they’re not a robot”



By Rtn Peter Isabirye

This Rotary year the available DDF is only **US\$ 147,911**.

Reduction in available DDF over the years has been mainly caused. By:

- Reduction in TRF contributions “tagged” to the Annual Programmes Fund (APF) as opposed to tagging donations direct to duly approved global grants.
- Increased support to clubs by the District Rotary Foundation Committee (DRFC) in developing “bankable” projects thus utilising all the available DDF.

The available DDF of US\$ 147,911 is a moving balance since reviewing and approval of grants by The Rotary Foundation (TRF). is a continuous process not necessarily tagged to one year. **SOLUTION:** Increased funding to TRF specifically to the APF and fast-tracking global grant applications.



Be open to learn, unlearn and relearn

DDF Summary for Rotary year 2025/2026:

1. DDF carried forward and available 2025/2026: USD 228,576.12
2. DDF tagged to project funding 2025/2026 (July approvals): USD 39,260.
3. DDF tagged to global grants submitted to TRF but not yet approved: USD 41,465.
4. **Total Uncommitted available funds for 2025/2026 as of 30th September 2025: USD 147,911**

Guidelines for DDF utilization for RY 2023/2024:

- Ring fencing of US\$ 10,000 of the DDF for Rotaract led District grants. These funds will support at least 10 qualified Rotaract clubs implementing meaningful and impactful projects. Priority will be given to collaborative projects among Rotaract clubs.

Eligibility: Only qualified Rotaract clubs will benefit from this fund.

- Rotaract clubs that collaborate to implement bigger district grants will be given first priority.
- No DDF allocation shall be made to Polio Plus in 2025/2026.
- VTTs initiated by international partners may receive up to **USD 2,000 per grant**. VTTs embedded within Global Grants will continue to receive DDF support, given their role in building capacity,

impact, and sustainability.

Rotary clubs partnering with Rotaract clubs on Global Grants will be given priority during DDF allocation.

Explicit Guidelines for Global Grants 2025/2026:

- ALL clubs seeking DDF for global grants will have to be **QUALIFIED**
- Clubs with overdue global grant reports after qualification will automatically lose their status and will subsequently have to re-apply for qualification!!
- **DDF will only match club contributions** even if TRF no longer matches club cash contributions. Clubs are encouraged to urge members to contribute to TRF as a basis for raising project funds.
- A club seeking DDF of US\$5,000 must commit to contribute a minimum of US\$5,000 to that particular global grant.
- **Minimum club contributions to attract DDF support will be US\$1,000** to encourage more contributions, ownership & active participation in global grants.
- Clubs intending to apply for DDF should show their proposed financing plan with the District Grant’s Committee for the appropriate guidance.



You’re a fighter. Look at everything you’ve overcome. Don’t give up now!

DDF will be allocated on a “first come. First served basis” on the following scale:

1. Grant value of \$30,000 to \$40,000. Maximum \$2,000 to match club’s contributions 1:1.
2. Grant value \$40,000 to \$60,000. Maximum \$3,000 to match club contributions 1:1
3. Grant value \$60,000 to \$80,000. Maximum \$4,000 to match club contributions 1:1.
4. Grant value \$80,000 to \$100,000. Maximum \$5,000 to match club contributions 1:1
5. Grant value over \$100,000. Maximum \$7,500 to match club contributions 1:1.

A ceiling for clubs of US\$10,000 will be put in place in 2025/26 to avoid having a club take unfair shares of DDF. For every USD 1 contributed by a club, the district will match USD 1, subject to the maximum limit defined by the grant value.

Special considerations:

For the avoidance of doubt a club or a group of clubs may make special requests for consideration where the above limits imply inadequate funding which requests will be reviewed by the DRFC team. The decision of the DRFC team will be binding and final.

Essential Financial Management Guidelines For Rotary & Rotaract Clubs (2025/2026):



When you run with the wolves, you’ll learn how to howl but when you associate with eagles you’ll learn how to soar to great heights

Financial Management is essentially “managing cash”.

These guidelines can be reviewed, amended, or modified to accommodate technological

developments and changes within the accounting profession.

Basics:

- Setting up accounting procedures for our clubs.
- Putting in place some form of internal controls.
- Provide a framework for generating accurate & reliable financial reports.
- Examine proper accountability of club, project funds.
- Encourage planning for club, project activities, informing efficient use of resources.
- Provide a monitoring tool for club and project activities.

Financial Responsibility/ Reporting:

The Club treasurer as the accounting officer has overall responsibility over daily financial operations of the club including budgeting, financial records, applications, interpretation & implementation of the accounting guide. He/she may delegate administrative responsibility as so deemed fit and appropriate.

Titbits:

- Each club’s financial records should be maintained and reported in Uganda shillings unless otherwise specified by the board of the club.
- Each club shall prepare its accounts with 30th June as the accounting period.

BUDGETING:

A club shall prepare an annual budget for its income & expenditure. A budget committee shall be set up for this purpose. This budget must of necessity be approved by the board

RECEIPTS & PAYMENTS:

INCOME:

Club income includes:

- Membership dues.
- Donations.
- Family of premier related business.
- For income received a serialised

receipt should be issued.

- All cash/cheques received should be banked as soon as possible and if necessary, on a daily basis. At no point should any part of cash received be used to meet expenses.
- Club members shall be invoiced for membership fees due.

EXPENDITURE:

- Monthly subscriptions. annual subscriptions.
- Stationery, venue hire, refreshments, communication.
- All expenses should of necessity be budgeted for and funds should be available. All expenses should be paid for by cheque or cash drawn from the respective bank accounts.
- Serially numbered payment vouchers shall be raised and approved by at least TWO of the following: President, Secretary and Treasurer.
- All expenses where applicable shall be supported by receipts and invoices.
- Account records shall be in the custody of the treasurer or any other designated official.



Nothing great was ever achieved without enthusiasm”—Ralph Waldo Emerson

BANK ACCOUNTS:

- These are opened with written approval from the board. Communication to this effect to the bank by a written instruction signed by the club president or any other designated account signatory. Each account shall be in the club’s names and must have three signatories approved by the board
- Each club shall maintain one bank account for club operations. It is mandatory that the club opens a separate account for each project to greatly ease accountability.

- Signing, counter-signing of blank cheques is strictly prohibited.

RECORDING OF TRANSACTIONS:

- Transactions shall be recorded on a timely basis preferably on the same day of occurrence. All receipts banked and payments made from the bank account recorded in a designated bank cash book.
- Receipts shall be recorded in the debit (Dr) columns and payments in the credit (Cr) columns.

BANK RECONCILIATION:

Bank statements shall be obtained every month. Bank balances per club's cash book should be reconciled to bank balance per bank statement.

PROJECT FUNDS:

Each project shall have a clear plan specifying:

“

“Sadness is caused by intelligence. The more you understand certain things, the more you wish you didn't understand them”— Charles Bukowski

- Project objectives, sources of funding, timeframe and budget approved by the board.
- Guidelines on how to authorise spending money and how to manage unutilised funds at the end of the project.

PROJECT FUNDS SHALL NOT BE MIXED WITH ORDINARY OPERATIONS OF THE CLUB.

- Separate record of accounts shall be maintained for each project each with a separate cash book, separate receipt books for each project.

- The project coordinator shall initiate all payments which shall be approved by either the president or secretary.
- A functional project's committee should ideally be in place to run project activities.

AUDIT:

Financial records of the club & its projects may be subjected to external audits as determined by the club's board. Audited annual accounts of the same Rotary year should be ready for presentation to the board by September each year (latest!). I.e., audited annual accounts for the **“Anne Nkuutu” (magic year)** should have been presented to the board by September 2025 for each club!

The write is a member of the DRFC for D9213 and also a member of the cadre of technical advisors of TRF in 3 areas of focus.

MEDICAL CORNER

The Ulcers that Weren't: Why your Persistent Stomach Pain Might Be Something More

Studies show that new cases of stomach cancer are on the rise in Western Uganda compared to other regions. The main risk factor for stomach cancer is infection with *Helicobacter pylori* (H. pylori), a bacterium. Other factors include smoking, excessive alcohol consumption, eating salted or smoked foods, and diets low in fruits and vegetables.



By Rtn Dr. Andrew Kwiringira

She was an epidemiologist at the Ministry of Health, a “disease detective” often on the frontlines of outbreaks like Ebola and COVID-19, protecting lives with courage and compassion. Away from the disease outbreak response, she began a journey with an illness that first appeared to be nothing more than the common ulcers.

It started with occasional burning pain in her upper abdomen, discomfort after meals, and bouts of nausea. When she visited hospitals, doctors diagnosed ulcers, a common first conclusion for such symptoms and she received treatment several times, each time bringing only temporary relief. But as months and years passed, the pain became more persistent, and she began losing weight and feeling full after just a few bites. Eventually, another doctor recommended an endoscopy, a procedure in which a thin, flexible tube with a camera

is passed through the throat to look directly inside the stomach. The examination revealed what had gone unnoticed for too long, a growth in her stomach. Tests confirmed it was stomach cancer. She began chemotherapy. But after a long and courageous fight, she passed on.

Her story is one shared by many Ugandans who unknowingly live with stomach cancer until it is discovered late. When detected at an advanced stage, only about two in every ten people survive beyond a few years. The symptoms like abdominal pain, heartburn, early fullness, nausea, and unexplained weight loss mimic ulcers, leading to delayed diagnosis. Access to diagnostic tools like endoscopy is limited to major hospitals, and without them, many patients may be treated repeatedly for ulcers and may die without ever knowing they had stomach cancer.

Her story is not unique; it reflects a growing but often hidden health challenge in Uganda. According to GLOBOCAN 2022, Uganda recorded approximately 608 new cases of stomach cancer and 508 deaths, making it one of the top 15 cancers in the country. Studies show that new cases of stomach cancer are on the rise in Western Uganda compared to other regions. The main risk factor for stomach cancer is infection with *Helicobacter pylori* (H. pylori), a bacterium. Other factors include smoking, excessive alcohol consumption, eating salted

or smoked foods, and diets low in fruits and vegetables. A family history of stomach cancer and certain occupational exposures (such as working in mining, rubber, or metal industries) have also been linked to increased risk. However, in some cases, the exact cause remains unknown, reminding us that anyone with persistent symptoms should seek medical evaluation.

Her journey and the many painful stories like hers, are a reminder that awareness saves lives. Rotary can play a powerful role in turning her story into action. Rotary clubs, especially in high-burden areas such as Western Uganda, can partner with health facilities to support early testing for H. pylori, sponsor community health talks, and support and equip hospitals with diagnostic tools, particularly endoscopy machines, which are vital for detecting stomach cancer early. Rotary can also provide diagnostic vouchers for patients who cannot afford specialized tests. By supporting prevention, early detection, and equitable access to care, Rotary can help ensure that no one else's life is quietly lost to a disease we have the power to detect and treat early.

The writer is a member of the Medical Committee of the Rotary Cancer Run. A PhD Fellow & Senior Epidemiologist, Ministry of Health He is a member of the Rotary Club of Kitende Breeze

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UP TO 31 MAY

What Every Family Should Know About Lung Cancer



By Rtn Dr. Andrew Kwiringira

Lung cancer is increasingly affecting many families, yet it often goes unnoticed in the beginning. It does not start in a sudden or obvious way. It begins quietly with a persistent cough, chest discomfort, getting tired easily, shortness of breath, coughing small amounts of blood, or gradual weight loss. These signs and symptoms are easy to dismiss or treat as something familiar, like Tuberculosis, asthma, or a pneumonia. Families go from clinic to clinic, round after round of treatment, believing they are managing these common illnesses. Meanwhile, the real problem- lung cancer continues to grow in silence. By the time it is finally recognized, it is often already advanced, and the chance for cure is greatly reduced.

A 10-year study at the Uganda Cancer Institute by Naghib et al, revealed that 2 in every 10 patients who were diagnosed with lung cancer had been treated for tuberculosis or chronic cough, several times before the correct diagnosis of lung cancer was made. The study also found that 7 in every 10 patients diagnosed with lung cancer had never smoked. This challenges the widespread belief that lung cancer only affects smokers. Many of these patients were instead exposed to charcoal and firewood smoke in kitchens, dusty work environments, or urban pollution. By the time they reached Uganda Cancer Institute, 9 in every 10 patients already had advanced cancer in stages III or IV, when the cancer had spread too far, leaving only palliative or supportive treatment options. Because the disease is often found late, survival is very low. The study showed that only 4 in every 10 patients survive up to six months after diagnosis, and only 1 in 10 survive up to two years.

Advocacy starts by reshaping what communities understand about lung cancer. Key messages include:

- A cough lasting more than eight weeks should not be ignored
- Not all chronic coughs are



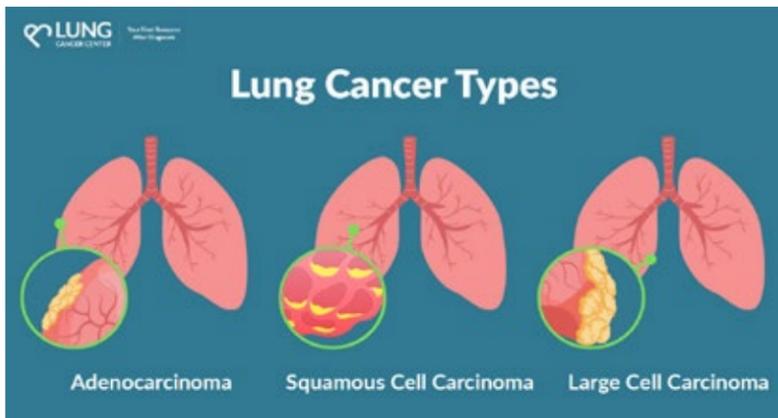
The study also found that 7 in every 10 patients diagnosed with lung cancer had never smoked. This challenges the widespread belief that lung cancer only affects smokers.

tuberculosis

- Non-smokers can also develop lung cancer
- Smoke from charcoal stoves and firewood can be harmful over many years

Rotary is uniquely positioned to influence how our communities understand and respond to lung cancer by raising awareness. Promoting cleaner cooking solutions, such as improved stoves can reduce harmful smoke exposure in homes. Rotary can also support tobacco control through awareness campaigns and by working with local leaders to enforce smoke-free spaces. Rotary can further strengthen healthcare services by mobilizing resources to improve diagnostic capacity of rural hospitals including access to X-ray and ultrasound equipment. Rotary can also support patients who are in advanced stages of cancer by partnering with hospices and palliative care programs to provide pain relief, counseling, home-based care, and emotional support.

The writer is a member of the Medical Committee of the Rotary Cancer Run. A PhD Fellow & Senior Epidemiologist, Ministry of Health He is a member of the Rotary Club of Kitende Breeze



The Best Resolution You'll Ever Make for 2026: Get Screened for Cancer

Cancer has silently become Uganda's most urgent health challenge. According to the Global Cancer Observatory, over 35,000 new cancer cases and more than 24,000 cancer-related deaths are recorded every year in Uganda. Alarmingly, more than 7 out of every 10 cancer cases in Uganda are diagnosed at late stages when treatment is difficult. Consequently, 4 out of every 5 people diagnosed do not live long after their diagnosis in Uganda. Yet amid these realities lies a hopeful truth; early screening saves lives.



By Rtn Dr. Andrew Kwiringira

Flowers are sweet, chocolates are thoughtful, and dinner dates are wonderful but imagine telling your partner, "Instead of a dinner date, how about I take you for a cancer screening?" Now that is real commitment. Nothing says I want a future with you like prioritizing each other's health. And of course, after the screening you can still enjoy the dinner, this time with peace of mind and organs ready to celebrate responsibly.

When detected early, most cancers are far easier to treat and associated with better survival outcomes. Across the world, data consistently shows that when cancer is detected early, survival rates are much higher. For example:

- Early breast cancer has survival rates above 99%
- Early cervical abnormalities can be treated completely
- Early colorectal cancer is one of the most treatable cancers
- Early lung and prostate cancers respond far better to treatment than late-stage disease

Late-stage cancer often requires intense treatment multiple rounds of chemotherapy, radiation, major surgery, long hospital stays, and extended recovery times. These treatments take a toll on the body and the mind. Early-stage disease, by contrast, often requires minimal intervention: smaller surgeries, fewer treatment sessions, lower doses, shorter recovery. Cancer treatment is expensive, and late detection multiplies the cost. Treatment requires extensive interventions, long hospital stays, and costly drugs. Recently, the media has been awash with heartbreaking stories of the deceased being withheld in private hospitals until families clear huge medical bills. These tragic scenes reflect the crushing financial impact that delayed diagnosis can have on communities. Families lose savings, sell land, take loans, and sometimes still fail to meet the costs. Screening is a small investment that can save families from catastrophic financial loss and save lives in the process. All of this reinforces one important truth, the earlier we screen, the better our chances of avoiding such devastating outcomes.

Cancer screening is not a one-size-fits-all approach. Each person's risk is shaped by age, family history, genetics, lifestyle, and past medical conditions, meaning the right time to screen can vary from one individual to another. This is why one of the most important steps you can take for your health is simply to speak with a healthcare professional who can guide you on what screenings are appropriate for you. Whether it is breast, cervical, colorectal, prostate,

or lung cancer, the key message is the same. Do not wait for symptoms. Yet even with clear guidance on who should be screened and when, access to screening remains a major challenge for many Ugandans.

Despite the proven benefits of early detection through screening, Uganda continues to face barriers at multiple levels. At the individual level, low awareness, limited perceived risk, fear of pain, stigma associated with cancer screening, competing life priorities, and widespread misconceptions contribute to low uptake. At the health system level critical obstacles such as shortage of trained health workers, inadequate diagnostic infrastructure at low level health facilities. Many people must travel long distances for cancer screening and weak referral and follow-up systems further hinder screening services.

Rotary in Uganda has played an important role in bridging some of these gaps through community outreach, awareness campaigns, and supporting access to screening services. As the cancer burden continues to rise, there is an urgent need for more partners, private sector actors, civil society organizations to complement government initiatives by expanding community education, strengthening screening capacity, and addressing the bottlenecks that keep Ugandans from accessing early detection services.

The writer is a member of the Medical Committee of the Rotary Cancer Run. A PhD Fellow & Senior Epidemiologist, Ministry of Health He is a member of the Rotary Club of Kitende Breeze



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