# Yotkom Elective Reflection: Matthew Durden, MBBSVI

Imagine walking more than a kilometre for water, your calloused feet and weary soul treading the same path each day. Imagine making a choice between vital medications or food. Imagine owning one set of clothes; clothes that you cherish so tightly, it is a second skin. For many people in Northern Uganda this is not simply imagination, but reality.

Over the last month I have been privileged to spend time in Kitgum, with the Acholi people of Northern Uganda under the supervision of Dr Andrew Wright. Dr Wright was first introduced to this region in 2001, and has been a familiar face ever since. The Kitgum district has a population of approximately 250,000; 40% of these live below the poverty line. The health statistics reflect the immense challenges faced by this population; a life expectancy of 45, maternal mortality twenty times that of Australia, and the ever-constant burden of infectious disease, particularly afflicting the most vulnerable; children.

Dr Wright founded a medical centre, Yotkom (Yotkom means health in Acholi), which after only nine months in operation, provides a valuable healthcare service to more than 400 patients per week. This facility is entirely operated by local people with permanent clinical officers, nursing staff, pharmacy, X-ray, ultrasound, laboratory technicians, and maintenance staff. In addition to spending time at Yotkom, I gained experience at both the Catholic and Government hospital. During this time I was exposed to myriad diseases that we don’t see in Australia; infectious diseases such as malaria, typhoid, tuberculosis, and brucellosis, congenital conditions, nutritional deficiencies, and complications of chronic disease. During my stay, Kitgum was in the midst of a malaria endemic, with the vast majority of the children’s wards occupied by malaria patients. These children were extremely sick due to the prevalence of P. Falciparum; the most severe malaria parasite. Thus, the associated seizures, anaemia, and ultimately high rates of mortality. Furthermore, the lack of resources, staff, and appropriate management places an even greater burden on the community. Of greater importance than my learning, is the ongoing education of the local staff, and I was fortunate to contribute through education surrounding acute rheumatic fever, rheumatic heart disease, and brucellosis at both Yotkom and St. Joseph’s hospital. Rheumatic heart disease is particularly relevant to the Kitgum district being a disease that disproportionately affects those in developing countries. However importantly, it is a condition that is completely preventable.

Despite the intrigue of tropical medicine, and the challenges of medical practice in a developing country, it is the people of Kitgum that have left a lasting impression. The warmth and kindness of the community, and the Yotkom medical team in particular was distinctive; a signature of the Acholi people. In meeting with people in the community, in the healthcare centres, or running amongst the fields; it was clear that amongst the heartache, amongst the brokenness, despite the immense challenges that the community has faced there is a prevailing joy. There is beauty in the simplicity of life; the necessities of shelter, food, water, intertwined with such a sense of community and faith; it is hope that shines through.

The work of Yotkom is making a real difference in the community, as the medical centre is gaining a reputation for a high standard of care. During my time in Kitgum I was able to witness first-hand the provision of an effective primary healthcare service. I look forward to when I might next find myself in Kitgum.

Lubanga Omedi Gum (God Bless you)

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