

TOGETHER WE CAN FIGHT SICKLE CELL



UA SCRF
UGANDA



ANNUAL REPORT 2013-2014



MISSION

"To improve the general quality of life for people with sickle cell disease through management and treatment; increasing advocacy against the stigma associated with the disease; providing awareness and information on Sickle Cell disease in Uganda"

VISION

"To establish a Centre of Excellence to promote the wellbeing of people living with Sickle Cell in Uganda"

ABOUT THIS REPORT

Our Annual Report provides an overview of the work of the Uganda American Sickle Cell Rescue Fund November 2013 – December 2014. The report covers the work of the Uganda Secretariat, details the joint work of the UASCRF and also illustrates work with our partners. Financial figures are provided for Uganda the Secretariat.

Uganda American Sickle Cell Rescue fund supports increasing calls for greater accountability from Non-Governmental Organizations (NGOs) to donors, governments, partners and communities.

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MESSAGE FROM CHAIRPERSON BOARD OF DIRECTORS

This is my first annual message as the Chairperson of the Board of Directors of Uganda American Sickle Cell Rescue Fund (UASCRF). I'm excited to be able to share some thoughts about UASCRF's work over the past year.

Uganda American Sickle Cell Rescue fund wishes to express its gratitude and appreciation for the steadfast support of its funders and partners during this year 2014. This support has enabled the Fund to continue its strides in the provision of comprehensive community education, counseling and supportive services to the people living with sickle cell, their caregivers and population at-risk for sickle cell disease. In this year alone, we have been able to extend direct services to over 6000 individuals across the country. This support ranging from individual, corporate and governmental has helped UASCRF to become the champions of a sickle cell comprehensive program locally and regionally.

At the UASCRF, we work especially hard to engage a network of partners who bring diverse perspectives to the work we're doing together. As a community support organization, we depend on their willingness to challenge us when they disagree with our approach. For example, when one of our partners who is engaged in community development invited us to Lusaze village a suburb Rubaga, Kampala district for a community outreach. The debate was on how best to engage this community in the fight against Sickle cell. Our partner had a different approach but in the end, this ongoing discussion enables all of us to increase the impact we're having.

In this period of one year, we trained counselors who have been able to move to communities and sensitize them about Sickle Cell Disease. In July, one mother who was married with seven children visited us. The youngest of these was one year and half and had recently been diagnosed with Sickle Cell Disease. The remaining six were free of sickle cell. This mother complained that her husband was throwing her out. The husband insisted that this sickly child is not his and the woman should take it away from his home. With the inter-



vention of our counselors the family agreed to take the sickle cell test from where they realized that they both carried the trait. The marriage was saved after the husband was educated about sickle cell. It was a small thing but for this mother, the ramifications were a happy and rewarding future for their family. That day, I was humbled to see the impact that philanthropy can have.

As we address these and other important issues, we will be guided first and foremost by how this work contributes to our overarching goal of helping improve the lives of people living with sickle cell in Uganda. In that spirit, I look forward to reporting back in next year's message about how we've developed and how we plan to keep increasing the impact of every activity we do. In the end, impact is why we're here.

Sincerely,

Dr. Bulaimu Muwanga Kibirige

Chairperson and Founder, Board of Directors
UASCRF – Uganda Chapter
December, 2014



As medical personnel, a mother who once raised a sickle cell child, then was cured, I am happy to report that our dedication to making a difference and raising awareness to the Struggles of living with Sickle cell anemia in Uganda and worldwide has been fruitful.

It has been a year since we launched Uganda American Sickle Cell Rescue Fund Uganda. Am pleased to inform you that within this time we have been able to transcend beyond our expectations. UASCRF has been able to grow and develop into the Non-profit it ought to be.

This year has been very instrumental in establishing UASCRF as key national and regional player in the field of Sickle Cell Disease. With the representation at the H3Africa Sickle Cell meeting, UASCRF has strategically positioned itself a key advocate not only in Uganda but Africa at large. This is synonymous with our vision of "establishing a Centre of Excellence to promote the wellbeing of people living with Sickle Cell."

What's more, we would not achieved such a great year without the support and donation from Hotel Africana, Bank of Uganda, City tyres, Monitor Publications, The Observer, Scandi Trading, and Ssubbi Fm, Pearl Fm to mention a few. As UASCRF we have vowed to do all that we can to fight sickle cell. I know that we cannot do it alone but TOGETHER WE CAN fight Sickle Cell Disease

I hope that as you read more about the way UASCRF strives to address the sickle cell challenges, you will feel our passion and understand our approach. I hope that it will motivate you to find a way

MESSAGE FROM PRESIDENT AND Co-FOUNDER

to personally engage with such issues as promoting awareness and fighting stigma. I hope you will join us through direct service, through donating, through information dissemination or your own creative ways to support our efforts. I look forward to meeting, talking and working with you as we make a positive impact within our world.

Lukiah Mulumba,

Major, Dr, MSN, FNP
President and Founder
Uganda American Sickle Cell Rescue fund
USA, Chapter



Children dancing at an end of year party at Mulago sickle cell clinic.

SECTION

1

UGANDA AMERICAN SICKLE CELL RESCUE FUND

The Uganda-American Sickle Cell Rescue Fund (UASCRF) Uganda chapter is a tax –exempt nonprofit organization which was founded in 2013. It is an effort by BMK Group of companies (Uganda) and UAS-CRF (USA), founded by Abudallah and Lukiah Mulumba with well-wishers both in Uganda and United States to raise funds and awareness to help in the fight against sickle cell disease in Uganda. All funds 100% raised are to be used directly for programs related to sickle cell disease in Uganda.

Sickle Cell disease (SCD) is a serious inherited blood disorder most commonly found in people (or their descendants) from regions of the world where malaria is or was common. Sickle Cell Anemia is the most severe of all types of sickle cell disease. Sickle cell Anemia (SCA) occurs in children whose parents (both the mother and the father) are genetic carriers of the sickle cell gene. Sickle Cell Disease and in particular Sickle Cell Anemia is a severe and often fatal disorder. Approximately 25,000 children are born with sickle cell disease every year in Uganda, but unfortunately 70-80 % die before their 5th birthday.

There is no newborn screening program in the country and children are often diagnosed after development of a crisis. Due to lack of newborn screening and lack of pre-marital genetic counseling, individuals with sickle cell trait and sickle cell disease are intermarrying ignorantly, and diagnosis is usually made late and many children die before they are diagnosed.

In Uganda the dilemma of a sickle cell sufferer and the immediate family goes beyond grappling with the overwhelming health effects of the disease. The deeply-rooted stigma from society alone causes families to sometimes hide their sick for fear of being labeled cursed and ostracized from social functions. When it is known that a family has a sufferer, intimate relationships with any member of that family are shunned.

Fortunately, UASCRF Uganda seeks to improve the general quality of life for people with sickle cell disease through management and treatment, increasing advocacy against the stigma associated with the disease, providing awareness and information on Sickle Cell disease and reducing morbidity and mortality. We now call upon Ugandans and the world at large to join us to save children whose lives are claimed and morbidity raised by sickle cell disease annually in Uganda.



Volunteers from Nsambya hospital giving out medicine

SECTION

2

OUR YEAR

UASCRF STRATEGIC PLAN:

TOGETHER WE CAN FIGHT SICKLE CELL

Our work is at a community level which sets our shared goals for 2014 – 2017 and it takes a 'bottom up' approach, as it is driven by the local community context and strategies. UASCRF's new Plan has been developed from a review of our successes and failures since 2005 when UASCRF-USA was founded and is very much informed by inputs from allies, partners and critical friends.

UASCRF's new Plan is built on a clear recognition that the different stakeholders across the world and especially the people, with whom we work, have a critical and complementary role to play in the fight against Sickle Cell Disease. The deliberate effort to link people in the United States of America and Uganda as part of one movement presents an important opportunity for UASCRF to attain lasting impact.

The Plan will :-

- Set out how we will best achieve our aims and our purpose over the next three years.
- Underpin by integrating our work, from promoting awareness to setting up prevention, care and management programs.
- Seek to address local problems with global solutions, acting as a convener, by bringing together likely and unlikely actors, parties and organizations to fight against Sickle Cell in Uganda.

In order to support UASCRF's Mission, we have set an ambitious agenda for 2014 – 2017 with five objectives to impact Uganda:

1. CO-ORDINATION OF ADVOCACY;

- Coordinating key stake holders by working to effectively assist in the resolution of the sickle cell disease problems which cannot be met by any single agency acting alone.
- Following a bottom-up approach, starting with community-level platforms with representation from people living with sickle cell disease
- Net working with Organizations and NGOs taking up issues on a community basis, and then proceeding to the sub-regional level, by playing active role in sub-regional organizations then to regional level.
- Emphasizing co-ordination between sub-regional and national civil society Organizations

2. RESOURCE MOBILIZATION;

- UASCRF seeks to build local constituents supporting the efforts, financially or otherwise.
- Empowering the community to interact and share the objectives of the program, understand them, and aspire to see them realized.

3. TREATMENT SUPPORTING INTEGRATED DELIVERY;

- Effectively delivering evidenced based sickle cell treatment that requires a multi-discipline partnership working as an integrated delivery model.
- Seeking to deliver a model that promotes and involves scaling from counselors, nutritionist to specialist, and care givers

4. CAPACITY BUILDING;

- Through guiding partnership principles emphasizing the importance of building relationships with local partners and strengthening their skills in areas such as the current approaches of sickle cell management.
- Focusing on skills strategic planning, advocacy, organizational management, and project development and management.

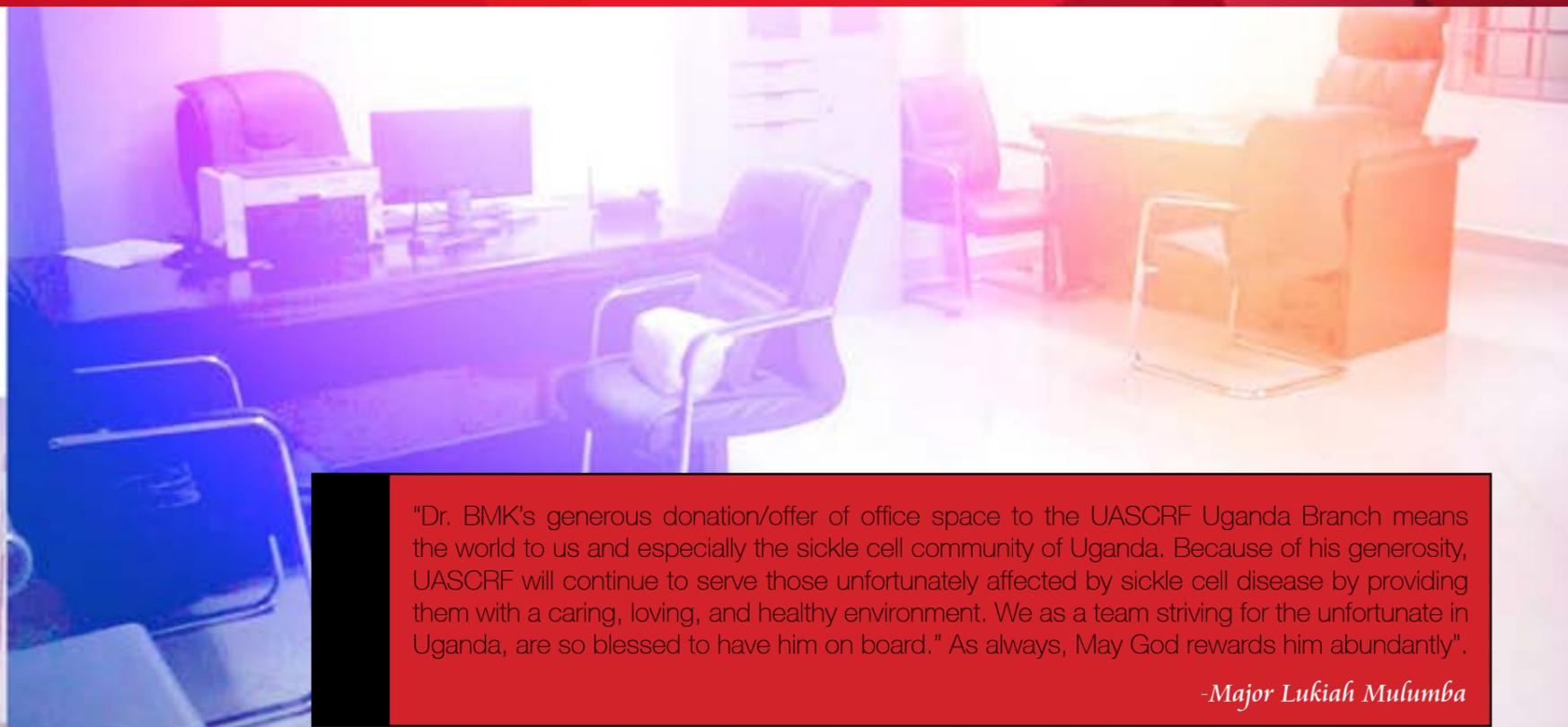
5. POLICY FORMULATION AND APPLICATION;

- Seeking to employ a bottom-up policy formulation process collecting feedback from a diverse range of people through multiple channels.
- Creating an environment that brings together heterogeneous activities, resources and functions in a meaningful and actionable ensemble, organized around a case involving a policy initiative and based on making decisions about a policy intention. Thus enabling stake holders to formulate and promote policy application.

SECTION
3

OFFICE LAUNCHING

On 14th March 2014, our beloved chairperson Dr. Bulaimu Muwanga Kibirige donated to UASCRF a fully equipped office located at BMK house, Suite 1- First floor, Plot 4/5 Nyaboong road. The classy and executive office is equipped with WiFi, 3 tables, 2 cabins with a safe, among other things.



"Dr. BMK's generous donation/offer of office space to the UASCRF Uganda Branch means the world to us and especially the sickle cell community of Uganda. Because of his generosity, UASCRF will continue to serve those unfortunately affected by sickle cell disease by providing them with a caring, loving, and healthy environment. We as a team striving for the unfortunate in Uganda, are so blessed to have him on board." As always, May God rewards him abundantly".

-Major Lukiah Mulumba



Board members and well wishers and the office launch

SECTION
4

SICKLE CELL COUNSELOR TRAINING & CERTIFICATION PROGRAM

PROGRAM DESCRIPTION

The program was initiated by the Uganda-American Sickle Cell Rescue Fund (UASCRF) USA in conjunction with UASCRF Uganda in 2014 to ensure that accurate sickle cell disease education and counseling is provided to the people of Uganda in areas of families who are affected by sickle cell anemia, trait or carrier, hemoglobin C trait, and/or hemoglobin D trait. The training will be expanded to include certification of sickle cell disease counselors delivering the messages to sickle cell agencies, schools, hospital, and families.

TRAINING PROGRAM

It is an intake of 30 counselor students. It is a 30 day training program consisting of a 5 day- week in house training, a 5 day- week internship at the hospitals, a 5 day- week in house training to review what transpired in the internship/practice. It is followed by another 5 day-week internship at the hospitals level with a completion of an examination for certification. The program seeks to create continuing education such as DVDs, CDs, workshops, or seminars with an overall objective of providing the most up-to-date information about the disease pathophysiology, hemoglobin traits, sickle cell disease, treatment, psycho-social, financial, marriage/relationships, divorce, and stigma in the community, teenage self-esteem, and support groups.

CERTIFIED COUNSELOR

The certified counselors must periodically take part in UASCRF required continuing education programs to maintain their certification through ongoing continuing education.



20 COUNSELORS TRAINED;

UASCRF was able to train a team 20 young talented individuals who are delivering sickle cell education and counseling to our affiliated sickle cell agencies, schools, hospital, families, and other care givers affected by sickle cell condition in Uganda

With help from;

Ms. Agnes Kimara, Sickle Cell Disease Specialist &Expert, International Health Sciences Univeristy, Kampala, Uganda.



Heather A. Hume, Prof, Sainte-Justine, Hospitalier Universitaire Mere-Enfant, University of Montreal, Quebec, Canada.

Dr. Christopher Ndugwa, Prof, Retired Hematologist, Sickle Cell Children's Clinic, Mulago Referral Hospital, Uganda

Dr. Olatundun Williams, Resident Pediatrician, Minneapolis Children's Clinic, USA .

Ms. Eva Wanyenze, Sickle Cell Disease Specialist &Expert, International Health Sciences Univeristy, Kampala, Uganda.



UASCRF

IN CONJUNCTION WITH

BMR GROUP

FIRST ANNUAL SICKLE CELL CONFERENCE 2013

A NATIONAL DIALOGUE: THE WAY FORWARD

The first annual sickle cell conference which attracted over 4500 people at hotel Africana Kampala.

SECTION
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FIRST ANNUAL SICKLE CELL CONFERENCE: JULY 2013

It was organized by UASCRF (USA) and graciously donated by BMK Group of Companies Group and Hotel Africana Kampala, Uganda.

This First annual sickle cell conference was organized to create a national dialogue: a way forward to recognize the need for a National Sickle Cell Disease policy framework in Uganda, involving the Ugandan government, and the urgent need for scientific research, and the challenges along way among those caring and living with sickle cell disease. This marked the beginning of many other conferences that will emphasize the need to save the Ugandan children whose lives are claimed by sickle cell disease in Uganda. This conference targeted government health care policy makers, medical schools, nursing schools, universities, hospitals and the community. The conference also targeted non-government organizations such as local Sickle Cells organizations, International Agencies and the media.

The conference attracted over 4000 participants. The memorable event was graced by the Rt. Hon Rebecca Kadaga as the Guest of Honor. She pledged to support the sickle cell cause by spearheading policy makers through support to government's financial and moral commitment to this cause especially development of a National Policy Framework that deals specifically prevention, treatment and eradication of the disease in the country. Ms. Lukiah L. Mulumba, The event organizer, a Ugandan American, delivered the presentation entitled 'Management of sickle cell disease, coping, caring and living with sickle cell disease. A national dialogue; way forward. The need for a National Sickle Cell Disease policy framework in Uganda, involving the Ugandan government, and the urgent need for scientific research, and the challenges along the way'. Her presentation and her personal story emotionally touched so many hearts including the chief guest. She called for government's increased reinforcement to fund countrywide programs including early diagnosis, community education outreaches, research and development of evidence-based management. The event attracted foreign delegates including Dr. Sushi Metha, a consultant from the Nova specialty centre in Mumbai; Mr. Desmond Elliot, Nigerian Sickle Cell Ambassador; Mr. Eric, Director Burundi Sickle Cell Association and Director of Sickle Cell Association of Nigeria.

SECOND ANNUAL SICKLE CELL CONFERENCE

THEME: I AM YOU, WHY THE STIGMA

This conference was graciously hosted by BMK Group of Companies on the 19th of June 2014 at Hotel Africana / Nile Hall .With an aim of achieving the following goals;

- To advocate for improved quality of life for individuals and families affected with sickle cell disease and its associated morbidity and mortality,
- To foster the exchange of the latest scientific and clinical information related to the disease through the offering of innovative symposia, training seminars and interactive panel discussions.
- To offer an array of exciting activities designed to educate and motivate the entire community to get involved in the fight against Sickle Cell Disease.

The event attracted over 5000 participants who went away with a pack of medications containing Folic Acid, Multi-Vitamins and Paracetamol each.

CONCEPT

The Sickle Cell Conference sought, among other things, to create a collision between government and its entities such as health policy makers, ministry of health, universities, schools, and the civil society in implementing disease health policy, increasing the disease awareness, education about the disease, appeal for more research/funding for sickle cell activities, increase/involve evidenced based practices in sickle cell management in Ugandan health care centers/hospitals and re-ignite the impact of sickle cell diseases on the communities and households.

His Excellence, the Vice President of the Republic of Uganda Edward Kiwanuka Ssekandi graced the occasion as the Guest of Honor. He was accompanied by Hon Sarah Opendi the state minister for Primary Health Care. Amongst presenters, Prof. Russell E.Ware from Cincinnati children's Hospital delivered the key note speech focusing on the novel use of Hydroxyurea in an African Region with Malaria. Other presenters included Prof. Grace Ndezi who shared the preliminary findings of the Uganda Sickle Surveillance study; Dr. Gerald Mutungi(the Commissioner of the Non Communicable Disease Department at Ministry of Health)who shared an overview on Non communicable Diseases in Uganda; Dr. Munube Deogratus who presented the management of sickle cell ; Dr. Kasirye Phillip the acting head of the Sickle cell clinic of Mulago National Referral hospital who educated the participants about the signs and symptoms of sickle cell disease; Dr. Namusoke Hellen who presented on Sickle Cell and stigma and Mr. Ssebandeke Ashiraf who presented on Media and sickle cell stigma .

Major Sponsors:

BMK Group of Companies, Hotel Africana, City Tyres , Scandi Trading, Nice house of Plastics, Vero Water, Wavah Water , Delta Water, Vision Group, Bukedde News, Suubi Fm, Pearl FM, The Observer, The Monitor publications, Dembe Fm and K fm. UBC, Olupapula and Bukedde FM, CBS Fm and Capital FM.

Our achievements from the conference included; an annual 10 million donation from Mr. Nsubuga Eros-tus and 20 scholarships for Tertiary Education at Namasuba College of Commerce.



Hotel Africa Nile Hall during the second annual sickle cell conference.



ORGANISING TEAM



Major Lukiah Mulumba, Sarah Short and a team of volunteers during the preparation of the first sickle cell conference.

The VP of uganda and state minister for health launching the medication donation at the 2nd sickle cell conference.

SECTION

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HUMAN HEREDITY AND HEALTH (H3) IN AFRICA SICKLE CELL MEETING, Dar Es Salam Tanzania

Uganda American Sickle Cell Rescue fund was represented at the H3Africa sickle Cell Meeting which took place on 7th November 2014 in Dar es Salam, Tanzania. At the meeting 18 African countries were represented, other countries present included United States of America, United Kingdom and Brazil.

Meeting Objective:

Toward improving infrastructure for Health Care and Research in Africa

Meeting Background

Worldwide, an estimated 305,800 Sickle Cell Disease (SCD) births occur annually. Nearly two-thirds of these take place in Africa. Although the first clinical description of SCD was published over 100 years ago and the molecular basis of the disease has been appreciated since 1949, only

one drug, hydroxyurea, has proven efficacy and is available for treatment.

Furthermore, despite evidence from high income countries that newborn screening (NBS), penicillin prophylaxis, and comprehensive care are associated with a 70% reduction in early deaths from SCD, few African countries have implemented these measures. As a consequence, mortality rates are high before the age of 5 years in this region. Estimates suggest that without intervention, up to 90% of those affected may die in childhood.

Collaborations among African investigators and NIH funded programs such as H3Africa, offer unique opportunities to begin to build an African SCD Investigative Network.

Such a network would have the capacity to

- Establish an inventory of patients and their clinical phenotypes,
- Investigate infrastructural needs in African countries where SCD is prevalent,
- Address translational and implementation SCD research that is sensitive to socio-environmental factors in Africa and
- Seize an unprecedented opportunity to advance discovery research in areas such as SCD associated genomics. These endeavors would ultimately improve health not only for African patients with SCD but for SCD patients worldwide.

Meeting overview:

This meeting was divided into four main panel discussions with a keynote lecture.

1. Keynote Lecture: 100 years of SCD from an African Perspective

This lecture was delivered by Prof. K. Ohene Fremong a Ghanaian based in the USA. The lecture focused on the history of Sickle Cell Disease and how it has affected Africa for the past 100 years. The lecture also focused on addressed SCD with the latest technologies. The lecture also emphasized the need to streamline SCD intervention to fit the African context,

2. Panel Discussion 1: Diagnostic Infrastructures and Genetic Studies

This panel focused on the available diagnostic technologies, how they can be streamlined/ modified for use in Africa. The panel also identified the need explore other available technologies for use as diagnostic tools in Africa.

3. Panel Discussion 2: Patient Care

This panel focused on the current patient care techniques and advised that patient initiatives should be included in the treatment plan. This panel also advised on the need to consider alternative treatment as part of the treatment plan.

4. Panel Discussion 3: Phenotype, surveillance and data linkage

This panel focused on the commonest complications that have been linked to SCD i.e. Stroke and Kidney Disease. This panel further considered the linkage between hemolysis and Acute chest syndrome. The panel also considered the linkage between infections and the increased mortality in SCD.

5. Panel Discussion 4: Socio-environmental and ethical challenges

This panel focused on stigmas, the psychosocial burden and social challenges attributed to SCD in Africa. The panel identified the training of Counselors as the best solution to all the above problems.

Meeting Outcomes

- The National Heart, Lung and Blood Institute USA, agreed to set up a three year infrastructure fund to support infrastructure development in SCD in Africa.
- As part of the above fund a Sickle Cell Disease Africa Consortium will be set up to support and oversee Research and Training in Africa.

UASCRF Organizational Achievements at this meeting.

We were able to network with most of the patient groups in the several African countries. With this network we shall be able to integrate patient support modules being used elsewhere and incorporate the meeting recommendations to UASCRF strategic plan. Thus improve the quality of life of people living with SCD in Uganda.

SECTION

7

FUNDRAISING AND INCOME

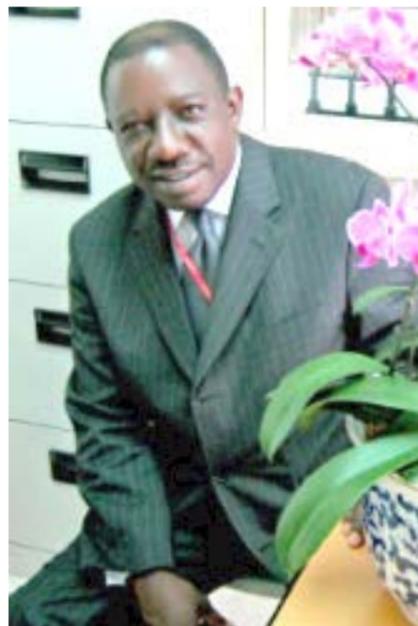
During 2013 and 2014, in a challenging economic climate of Uganda, the UASCRF team had to work harder than ever to raise funds to fight against sickle cell disease in Uganda. The issue of fundraising has become the top priority of UASCR.

During 2014, the UASCRF team came together to think about how UASCRF can fundraise more nationally, strategically and efficiently. This resulted in a national income growth plan which forms part of the new UASCRF Strategic Plan for 2014 – 2017. This new strategic direction for income will enable UASCRF to: broaden our income base by becoming less dependent on our NGO chairperson; build best practice in public fundraising in communities; strengthen our institutional fundraising.

UASCRF's life-changing work is only possible because of the hundreds of supporters that are part of our global movement. Their financial assistance comes in many forms: regular donations; free radio shows; free adverts in print media; DJ mentions; organizing and taking part in events. Our loyal donors especially our board chairperson Dr. Bulaimu Muwanga Kibirige and Mr. Nsubuga Ersotus have continuously responded to our appeals during 2013 - 2014, helping to improve the lives of people living with sickle cell in Uganda. UASCRF is deeply grateful for the continued and generous support of all of our donors. Their commitment and passion is an inspiration.

Looking forward

UASCRF will continue to look for ways to increase our income. As part of the new Strategic Plan, a new internal growth strategy has been developed, outlining our vision and priorities for fundraising. We will reinforce our fundraising by expanding into new communities, and by pursuing new opportunities in institutional funding, and a coordinated best practice approach to humanitarian fundraising and committed giving.



**Mr. Nsubuga Ersotus
of AGT Laboratories**

UASCRF INCOME

Reporting period:

1st January 2013 – 31st December 2014

All figures are in millions of shillings.

Figures represent consolidated income. Inter-chapter (UASCRF- USA to UASCRF-UG) transfers have been eliminated. This information is indicative and does not show the actual audited financial report.

Consolidated monetary value of funding received by source

Reporting period: 1st January 2013 – 31st December 2014

Revenue by source	/= Millions	%
Institutional fundraising		
Bank of Uganda	2.0	1
Nice house of plastics	0.5	0.3
Davis and <u>Shirtliff</u>	0.3	0.2
<u>City Tyres</u>	3.0	2
AGT Laboratories	5.0	3.0
<u>Scandi Trading Limited</u>	0.8	0.5
BMK Group	158.2195	93
Total Revenue	169.8195	100

The Two largest donors and Monetary value of their contribution

Reporting period: 1st January 2013 – 31st December 2014

	/= Millions
BMK Group	158.2195
AGT Laboratories	5.0
Total largest donors	163.2195

Revenue and Expenditure	/= Millions
Total Revenue	169.8195
Total Expenditure	167.5575
Excess of Revenue over expenditure	2.262

Balance sheet	/= Millions
Total Assets	18.3
Total Liabilities	3
Net Assets	15.3

EXPENDITURE

Reporting period: 1st January 2013 – 31st December 2014

All figures are in millions of shillings.

Figures represent consolidated income. Inter-chapter (UASCRF- USA to UASCRF-UG) transfers have been eliminated. This information is indicative and does not show the actual audited financial report.

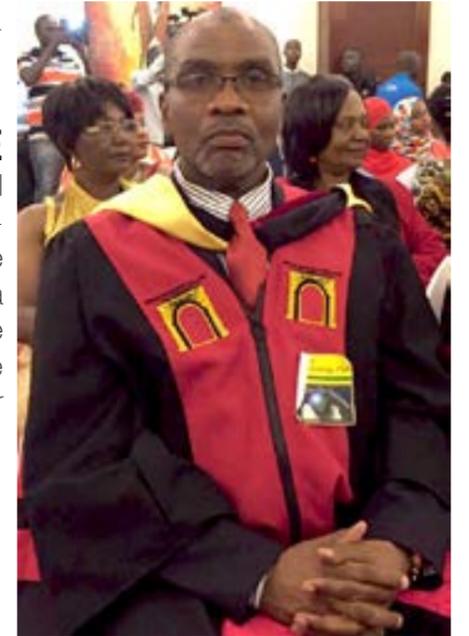
Category	/= Millions	%
Program		
Sickle Cell Conference	120.8975	72.5
Counselor Training	7.5	4.5
Meetings	1.61	0.96
Sickle Cell Dinner	1.21	0.7
Medication	7.5	4.47
Logistics	0.9	0.54
Community Outreach	0.5	0.29
Travel and lodging to H3Africa meeting	2.322	1.4
Non- Program		
Management and Administration	7.618	4.54
Office Rent	17.5	10.4
Total Expenditure	167.5575	100

OUR AWARDS

Our beloved Chairperson of the Board of Directors, Dr. Bulaimu Muwanga Kibirige received two esteemed awards.

1. HONORARY DOCTORATE DEGREE

awarded by the United Graduate College and Seminary International University (USA) for his notable and generous contributions to Ugandan society in areas of promoting employment, tourism, supporting the needy, and sick with the focus on those affected by sickle cell anemia in Uganda as the founder of the NGO called Uganda-American Sickle Cell Rescue Fund (UASCRF) (Uganda) that strives to change the face of sickle cell in Uganda. Serena hotel Kampala, Uganda on November 21st, 2014



2. THE DIASPORA LIFETIME AWARD

recipient for entrepreneurship in the East and Central Africa region. Dr. Bulaimu Muwanga Kibirige who currently has over 700 employees with a business empire stretching over 20 years was awarded the respected diaspora award. He is the Chairman and Managing Director of the BMK Group of companies.

BMK Group of companies, member businesses include:

- Hotel Africana, 2-4 Wampewo Avenue, Kololo Hill, Kampala, Uganda
- BMK Group (U) Limited, Nateete, Kampala, Uganda
- BMK Group (K) Limited, Nairobi, Kenya
- BMK Group (T) Limited, Dar-es-Salaam, Tanzania
- BMK Group (R) Limited, Kigali, Rwanda
- BMK Group (Z) Limited, Lusaka, Zambia
- Hotel Africana, 2-4 Wampewo Avenue, Kampala, Uganda
- BMK Construction Leasing Company, Kigali, Rwanda
- BMK Oil Equipment Company, Kampala, Uganda

Our President and co-founder Major Lukiah Mulumba also received two esteemed awards.

1. Doctor of Nurse Practice (DNP) Degree, Specializing in Family Nurse Practitioner. Lukiah Mulumba received the award at the University of Alabama at Birmingham.



2. Captain Lukiah Mulumba was promoted to the rank of Major in the US Airforce.

SECTION

9

ORGANIZATIONAL PROFILE

UASCRF INTERNATIONAL BOARD

Uganda American Sickle Cell Rescue Fund is registered as a 501 (c) tax –exempt nonprofit organization in United States of America and as a Non-governmental Organization in Uganda. Uganda American Sickle Cell Rescue Fund subscribes to a Constitution.

The Constitution consists of three parts: the Constitution which covers the objects of UASCRF and the governance of the Board; the Code of Conduct which regulates the use of the UASCRF brand and criteria for membership of UASCRF; and the Rules of Procedure which cover procedural aspects of the Board, the affiliation of new members and dispute resolution practice.

The Foundation is governed by the UASCRF International Board which meets quarterly. The Board members are representatives of the Key Donors, Parents, Medical Experts and other relevant stake holders.

The board is headed by the beloved Dr. Bulaimu Muwanga Kibirige. All Board Members are unpaid non-executive volunteers. The Board delegates the power to manage the Secretariat to the UASCRF International Executive Secretary, who is selected by the Board and attends Board meet-

ings in an ex officio capacity. In turn, the Executive Secretary leads the UASCRF Team whose members are all employed by Uganda American Sickle Cell Rescue Fund.



Executive secretary of UASCRF -Uganda

BOARD COMMITTEES

There are currently three subcommittees of the Board: the Executive Committee; the Medical Committee and the Finance and Audit Committee. The Executive Committee ensures that the Secretariat is equipped to deliver its part of the strategic and operational plans and other such duties delegated by the Board and outlined in the Executive Committee's terms of reference. The Medical Committee ensures that the clinical needs and aspects of the people we care for are fulfilled. The Finance and Audit Committee ensures thorough financial oversight of the Secretariat, and makes recommendations to the Board in respect of the accounts, and the budget.

OUR GLOBAL TEAM

The Team supports the agenda of the International Board, by providing strategic input and overseeing the organizational development of UASCRF within parameters agreed by the International Board. The Global Team responsible for the implementation of the Strategic Plan by directly supporting operational plans in areas such as campaigning, advocacy, marketing and programs. Within this remit, the Global Team is required to promote monitoring, evaluation and learning initiatives within UASCRF, and to assist with resolving problems as they arise.



Key members of our Team. Bottom left Dr. Kaggwa Lawrence, centre Chairperson of board Dr. Bulaimu Muwanga Kibirige and Prof, bottom right Ndugwa Christopher, top left Hajj Nakabaale Hassan, Sarah Kibirige, Sarah Bakanansa, top centre our Executive Secretary Tusuubira sharif, top right Peter Kwagala, Samuel Sendiwala, Nsubuga Nsubuga.



Hajji Haroona Kibirige



Mr. Nsubuga Erostat.



Sister Annet Drolence Namirembe
Board Member



Tendo Victoria
Sickle cell counsellor



Asio Bernadette
Project Officer



Nagawa Tracy
Project officer



Dumba Damien
Sickle Cell counsellor



Mariam Ndagire
Board Member

Alaina aleign.
Head Global Volunteers.

I started working with Uganda-America Sickle Cell Rescue Fund about a year ago and have been amazed at the hard work and dedication each one of it's team members has. I am honored to be a volunteer for the organization and look forward to the future- to see all the amazing things that can and will come from this organization.



CONTACT US

Uganda American Sickle Cell Rescue Fund is a world-wide development organization that mobilizes the power of people against sickle cell disease. We are a confederation of 2 organizations working together in Uganda and the United states of America.

The UASCRF International Secretariat provides co-ordination and support to the Confederation. For further information about this Report contact the Secretariat at uascrf@uganda-americansickle.org or visit www.uganda-americansickle.org . To find out more about our affiliates, please visit their websites listed, or contact them using the details shown.

Uganda American Sickle Cell Rescue fund is committed to being transparent about its activities and we welcome requests for information and feedback on our work. There may be circumstances where we are unable to disclose information, for example, for reasons of security, confidentiality or because of the sensitive nature of our internal documents. In the event that we are unable to disclose information, we will provide reasons for non-disclosure.

UASCRF United States

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