

## Regional News

Health workers are among those bearing the heaviest burden.

BY MUDANGHA KOLYANGHA

**B**y the time dawn breaks across Bukedi Sub-region, the queues at health facilities are already long. Mothers cradle feverish children on their laps, elderly patients lean against walls for support, and nurses move briskly through crowded corridors, their faces marked by fatigue. For many, the wait for treatment begins before sunrise—and often stretches for hours.

What was once an occasional surge in patient numbers has now become a daily reality: a health system stretched far beyond its limits.

Bukedi, comprising Tororo, Busia, Pallisa, Budaka, Kibuku and Butaleja districts, is facing a deepening crisis as patient numbers overwhelm already limited health infrastructure.

### One bed for two

At Pallisa General Hospital, the strain is evident. Built in 1969 with a bed capacity of 100, the hospital now serves more than 450,000 people from within Pallisa and neighbouring districts such as Kibuku, Kaliro and Namutumba.

Beds meant for one patient are often shared by two or more, while others sleep on the floor due to lack of space.

Dr Godfrey Mulekwa, the district health officer, says the situation reflects a long-standing mismatch between population growth and health system expansion.

"At the time the hospital was built,

# Long queues, crowded wards expose health gaps in Bukedi



Patients wait to be attended to in the outpatients department at Kibuku Health Centre IV. PHOTO/FILE

the population was small and the disease burden minimal," he explains. "Today, both have increased significantly, alongside the emergence of new condi-

tions such as cancer, hypertension and diabetes."

Despite recent recruitment of additional doctors, staffing levels remain in-

sufficient.

"The number of outpatients is overwhelming. Even with more staff, the backlog is still too big," Dr Mulekwa adds.

Across the sub-region, similar scenes are playing out. Health centres designed to serve a few dozen patients a day are now receiving hundreds. Corridors, verandas and open spaces have been turned into makeshift waiting and treatment areas.

### Crowded hallways

At Kibuku Health Centre IV, patients and their relatives crowd the hallways. Some fan their loved ones in the heat as they wait for care that feels both urgent and delayed.

Inside, the constant hum of voices, footsteps and medical equipment rarely fades, even late into the night.

Health workers are among those bearing the heaviest burden. Nurses and doctors often work long hours with little rest, attending to patient after patient with limited resources.

"I want to help everyone," one nurse says quietly between rounds.

"But sometimes there are just too many patients and not enough hands," the nurse adds.

Beyond physical exhaustion, many health workers speak of emotional strain—burnout, frustration and the distress of knowing what patients need but lacking the means to provide it.

Patients, too, feel the impact. Long waiting times have become the norm, with some spending hours before receiving attention. For critically ill patients, such delays can have serious consequences.

### Corridors as waiting areas

At Mbale Regional Referral Hospital, which serves as the main referral facility for the region, the situation is even more severe.

In the children's ward, it is common to find two or three children sharing a single bed. Across other wards, patients fill every available space, with many wait-

### MAJOR CAUSES

- Rapid population growth
- High fertility rates
- Rising burden of non-communicable diseases (cancer, diabetes, hypertension).
- Persistent infectious and preventable diseases.
- Limited expansion of infrastructure.
- Staff shortages despite recruitment
- Poor sanitation and hygiene practices.

ing in corridors for treatment.

Health officials say a significant portion of the patient load is driven by preventable diseases.

In Budaka District, Dr Elisa Mulwani estimates that up to 75 percent of cases reported across health facilities could be prevented.

"Most of our facilities are overwhelmed by preventable diseases, which means medical supplies are consumed very quickly," he says.

Budaka, with a population of more than 287,000 people, is served by 14 Health Centre IIIs and one Health Centre IV, putting immense pressure on available services.

Poor sanitation, inadequate hygiene practices and limited health awareness continue to contribute to the high number of infections.

At the same time, the region's high fertility rate, estimated at 7.3 children per woman compared to the national average of about five, is further increasing demand for health services.

Retired health worker Sam Wajega describes the situation as a system under relentless pressure.

### Capacity challenges

"Facilities built to serve modest populations are now grappling with surging patient numbers," he says. "Demand far outpaces capacity, and space has become the most scarce resource," he adds.

Overcrowding, once a periodic challenge, has quietly evolved into a full-scale crisis.

Experts warn that without urgent intervention, the health system risks being pushed to a breaking point. Expanding infrastructure—more wards, more beds and better-equipped facilities—is critical.

There is also a need to strengthen preventive healthcare through improved sanitation, public health education and community outreach to reduce the burden of avoidable diseases.

Despite the challenges, health workers continue to show resilience and dedication, often improvising solutions and supporting one another under difficult conditions.

As night falls, the corridors do not empty. Patients continue to arrive, and the waiting never truly ends.

WITH STELLA NANTE

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