Orientation of Cultural Leaders on Self-Care

A National Orientation of Kings, Queens and Cultural Institutions on Self-Care for Universal Health Coverage

Prepared By:

Tekere Girl Child Empowerment (TEGEM)

1st October 2024 • Golden Tulip Hotel, Kampala

Orientation of Cultural Leaders in Uganda on Self-Care

A report of the national orientation meeting held on 1st October 2024 at Golden Tulip Hotel, Kampala, convened by Tekere Girl Child Empowerment (TEGEM) in partnership with the Tieng Adhola Cultural Institution (TACI), the Council of Traditional Leaders in Africa (COTLA), the Ministry of Health, and Makerere University School of Public Health (MakSPH).

Prepared and Published by:

Tekere Girl Child Empowerment (TEGEM)

Copies may be obtained from:

Tekere Girl Child Empowerment (TEGEM)
P.O. Box 1037, Tororo District, Uganda.
Tel: +256 793 662 250
Email: info@tekeregirlchildempowerment.org
www.tekeregirlchildempowerment.org

Photo Credit:

TEGEM Staff

CONTENTS

LIST OF FIGURES

LIST OF TABLES

ACRONYMS

ANC Antenatal Care

CaCx Cervical Cancer

COTLA Council of Traditional Leaders in Africa

FP Family Planning

GBV Gender-Based Violence

GLSD Gender, Labour and Social Development

HIV/STI Human Immunodeficiency Virus / Sexually Transmitted Infection

MakSPH Makerere University School of Public Health

MoH Ministry of Health

NCDs Non-Communicable Diseases

RMNCAH Reproductive, Maternal, Newborn, Child & Adolescent Health

SCEG Self-Care Expert Group

TACI Tieng Adhola Cultural Institution

TBA Traditional Birth Attendant

TEGEM Tekere Girl Child Empowerment

UHC Universal Health Coverage

WHO World Health Organization

WHY IT MATTERS

A shared vocabulary between government technicians, health specialists and cultural leaders was itself one of the orientation's quiet achievements — the same terms used at the podium in Kampala are now understood in kingdom councils across Uganda.

ABOUT

TEKERE GIRL CHILD EMPOWERMENT (TEGEM)

Tekere Girl Child Empowerment (TEGEM) is a not-for-profit organization that evolved from a community-based organization founded in 2004, after realizing the sexual and reproductive health needs of the people of Tororo. TEGEM is a group of women and young men passionate about girls' Sexual Reproductive Health and the health of other women and men, working to empower communities through information — guided by the philosophy *"We are what we are because the people are."*

The organization's headquarters are situated in Papoli Parish, Magola Sub-County, Tororo District, and while the project currently operates in Tororo, TEGEM's vision is to extend its reach to cover the whole country.

TEGEM has built a strategic partnership with the Tieng Adhola Cultural Institution (TACI) to champion self-care among girls, women, other vulnerable populations, boys and men within the TACI catchment area in Eastern Uganda — and, through this orientation, with cultural institutions nationally.

Our Goal

To promote good health through social mobilization and nurturing cultural values among girls and young women.

OUR VISION

Envision a healthy community of empowered girls and young women for sustainable development.

OUR MISSION

To empower girls and young women through holistic approaches for improved health.

OUR REWARD

Comes from young girls realizing their dreams.

Target Goal: Transforming a Girl Child into a Girlpreneur.

TEGEM × CULTURAL INSTITUTIONS

From a community-based organisation in Tororo to the convener of 11 Kings and 66 cultural ministers in Kampala — TEGEM's partnership with traditional leadership is now a national model for self-care advocacy.

EVENT IN NUMBERS

Orientation of Cultural Leaders in Uganda on Self-Care — Golden Tulip Hotel, Kampala

DATE OF ORIENTATION

1st October 2024

Golden Tulip Hotel, Kampala

KINGS IN ATTENDANCE

11

from cultural institutions across Uganda

CULTURAL MINISTERS

66

representing different kingdoms

KINGDOMS & INSTITUTIONS

8+

publicly pledged commitments

STRATEGIC OBJECTIVES

4

guiding the orientation meeting

SELF-CARE PILLARS

5

health literacy to technology

PRIORITY HEALTH AREAS

7

from FP & ANC to adolescent health

COMMITMENT PILLARS

4

MoH action pointers for leaders

CONVENING PARTNERS

TEGEM • TACI • COTLA • MoH

& Makerere University School of Public Health

> **We need to be healthy first by ourselves to be able to lead others well. — Kwari Adhola, Chairperson, COTLA**

ACKNOWLEDGEMENT

The successful convening of the national orientation of Cultural Leaders in Uganda on Self-Care, held on 1st October 2024 at the Golden Tulip Hotel, Kampala, was made possible through the collaboration, commitment, and generosity of many individuals and institutions.

We extend our sincere appreciation to the Ministry of Health, and in particular to Dr. Okware Joseph, Director Governance, Dr. Olaro Charles, Dr. Roselline Achola and Dr. Richard Mugahi, Commissioner MCH, for their technical leadership, guidance, and steadfast commitment to institutionalizing self-care in Uganda.

Special recognition goes to the Hon. Minister of Gender, Labour and Social Development, Peace Mutuuzo, for gracing the occasion and officially presiding over the meeting, and to Her Royal Highness Tieng Adhola, Chairperson of the Council of Traditional Leaders in Africa (COTLA), for his continued patronage of TEGEM and his leadership in convening fellow cultural leaders.

We are deeply grateful to the eleven Kings and the sixty-six cultural ministers who honoured the invitation and travelled from across Uganda's kingdoms and chiefdoms to participate — and who, through their public pledges, gave this orientation its lasting significance.

Finally, we appreciate the continued support of Makerere University School of Public Health (MakSPH) and the World Health Organization (WHO) for entrusting TEGEM with the responsibility of convening and documenting this landmark engagement.

> **"We are what we are because the people are.**

HRH Tieng Adhola and fellow panelists at the high table.

Dr. Olaro Charles, Director Curative Services (MoH), addresses delegates from the podium, flanked by MoH and TEGEM banners.

EXECUTIVE SUMMARY

On 1st October 2024, Tekere Girl Child Empowerment (TEGEM), in partnership with the Tieng Adhola Cultural Institution (TACI), the Council of Traditional Leaders in Africa (COTLA), the Ministry of Health, and Makerere University School of Public Health, convened a national orientation of Cultural Leaders in Uganda on Self-Care at the Golden Tulip Hotel, Kampala.

The orientation brought together 11 Kings and 66 cultural ministers from kingdoms and chiefdoms across Uganda — an unprecedented gathering that underscored the willingness of cultural institutions to champion self-care as a pathway to Universal Health Coverage (UHC). The meeting was officially presided over by the Hon. Minister of Gender, Labour and Social Development, Peace Mutuuzo, and addressed by senior Ministry of Health technical leadership, including Dr. Okware Joseph, Dr. Roselline Achola and Dr. Richard Mugahi.

Proceedings combined technical presentations on Uganda's self-care journey and its five pillars, a review of RMNCAH performance and the socio-cultural barriers still affecting maternal, newborn and adolescent health outcomes, and open dialogue in which cultural leaders shared existing practices and made public commitments. Eight kingdoms and cultural institutions — including Tieng Adhola, Emorimori of Teso, the Acholi and Kumam kingdoms, Inzu ya Bamasaba, Bugweri, Bunyala and Bundingya bwa Bwamba — pledged specific, community-level actions ranging from decentralizing cervical cancer screening to reviving traditional fireplace dialogues for adolescent education.

The meeting closed with cultural leaders publicly signing a commitment board pledging to champion self-care within their institutions, and with the Ministry of Health outlining four action pointers for cultural leaders covering the elimination of teenage pregnancy, universal antenatal and skilled delivery care, newborn and child health, and the redress of harmful gender norms.

This report documents the proceedings, commitments, and immediate next steps arising from the orientation, and serves as an accountability record for TEGEM, the Ministry of Health, and the cultural institutions that pledged their leadership to Uganda's self-care agenda.

11+66	8+	4
KINGS & MINISTERS CONVENED	KINGDOMS PUBLICLY COMMITTED	MOH ACTION POINTERS ISSUED

BOTTOM LINE

This was not a one-off event — it was the start of an accountability relationship between TEGEM, the Ministry of Health, and Uganda's cultural institutions.

Hon. Peace Mutuuzo (Minister of GLSD) together with Kings and cultural institutional delegates during their orientation on self-care.

INTRODUCTION

Tekere Girl Child Empowerment (TEGEM) is a non-profit organization committed to improving the sexual and reproductive health of girls, women, and men. Originating as a community-based organization in 2004 in Tororo, TEGEM has expanded its operations across Uganda, advocating for informed decision-making and self-care practices.

TEGEM has emerged as a formidable force in engaging cultural institutions in the promotion of self-care, recognizing their critical role in influencing community behaviour and attitudes. Through years of dedicated work, TEGEM has established itself as a trusted partner of traditional leaders, creating a strong network that facilitates meaningful dialogue on reproductive health, gender equality, and self-care.

The magnitude of this event underscores the significance of TEGEM's work. The orientation brought together **11 Kings** from various cultural institutions across Uganda, along with **66 cultural ministers** representing different kingdoms. Recognizing the influence of cultural institutions in shaping societal norms, TEGEM has strategically partnered with the Tieng Adhola Cultural Institution (TACI), currently the Chair of the Council of Traditional Leaders in Africa (COTLA), to champion self-care initiatives.

2004	11	66	1st
TEGEM FOUNDED IN TORORO	KINGS REPRESENTED	CULTURAL MINISTERS	NATIONAL ORIENTATION OF ITS KIND

RATIONALE & OBJECTIVES

Rationale for the Orientation

The Ministry of Health is dedicated to improving the health and well-being of Ugandans by promoting a self-care strategy targeting individuals, families, and communities. Recognizing the pivotal role of cultural institutions in influencing social norms, the Ministry identified them as essential partners in this initiative.

TEGEM, headquartered in Tororo, has built a strong partnership with the Tieng Adhola Cultural Institution (TACI), making it a key player in leveraging cultural leadership for health advocacy. With the Tieng Adhola as its patron, TEGEM has actively engaged in reducing teenage pregnancies and improving sexual and reproductive health across Uganda. The election of the Tieng Adhola as Chairperson of COTLA further positions TACI to mobilize other cultural institutions to champion self-care.

Objectives of the Meeting

1. **Introduce** cultural leaders to the self-care concept and its role in improving health outcomes.
2. **Share progress and gains** made in self-care adoption to build momentum within cultural institutions.
3. **Facilitate knowledge exchange** and best practices to enhance self-care initiatives.
4. **Equip cultural institutions** with key messages on self-care and clarify their roles in promoting these practices.

Kings append their signatures to the self-care commitment board — turning objectives into public pledges.

OPENING REMARKS

Dr. Okware Joseph

DIRECTOR GOVERNANCE, MINISTRY OF HEALTH

> *"Health is made at home and repaired in the hospital. Cultural leaders are at the heart of shaping behaviours, and their involvement in this initiative is crucial for success."*

Dr. Okware opened the meeting by welcoming all attendees and emphasizing the importance of self-care in preventive healthcare. He stressed the need for cultural leaders to take ownership of health advocacy, noting that "we cannot rely solely on medical facilities to ensure community well-being. The first step to good health starts at home, with individuals taking responsibility for their choices and behaviours."

> **"You are the custodians of our traditions. When you speak, your people listen. It is therefore essential that you drive this conversation and encourage self-care practices in your respective communities.**

By integrating self-care into cultural norms, Dr. Okware noted, Uganda can foster a healthier nation — one household at a time.

Home First
HEALTH BEGINS BEFORE THE HOSPITAL

Custodians
LEADERS AS TRUSTED MESSENGERS

Ownership
ADVOCACY ROOTED IN CULTURE

SPEECH BY THE HON. MINISTER OF GENDER, LABOUR & SOCIAL DEVELOPMENT

Hon. Peace Mutuuzo

MINISTER OF GENDER, LABOUR AND SOCIAL DEVELOPMENT

> ***"Your voices are powerful. If we are to achieve Universal Health Coverage, cultural leaders must take the lead in promoting self-care."***

The Minister expressed gratitude to the Ministry of Health for prioritizing cultural leaders in self-care advocacy, acknowledging their role as custodians of customs and traditions with the ability to influence societal health behaviours.

She highlighted how self-care empowers individuals to take responsibility for their health, thereby easing the burden on healthcare facilities: *"When communities are informed, they make better decisions about their health — whether through family planning, maternal care, or disease prevention."*

The Minister also addressed harmful cultural practices that hinder health progress: *"We must acknowledge that some traditions have done more harm than good. Practices like early marriage, gender-based violence, and reluctance towards modern medicine need to be challenged."* On technology in healthcare, she pointed to self-testing for HIV, diabetes monitoring, and self-injectable contraceptives as tools already transforming access to care.

> **"Cultural leaders must lead by example. Organize community dialogues, advocate for better healthcare, and ensure that self-care becomes a pillar of our societies.**

UHC
UNIVERSAL HEALTH COVERAGE AS THE GOAL

Harmful Practices
EARLY MARRIAGE & GBV CHALLENGED

Self-Testing
HIV, DIABETES & CONTRACEPTION TOOLS

INSTITUTIONALIZING SELF-CARE IN UGANDA

Dr. Roselline Achola

SELF-CARE SPECIALIST, MINISTRY OF HEALTH

Dr. Roselline defined self-care as the ability of individuals, families, and communities to take responsibility for their own health — promoting wellness, preventing disease, and managing illness, with or without the assistance of healthcare providers. It spans personal hygiene, nutrition, lifestyle choices, environmental factors, socioeconomic considerations, and adherence to prescribed treatment.

The Five Pillars of Self-Care

- Health Literacy
- Healthcare Professionals
- Healthcare Systems
- Products & Medication
- Technology

Uganda's Self-Care Vision

1. Accelerate progress towards Universal Health Coverage.
2. Strengthen PHC management, multi-sectoral collaboration, and build synergies.
3. Integrate self-care into the existing health system — now including cultural institutions.

IN DR. ROSELLINE'S WORDS

Self-care is not a substitute for the health system — it is what individuals, families and communities do between visits to it, with cultural leaders now formally part of that system.

THE SELF-CARE JOURNEY IN UGANDA

Figure 1: The Self-Care Journey in Uganda (2019–Present) — from global launch to sub-national roll-out.

2019
Launch of the WHO consolidated guidelines for self-care interventions for health: SRHR

Mar 2020
Inaugural stakeholder engagement to create buy-in for the self-care concept

Jul 2020
Formulation of the Self-Care Expert Group (SCEG) — a multi-sectoral technical group under MoH

Housed in the Directorate of Clinical Services

Jul 2020
Selection of primary focus for self-care (SRHR vs. all health areas)

Aug 2020
Onboarding of the national self-care consultant to coordinate the guideline development process

Sept 2020 – Jan 2021
Drafting the National Guideline on Self-Care Interventions for SRHR

Uganda's 3-phased approach

Feb 2022 – to date
Testing & implementing the guideline at sub-national level

Generating learnings to update & finalize the guideline

Continuous
Development & adaptation of global frameworks for self-care

MEAL, SBC, QoC, Advocacy

Seven Priority Areas Under Self-Care

Family Planning • Antenatal Care • HIV/STIs • Post-Abortion Care — plus three newly added priorities: Non-Communicable Diseases (hypertension, diabetes, mental health, nutrition), Adolescent Health, and the Health of Older Persons & Persons with Disability.

SELF-CARE ACHIEVEMENTS TO DATE

Figure 2: Progress made so far in institutionalizing self-care in Uganda.

Call to Action for Cultural Institutions

- Embrace self-care as custodians of culture, for the health and well-being of your people.
- Integrate self-care into the affairs of the kingdom to promote good health among the people.
- Use different channels and mechanisms to sensitize communities in support of self-care practice.
- Tap into clan leaders' networks and social gatherings to reach communities with self-care messages.

RMNCAH PERFORMANCE & COMMITMENTS BY CULTURAL LEADERS

Dr. Richard Mugahi

COMMISSIONER, MATERNAL & CHILD HEALTH, MINISTRY OF HEALTH

> *"Your Highnesses, you are not just leaders; you are the pillars of tradition, the voices that guide your people. If self-care is to become a norm in Uganda, it must start with you."*

Dr. Mugahi highlighted alarming adolescent health statistics: half of adolescent girls in Uganda have their first sexual encounter at 16.6 years and are married by 18.8 years — exposing young girls to school drop-out, domestic violence, and pregnancy-related health complications.

On family planning, he noted persistent disparities: *"In some regions, women are still having an average of 6–7 children. Access to family planning services remains low, especially in Acholi, Bukedi, Bunyoro, and Karamoja."* On maternal health, institutional deliveries remain below the national target in Busoga, Bunyoro, Bukedi, Karamoja, Teso, and Lango — a gap he attributed to cultural barriers preventing women from seeking skilled birth attendance.

Practices Dr. Mugahi Called on Leaders to Denounce

Child marriage • Female genital mutilation • Reliance on unskilled traditional birth attendants — to be replaced with practices that safeguard life and promote dignity.

16.6	6–7	6
MEDIAN AGE AT FIRST SEX (GIRLS)	AVG. CHILDREN PER WOMAN, HIGH-FERTILITY REGIONS	REGIONS BELOW ANC/DELIVERY TARGETS

DATA SNAPSHOT

The statistics Dr. Mugahi shared with cultural leaders illustrate why their influence matters — and where it is needed most.

Figure 3: Median Age at First Sex & First Marriage (Women 25–49 vs. Men 25–49)

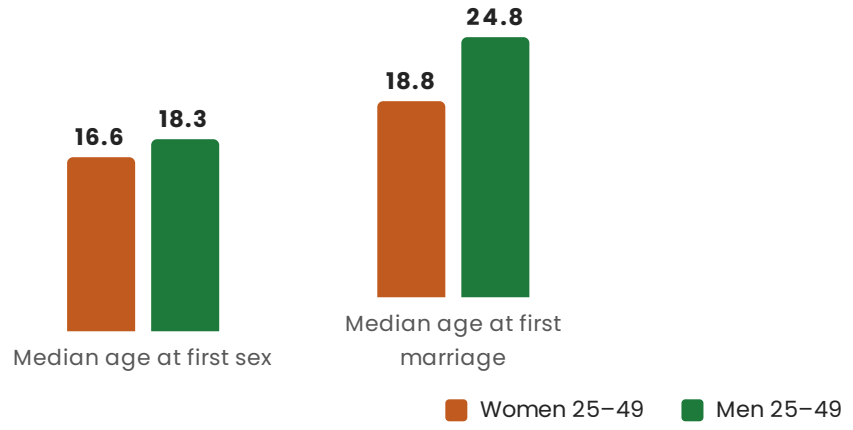
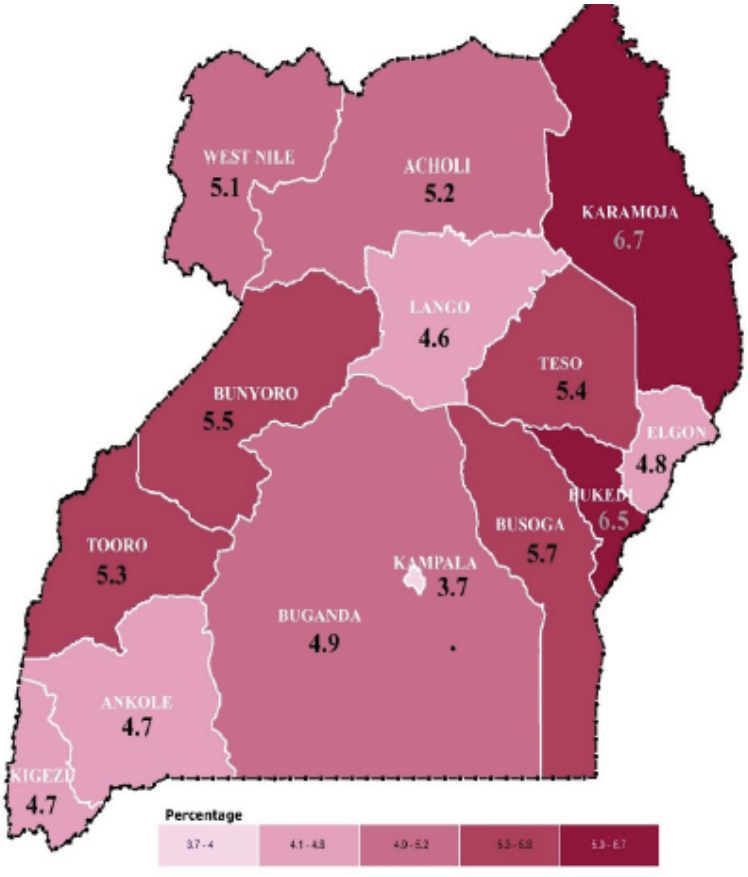


Figure 4: Total Fertility Rate by Region — Uganda Demographic & Health Survey



REMARKS BY THE CHAIRPERSON, COTLA

Kwari Adhola

KING OF TIENG ADHOLA CULTURAL INSTITUTION (TACI) & CHAIRPERSON, COTLA

> *"We need to be healthy first by ourselves to be able to lead others well."*

Kwari Adhola highlighted the need for cultural leaders to prioritize their own health as an example to their communities. COTLA, he noted, stands for the significant role cultural institutions play in upholding the rights of individuals, advocating for preventive medicine and self-care as essential components of a healthy society.

Commitments from Cultural Leaders & COTLA

- ✓ **End teenage pregnancy**
  Advocate for keeping girls in school and engage parents in open discussions about sexuality.
- ✓ **Promote ANC & skilled delivery**
  Denounce traditional birth attendants (TBAs) and mobilize community awareness.
- ✓ **Address harmful newborn practices**
  Including the extraction of false teeth and the use of cow dung on umbilical cords.
- ✓ **Foster gender equality**
  Through community dialogues on gender-based violence and the financial empowerment of women.

COTLA & SELF-CARE

"COTLA remains committed to advocating for self-care and preventive medicine to ensure a healthier and brighter future for all." — Kwari Adhola

MEETING OUTCOMES: VOICES OF THE KINGS

Eight kingdoms and cultural institutions rose to pledge specific, community-level commitments to the self-care agenda:

Moses Owori • Kwari Adhola (Tieng Adhola)

"We shall go back and draw plans on how to disseminate these messages to our own people."

Emorimori of Teso

Advocated for the decentralization of cervical cancer (CaCx) screening centres in Teso, calling for help to fight cancer in the sub-region.

Acholi Kingdom

"Fight poverty." • "Coil self-care messages into government programs."

Kumam Kingdom

"As cultural leaders, let's revive fireplaces to educate our children on these vices."

Inzu ya Bamasaba

Pledged to demonstrate self-care, engage communities, share traditional self-care practices, and proposed collaboration with MoH on self-care and climate change.

Bugweri • Mubaraka Robert

Advocated for mosquito nets and radio talk-shows on self-care, plus screening centres for CaCx, with government assistance.

Bundingya bwa Bwamba • Lt. Col. Kamya

"We advocate for screening centres plus equipment. We shall preach this message to our people."

CD Kimeze (Rtd) • Sabanyala of Bunyala, Kayunga

Called for cultural institutions to be empowered to meet their obligations, and for leaders to work with government to uplift communities economically.

EIGHT KINGDOMS, ONE MESSAGE

From decentralized cancer screening in Teso to revived fireplace dialogues in Kumam, each pledge translates the same national self-care agenda into a locally owned commitment.

8+	11	1
KINGDOMS PLEDGED	KINGS PRESENT	SHARED AGENDA

ACTION POINTS & LESSONS LEARNED

Action Points

- Cultural leaders committed to integrating self-care messages into their traditional governance structures and community engagements.
- Specific requests were made for decentralized screening centres for cervical cancer (CaCx) and other essential health services.
- The Ministry of Health committed to supporting cultural leaders with health education materials in local languages.
- TEGEM will follow up with cultural leaders to ensure the commitments made translate into tangible community interventions.

Lessons Learned

✓ **Cultural leaders are eager, but under-resourced**

They are willing to champion self-care but require additional resources and support to act on their commitments.

✓ **Follow-up must be structured**

Continuous engagement and structured follow-up are needed to ensure commitments translate into action.

✓ **Culture change needs a collaborative approach**

Addressing deeply ingrained cultural practices requires joint effort between government, NGOs, and cultural institutions.

Cultural leaders and technical delegates follow proceedings in plenary.

The fully signed self-care commitment board.

WAY FORWARD

Above and beyond individual pledges, four stakeholder groups carry forward specific next steps from this orientation:

1. **TEGEM** will leverage this meeting's outcomes to mobilize additional funding and strengthen partnerships with cultural institutions.
2. **Cultural leaders** will integrate self-care messages into community engagements and advocate for improved access to healthcare services.
3. **The Ministry of Health** will collaborate with cultural leaders to monitor progress and provide necessary technical support.
4. **All partners** will convene follow-up meetings to review progress, address challenges, and reinforce commitments.

> **"Let us leave this room today with a renewed determination to make self-care a cultural priority.**

The Ministry of Health also outlined four specific action pointers for cultural leaders to adhere to in promoting and institutionalizing self-care — detailed on the following page.

A dignitary appends her signature to the self-care commitment board, sealing the day's commitments to action.

MOH ACTION POINTERS FOR CULTURAL LEADERS

1 Eliminate Teenage Pregnancies

- No girl should be married off before age 18.
- Organize at least 2 community dialogues per year on keeping girls in school.
- Empower parents to talk openly with children about sex and sexuality.
- Denounce practices that limit parent-child engagement on these issues.
- Convene at least 1 girls' learning group per sub-county/parish yearly.

2 ANC & Skilled Delivery for All

- Mobilize mothers and spouses to attend ANC early and deliver in health facilities.
- Denounce practices that raise maternal and child mortality risk.
- Sensitize families on the dangers of risky pregnancies.
- Denounce delivery by traditional birth attendants (TBAs).
- Promote proper maternal nutrition and rest.

3 Newborn & Child Health Awareness

- Denounce extraction of false/milk teeth and use of cow dung on the umbilical cord.
- Promote immunization, breastfeeding, hygiene, and growth monitoring.
- Promote proper nutrition of children.

4 Address Harmful Gender Norms

- Convene dialogues with men and women on the dangers of GBV.
- Include women and adolescents within cultural structures.
- Educate subjects on the dangers of alcoholism and drug use.
- Ensure every wife receives her own matrimonial home in polygamous unions.

FOUR PILLARS, ONE MISSION

Together, these action pointers translate the Ministry of Health's RMNCAH priorities into commitments cultural leaders can carry directly into their own kingdoms, clans, and households.

CLOSING REMARKS

Kwari Adhola, Chairperson of the Council of Traditional Leaders in Africa (COTLA), expressed gratitude to the Ministry of Health and the World Health Organization for their support, and thanked the Queen Mother of Tooro for setting a commendable pace for COTLA.

He highlighted the willingness of cultural leaders to carry these messages to their communities, while pointing out the lack of resources to implement some of the discussed issues — stressing the need to address these bottlenecks and appealing for support to cultural institutions.

He extended his appreciation to TEGEM for hosting the meeting and for its continued collaboration with cultural institutions, closing with thanks to the MOH, WHO, and TEGEM for their dedication to improving community health.

8+	4	1
KINGDOMS PUBLICLY PLEDGED	MOH ACTION POINTERS ISSUED	COMMITMENT BOARD SIGNED

APPENDIX 1

MEETING AGENDA

Table 1: Orientation Meeting for Cultural Leaders on Self-Care — Golden Tulip Hotel, Kampala, Tuesday 1st October 2024.

Time	Session	Responsible
8:00 – 8:30am	Arrival and registration	MoH Self-Care Team
8:30 – 9:00am	Opening prayer, introductions & welcome message	Ruth Muguta
	Objectives of the meeting	Dr. Olive Sentumbwe
	Welcome remarks & keynote address on self-care	Dr. Olaro Charles (MoH)
9:00 – 9:20am	Presentation: overview of self-care & gains so far in Uganda	Roselline Achola – MoH
9:20 – 10:30am	Remarks from Chairperson, COTLA	HRH Tieng Adhola
	Official opening by Minister	Hon. Dr. Peace Mutuuzo
	Photography & signing the commitment board by cultural institutions	Dr. Sendyona Martin, Rt. Hon. Obbo Josel
10:30 – 11:00am	**Break Tea**	
11:00 – 11:10am	Brief on NCDs	Dr. Oyoo Charles
11:10am – 12:00pm	Discussions & sharing experiences of kingdom practices on self-care	All cultural institutions
12:00 – 1:00pm	MCH performance review & RMNCAH commitments	Vianney – MoH
1:00 – 1:30pm	Wrap-up: action matrix for cultural leaders / recommendations & closure	Dr. Florence Odoch
1:30pm	**Lunch and departure**	

Session Chairs

Morning session — Dr. Okware Joseph, Director Governance (MoH). Afternoon session — Dr. Richard Mugahi, Commissioner MCH (MoH).

APPENDIX 2

PICTORIAL

Dr. Olaro Charles, Director Curative Services (MoH), addresses delegates from the podium, Golden Tulip Hotel.

HRH Tieng Adhola and fellow panelists during the high table proceedings.

Cultural leaders, ministers and technical delegates follow proceedings in plenary.

Kings and delegates gather to sign the Ministry of Health / TEGEM commitment board.

The fully signed commitment board: "Promoting self-care practices in Uganda — the role of cultural institutions," 1st October 2024.

Tekere Girl Child Empowerment (TEGEM)

P.O. Box 1037, Tororo District, Uganda

Tel: +256 793 662 250

Email: info@tekeregirlchildempowerment.org

www.tekeregirlchildempowerment.org