



Annual Impact Report 2025



A MESSAGE FROM OUR EXECUTIVE DIRECTOR

Dear Partners, Stakeholders, and Friends,

2025 has been a defining year for Nama Wellness Community Centre (NAWEC) a year marked by deepened community impact, groundbreaking research, historic advocacy wins, and elevated global presence.

Our 1,466 Community Health Workers conducted 779,120 household visits, serving over 286,000 sick people through integrated health services. We treated 47,171 children for common childhood illnesses and supported 365 severely vulnerable neonates to thrive through our community-based Kangaroo Mother Care program. Behind these numbers are mothers who delivered safely, children who grew stronger, and communities gaining access to quality health care.

Beyond service delivery, we completed our groundbreaking research partnership with Makerere University School of Public Health, documenting our Professionalized Community Health Worker model—work that will inform policy across Uganda and beyond when published in 2026.

We also joined the CHW Research Capacity-Building Project, positioning our CHWs as generators of knowledge, not just implementers.

On advocacy, we made history. With CHIC support, we established and now lead the Community Health Partners Coalition, Uganda, uniting 15 organizations. We convened a landmark parliamentary dialogue placing CHW voices before MPs and Ministry of Health officials, and supported the formation of the United CHW Initiative Uganda, now a full CHIC member, connecting Uganda's CHW movement to global platforms.

I represented NAWEC at the UN General Assembly, Skoll World Forum, Global Digital Health Forum, and Africa CDC workshops, carrying one message: African-led organizations deliver measurable impact with strong accountability, yet remain underfunded. It's time for trust-based, long-term partnerships that place power in local hands.

I celebrate our extraordinary team—CHWs like Roset Sama and Shania Ssekitooleko, clinical staff including Bridget Niwenyesiga and Lilian Lakot, and our entire NAWEC

family whose compassion and excellence make transformation possible.

As we close this chapter, I'm excited to announce that 2026 marks our evolution: Nama Wellness Community Centre will rebrand as Nama Health Impact, better reflecting who we've become. With our new logo and website launching in Q1 2026, this rebrand signals our readiness to influence policy, scale impact, and deepen investment in professionalized community health systems.

To our partners—thank you for believing in our vision. Together, we're building a health system where every person has access to quality care delivered with dignity and compassion.

With gratitude and hope,

Pauline Picho Keronyai

Executive
Director
Nama Wellness
Community Centre
(NAWEC)



ABOUT US

Nama Wellness Community Centre (NAWEC) is a registered local NGO operating in Mukono district in Uganda. Established in 2014 to provide health care services to the people of Mukono and the surrounding areas. We empower communities to take lead in addressing their healthcare needs through Community Health Workers (CHWs) who are at the core of our community health interventions. Additionally, we support 11 government health facilities across the Mukono district, further making access to quality healthcare a reality in our catchment area. Moreover, we take specialized health services to hard-to-reach areas through clinical outreaches ensuring that no one is left behind.

Our centre of excellence in Lukojjo village, Nama Sub County, Mukono, which is a level three health centre- serves both as a provider of a wide range of services including maternity, family planning, child immunization, cervical cancer screening and treatment, and laboratory services. The centre also works as a training and replenishment facility for CHWs.

OUR MISSION

To transform community health systems through professionalized Community Health Workers (CHWs) who are integrated into the national healthcare system to achieve Universal Health Coverage.

OUR VISION

Equitable and quality healthcare services for all.

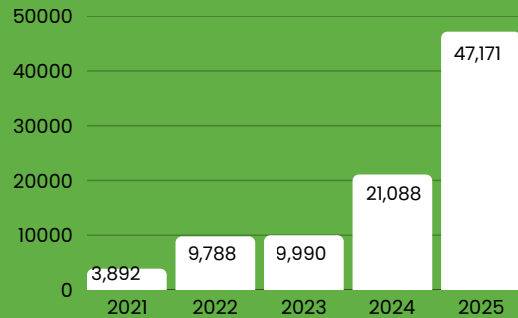
OUR FOCUS

- Health Service Delivery
- Research
- Advocacy and Policy

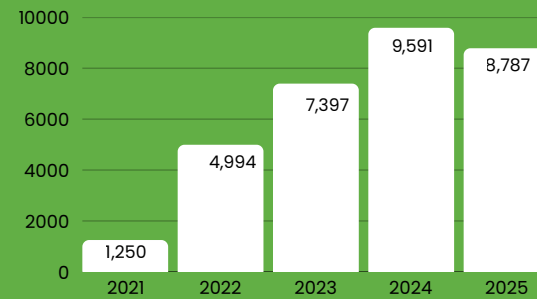


OUR IMPACT OVER THE YEARS

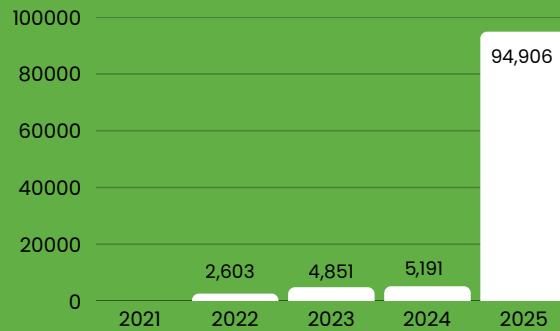
Children seen by CHWs



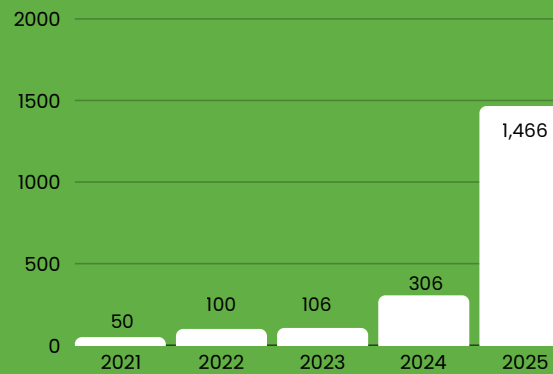
Family planning services uptake



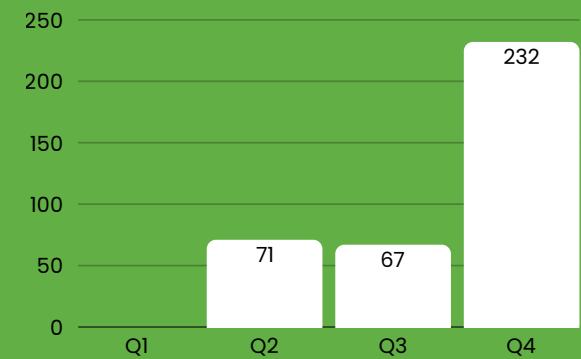
Family planning services through CHWs



CHWs supported over the years



Severely Vulnerable Neonates enrolled on Kangaroo Mother Care in 2025





➤ HEALTH SERVICE DELIVERY

Community Health Services are the backbone of NAWEC's strategy to achieve Universal Health Coverage in Mukono and Buikwe districts. In 2025, our model focuses on a professionalized, digitally enabled Community Health Workforce fully integrated into the government health system. Through community-based service delivery, outreaches, support to public facilities, and the Nama Wellness Community Health Centre III, we serve a combined population of 1,449,382 people.

Community Health Service Package

CHWs deliver a comprehensive package of preventive, promotive, and basic curative services, including management of malaria, pneumonia, and diarrhea among children under five; referrals for skilled delivery; family planning; nutrition services; mental health; antenatal and postnatal care; health education; and Kangaroo Mother Care (KMC).

This comprehensive approach resulted in 779,120 household visits, through which CHWs provided health education, early risk identification, and ongoing follow-up care at community level. Where higher-level care was required, 159,800 referrals were made to government health facilities, strengthening community-facility linkages. CHWs directly treated 47,171 sick children for common childhood illnesses, ensuring timely access to essential care. Access to reproductive health services was expanded, with 94,906 women accessing family planning services, contributing to improved maternal and child health outcomes.

In neonatal care, CHWs identified and supported the most vulnerable newborns, enrolling 370 severely vulnerable neonates in Kangaroo Mother Care, of whom 365 were successfully discharged, demonstrating the effectiveness of community-based newborn care and follow-up.

Through the ongoing support of the Midwife Mentor, 2,564 deliveries were successfully conducted across 11 government health facilities in Mukono District in 2025. The mentor provided continuous professional development sessions that strengthened health workers' capacity in safe delivery practices, enhanced clinical skills for timely response to obstetric emergencies, and promoted best practices in respectful maternity care



Nama Wellness Community Health Centre III:

Our 24/7 Community Health Centre continues to grow as a recognized center of excellence, offering laboratory services, maternal and child health care, consultations, HIV testing, and ART services.

During the reporting period, 13,202 clients accessed care, reflecting sustained demand for accessible, high-quality health services at community level. To support accurate diagnosis and effective treatment, 13,411 laboratory tests were conducted, strengthening timely clinical decision-making.

The Centre played a vital role in maternal and newborn health, supporting 150 safe deliveries and ensuring continuity of care for mothers and newborns. Access to essential diagnostic services was enhanced through 1,912 ultrasound scans, enabling early detection and management of pregnancy-related and other health conditions. Preventive maternal health services were further strengthened, with 527 pregnant women attending their first antenatal care visit, facilitating early engagement with skilled care and improved pregnancy outcomes.

Community Outreaches:

Outreaches remain critical for reaching underserved and hard-to-reach communities, addressing barriers related to distance, cost, and access to essential health services. In 2025, outreach services were implemented across Isingiro, Kampala, Wakiso, and Pakwach, extending integrated care to populations with limited access to facility-based services.

Through these outreaches, 145,466 clients were served, delivering a broad package of preventive and promotive services. Reproductive health access was strengthened, with 747 women provided with family planning services, supporting informed choice and healthier families. Child health outcomes were advanced through 92,465 children immunized, significantly contributing to disease prevention and improved population immunity. Adolescent health was prioritized, with 1,437 girls vaccinated against HPV, reducing future risk of cervical cancer.

In addition, women's health services were expanded through 2,745 cervical cancer screenings, enabling early detection, while 57 women received timely treatment for precancerous lesions, demonstrating effective linkage between screening and lifesaving care.



Kangaroo Mother Care (KMC)

Community-Based KMC Initiative in Mukono District

The World Health Organization (WHO) recommends Kangaroo Mother Care as a high-impact, low-cost intervention for improving survival, growth, and developmental outcomes among preterm and low-birth-weight infants, particularly in resource-limited settings. KMC is an evidence-based approach centered on continuous skin-to-skin contact, exclusive breastfeeding, and active family involvement in newborn care.

While KMC is routinely initiated in health facilities, sustaining correct and consistent practice at household level remains challenging due to limited caregiver health literacy, socio-cultural barriers, early discharge from facilities, and inadequate family support. In Uganda, many preterm and low-birth-weight newborns are discharged before attaining optimal weight, making effective home-based KMC critical to improving neonatal survival and continuity of care.

In response, Nama Wellness Community Centre, in collaboration with government health facilities, implemented a Community-Based KMC model in Mukono District. The model leverages Community Health Workers (CHWs) to provide structured post-discharge follow-up and integrates digital innovations through CommCare Connect to support real-time monitoring, caregiver education, and timely referrals. Through regular home visits, CHWs reinforce correct KMC practices, monitor growth and danger signs, and strengthen linkages between households and health facilities.

During the current reporting period, a total of 370 Severely Vulnerable Neonates (SVNs) were enrolled into the Community-Based KMC program. Of these, 98% successfully completed the full 28-day home-based monitoring cycle and were discharged after demonstrating improved growth and clinical stability. Throughout the monitoring period, CHWs provided continuous counseling, feeding support, and referral services where complications were identified.

These results demonstrate the effectiveness of a CHW-led, digitally enabled community-based KMC approach in bridging the gap between facility-based newborn care and sustained household-level support. The model shows strong potential for scale-up to additional districts, including Buikwe, as part of broader efforts to reduce neonatal morbidity and mortality in Uganda.



SUCCESS STORY: A MOTHER'S HOPE RESTORED THROUGH KMC

Aisha, a 17-year-old first-time mother from Namayuba village, delivered a preterm baby weighing only 1 kg—fragile, weak, and unable to breastfeed. Abandoned by the baby's father throughout pregnancy and delivery, Aisha faced this frightening moment with only her grandmother, Ms. Zulaika, by her side. The shock of having such a small baby, combined with fear of losing her child and the responsibilities of early motherhood, left Aisha emotionally overwhelmed and mentally distressed, unsure of how to care for her newborn.

Recognizing the baby's critical condition and the risks associated with prematurity, the midwife who conducted the delivery immediately referred Aisha to a Nama Wellness-supported Community Health Worker trained in Kangaroo Mother Care. The CHW visited Aisha the same day, enrolled the baby into the KMC program, and explained how continuous skin-to-skin contact, exclusive breast milk feeding, and close monitoring could help regulate the baby's temperature, breathing, and growth. She reassured Aisha that despite the baby's fragile state, consistent KMC offered a real chance for survival and recovery.

Over the next 28 days, the CHW provided daily follow-up visits, closely monitoring the baby's progress while guiding Aisha on proper KMC positioning, expressing and feeding breast milk, and identifying danger signs early. Beyond clinical care, the CHW offered emotional support, patiently building Aisha's confidence as a young mother and involving Ms. Zulaika to ensure sustained care at home. Gradually, the baby grew stronger, fed better, and gained weight steadily, while Aisha's fear slowly turned into hope.

By the end of the KMC cycle, the transformation was remarkable. The baby had grown from 1 kg to 4.2 kg—healthy, stable, and thriving. What began as a frightening struggle for survival became a powerful story of resilience and hope, restoring Aisha's confidence and renewing her family's belief in the child's future, made possible through timely community-based care and the life-saving power of Kangaroo Mother Care.

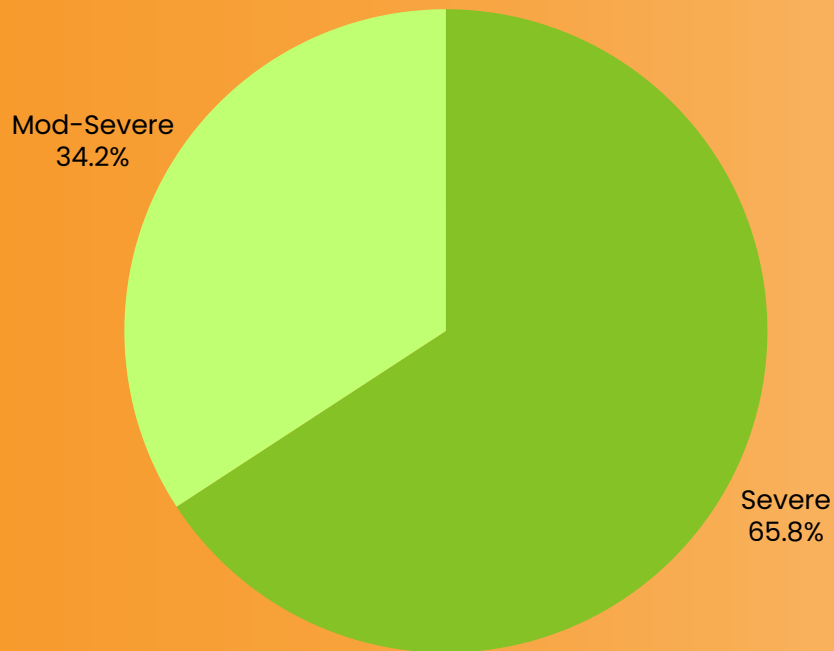


COMMUNITY MENTAL HEALTH

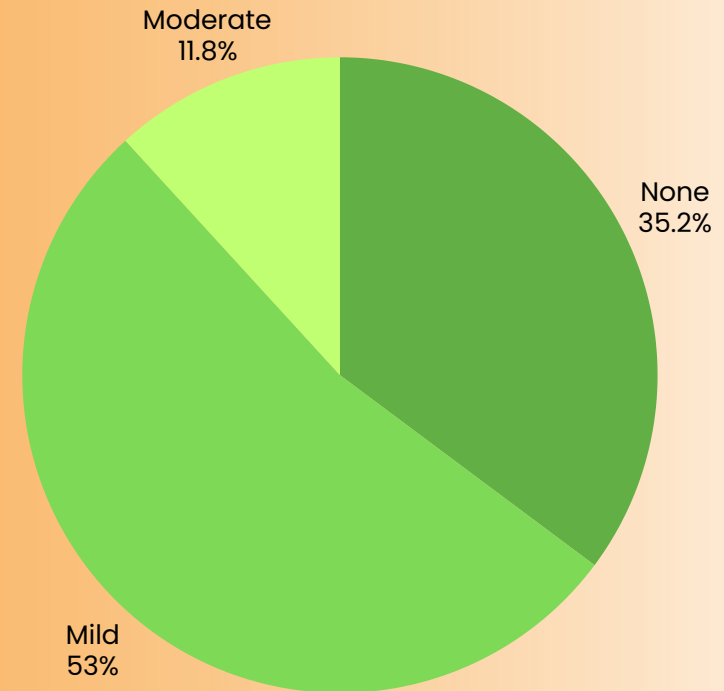
In 2025, 436 women and adolescent girls graduated with none to minimal depression levels. Key triggers of depression and anxiety include disagreements, life changes, isolation, loss of loved ones. These are exacerbated by the high levels of poverty and physical illnesses, making women more susceptible.

All IPT-G sessions are led by trained CHWs using the Commcare Connect App, a digital system that was design by Dimagi. All IPT-G workflows are embedded into the commcare connect system, making facilitation of sessions more efficient and effective

Pre-Therapy Depression



Post-Therapy Depression



Strengthening Community Mental Health Capacity

In partnership with the Stanford Centre for Health Education, we are finalizing the development of an online course, Mental Health Essentials for Community Health Workers, to be rolled out in 2026. The course equips Community Health Workers with essential knowledge and practical skills to understand mental health as a continuum, recognize common mental health conditions, communicate respectfully within cultural contexts, and identify appropriate support and referral pathways. It also emphasizes the CHW role in mental health support, addresses common myths, promotes self-care to prevent burnout, and strengthens community-level mental health education and help-seeking.





➤ RESEARCH

PROFESSIONALIZED COMMUNITY HEALTH WORKER (PROCHW) MODEL STUDY

In 2025, Nama Wellness Community Centre made substantial progress in our collaborative research partnership with Makerere University School of Public Health and the Community Health Impact Coalition (CHIC), which examines the Professionalized Community Health Worker (ProCHW) model. This study represents a significant contribution to the evidence base on community health systems strengthening and the role of professionalized CHWs in advancing equitable access to quality health services.

The research study has reached full completion, with the final report developed and currently undergoing final technical and editorial review in preparation for formal publication. As part of our dissemination strategy, preliminary findings were successfully presented at the National Safe Motherhood Conference, where they were shared with a wide range of stakeholders, including policymakers, health practitioners, researchers, development partners, and civil society actors engaged in maternal, newborn, and child health. This platform enabled early knowledge sharing and stimulated important dialogue on the role of professionalized CHWs in improving maternal and child health outcomes in Uganda.



Study Significance

The research documents and analyzes an innovative and contextually grounded approach to community health service delivery that has been operational in Mukono District since 2019. NAWEC's ProCHW model, which is aligned with the Community Health Impact Coalition (CHIC) framework, is distinguished by several defining features that set it apart from conventional volunteer-based CHW models. These include the deployment of salaried Community Health Workers, formal accreditation and certification processes, continuous and structured professional training, routine supervision and mentorship, and deliberate integration into the formal health system at facility and district levels.

The research documents and analyzes an innovative and contextually grounded approach to community health service delivery that has been operational in Mukono District since 2019. NAWEC's ProCHW model, which is aligned with the Community Health Impact Coalition (CHIC) framework, is distinguished by several defining features that set it apart from conventional volunteer-based CHW models. These include the deployment of salaried Community Health Workers, formal accreditation and certification processes, continuous and structured professional training, routine supervision and mentorship, and deliberate integration into the formal health system at facility and district levels.

Despite the model's longevity and demonstrated relevance, it had remained largely undocumented prior to this research. As a result, its potential to inform national and global discussions on CHW professionalization and sustainable community health workforce models had not been fully realized. This study fills a critical evidence gap by systematically documenting the design, implementation, and early outcomes of the ProCHW model. The findings generate practical, evidence-based insights that can inform policy formulation, program design, and investment decisions related to community health worker programming in Uganda and in comparable low- and middle-income country contexts.

By elevating real-world implementation experience into the research and policy arena, the study contributes to ongoing debates on how best to strengthen primary health care systems, improve CHW motivation and retention, and enhance the quality and continuity of care delivered at the community level.

Next Steps

The formal publication of the study will be released in the second quarter of 2026, after which dissemination will be scaled up through national and regional conferences, policy dialogues, and targeted stakeholder engagements to ensure the evidence informs health sector reforms, CHW policy discussions, and investments in professionalized community health systems.

New Initiative: CHW Research Capacity-Building Project

In parallel with this work, Nama Wellness Community Centre has been selected to participate in a groundbreaking research capacity-building initiative in partnership with the Community Health Worker Center for Research Excellence (CHW-CRE) and the Community Health Impact Coalition (CHIC). This forward-looking initiative seeks to transform the traditional role of Community Health Workers by positioning them not only as implementers of health interventions, but also as active contributors to the generation of knowledge and evidence.

The project is grounded in the recognition that CHWs possess unique, frontline perspectives on community health needs, service delivery barriers, and contextual realities that are often underrepresented in conventional research processes. By equipping CHWs with foundational research skills, the initiative aims to democratize research, strengthen community ownership of evidence, and ensure that research agendas and outputs are closely aligned with lived community experiences.

Central to this initiative is the development of a comprehensive research training course tailored specifically for Community Health Workers. The course will build CHWs' competencies in key areas such as research ethics, data collection and documentation, basic analysis, and the use of evidence for local decision-making and advocacy. Through this process, CHWs will be empowered to participate meaningfully in research activities, contribute to implementation science, and engage more effectively with academic institutions, policymakers, and development partners.

Collectively, this initiative represents an important step toward strengthening community-based research ecosystems, amplifying CHW voices within the research space, and fostering more inclusive, relevant, and actionable evidence to inform community health policy and practice at both national and global levels.





➤ **ADVOCACY AND POLICY**

Catalyzing Collective Action: Establishing a National Coalition for Community Health in Uganda

With catalytic support from the Community Health Impact Coalition (CHIC), we spearheaded the establishment of the Community Health Partners Coalition–Uganda, a national platform that is now fully registered and operational. The coalition brings together 15 non-governmental organizations working across diverse geographies to support and strengthen community health programs throughout the country. Its formation marked a significant milestone in consolidating fragmented community health efforts into a unified, coordinated, and credible advocacy body.

The coalition's core mission is to advance the professionalization of Community Health Workers (CHWs) in Uganda while promoting equitable access to quality health services for all communities, particularly the most underserved. By fostering collaboration, shared learning, and collective advocacy, the coalition seeks to elevate the status of CHWs as an essential and integral component of Uganda's health system and to ensure that their contributions are recognized, supported, and sustained through policy and financing reforms.

Parliamentary Dialogue to Elevate CHWs and Strengthen PHC Financing

In partnership with the Community Health Partners Coalition–Uganda, we convened a high-level parliamentary dialogue that brought together a broad and influential group of stakeholders. Participants included Members of Parliament from the Health and Finance Committees, senior officials and technocrats from the Ministry of Health, representatives of civil society organizations, Community Health Workers themselves, and members of the media. This inclusive convening created a rare and critical space for dialogue across policy, practice, and lived experience.

The parliamentary engagement was a direct response to the growing national urgency to strengthen Uganda's community health system and to meaningfully elevate the role of CHWs in achieving universal health coverage. Discussions focused on persistent systemic gaps affecting CHWs, including inadequate remuneration, limited social protection, insufficient supplies, and weak institutional support. Importantly, the dialogue centered CHW voices, allowing frontline workers to directly share their realities, challenges, and recommendations with policymakers and decision-makers.

Several key calls to action emerged from this engagement. These included the need to expand CHW livelihood and social protection strategies to ensure financial security and dignity for frontline workers; increase the Primary Health Care (PHC) budget with clearly defined and dedicated line items for CHW commodities; and provide free or subsidized access to health services for CHWs at public health facilities in recognition of their service to communities. Additional priorities included financing and strengthening CHW associations as legitimate platforms for representation and advocacy, as well as absorbing nursing assistants into structured CHW programs to enhance service delivery and workforce integration.

[WATCH HIGHLIGHTS OF THE DIALOGUE](#)



Strengthening Uganda's Community Health Workforce: Formation and Global Recognition of the United CHW Initiative

Beyond policy dialogue, we also supported Community Health Workers across Uganda to organize and establish a unified national professional body. These efforts culminated in the formal registration of the United CHW Initiative Uganda, a national CHW association designed to represent, protect, and advance the interests of CHWs nationwide. The association serves as a critical vehicle for collective voice, leadership development, and engagement with government and partners.

Notably, the United CHW Initiative Uganda has since gained international recognition as a full member of the Community Health Impact Coalition. This membership strengthens Uganda's presence and influence within global CHW advocacy movements, enabling the country's CHWs to contribute to and benefit from international policy dialogues, research initiatives, and cross-country learning platforms.

Through these interconnected efforts—coalition building, high-level policy engagement, and grassroots movement strengthening—we have made a substantive contribution to shaping national discourse on community health. Our work has amplified CHW voices within decision-making spaces, advanced concrete policy recommendations, and forged stronger linkages between Uganda's CHW movement and global advocacy and research ecosystems. Collectively, these actions represent meaningful progress toward a more professionalized, equitable, and resilient community health system in Uganda.



EVENTS AND CONFERENCES

From Grassroots to Global Stage: NAWEC Advocates for Equitable Funding at the 2025 Skoll World Forum

At the 2025 Skoll World Forum, our Executive Director, Ms. Pauline Picho Keronyai, stood alongside African changemakers to challenge “The Bias Barrier” that continues to limit equitable access to global philanthropy. Reflecting on Nama Wellness Community Centre’s journey from a grassroots initiative to a trusted not-for-profit organization, she exposed a persistent contradiction: African-led organizations deliver measurable impact and uphold strong accountability, yet remain systematically underfunded.

Pauline issued a clear call for transformation within philanthropy—urging funders to move beyond short-term, risk-averse financing toward trust-based, long-term partnerships that place power and decision-making in local hands. Her message resonated across the

Forum: investing in African-led organizations is not charity—it is a strategic commitment to sustainable, community-driven change with global relevance. In addition to participating in high-level engagements, Pauline co-led a session at The Sidebar, where she joined fellow grassroots leaders to explore the intersections of mental health, equity, and climate resilience, amplifying community-centered perspectives within global policy discussions.

Championing Community Perspectives: NAWEC at the UNGA 80th Session

Our Executive Director, Pauline Picho Keronyai, represented Nama Wellness Community Centre at the 80th Session of the United Nations General Assembly (UNGA) held in New York from 22nd–30th September 2025. Convened under the theme “Better Together: 80 Years and More for Peace, Development, and Human Rights,” UNGA 2025 brought together global leaders, policymakers, and civil society actors to advance dialogue on the Sustainable Development Goals, climate action, global health, and equity.



EVENTS AND CONFERENCES CONT.

Advancing Digital Health: NAWEC at GDHF 2025 in Nairobi

Our staff attended the Global Digital Health Forum (GDHF) 2025 in Nairobi, Kenya, a leading global convening that brought together governments, digital health implementers, donors, researchers, and innovators to advance the use of digital solutions for strengthening health systems, particularly in low- and middle-income countries. The forum featured interactive sessions including panel discussions, workshops, and solution showcases, with key focus areas such as artificial intelligence in health, interoperability and health information exchange, digital health financing, climate and health innovations, gender equity and social inclusion, and resilient digital systems for pandemic and disaster preparedness. Participation in the forum enabled NAWEC to engage with global best practices, emerging innovations, and strategic partnerships to strengthen its digital health and community health systems work.

Africa CDC Polyvalent Community Health Worker Curriculum Development Workshop in Addis Ababa

Our Executive Director, Ms. Pauline Picho, actively participated in the Africa CDC Polyvalent Community Health Worker (CHW) Curriculum Development Workshop as well as the continental CHW investment case consultations held in Addis Ababa. During these engagements, she contributed her expertise to the co-creation of a harmonized, competency-based framework aimed at strengthening the professionalization, financing, and integration of CHWs into resilient health systems across Africa. Her involvement helped ensure that the voices of frontline practitioners and community-centered perspectives were incorporated, supporting sustainable approaches to CHW development, capacity building, and the advancement of health equity across the continent.



MEET SOME OF OUR CHAMPION TEAM

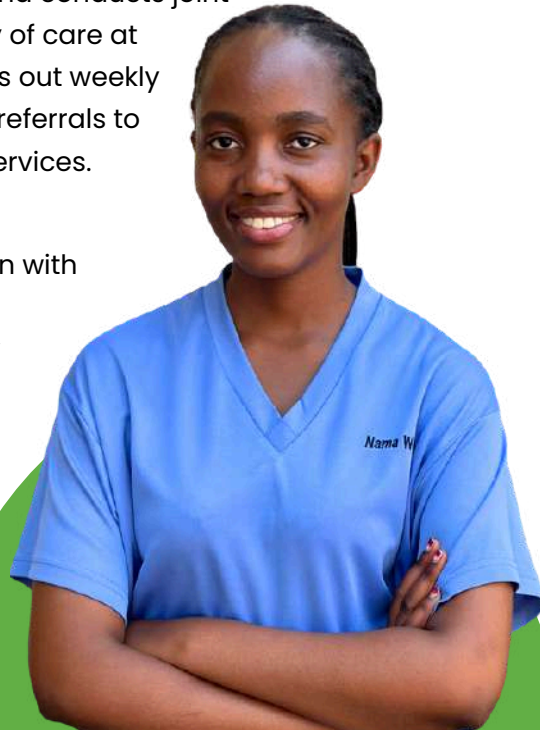
Bridget Niwenyesiga, Midwife

Since joining Nama Wellness Community Centre in 2025, Bridget has played a pivotal role in the implementation and success of the Kangaroo Mother Care program, ensuring continuity of care for preterm and low-birth-weight newborns beyond the health facility and into the community. She identifies eligible preterm infants at discharge, builds rapport with mothers, and provides targeted health education to promote safe KMC practices at home.

She links mothers to nearby Community Health Workers and supports them through regular home visits, ensuring continuity of care during the critical first 28 days after discharge.

Bridget remains on call to respond to emergencies, ensures timely referral of sick preterm infants, and conducts joint home visits to strengthen quality of care at community level. She also carries out weekly facility reviews and coordinates referrals to specialists and other essential services.

Through her dedication, clinical expertise, and close collaboration with families and community health workers, Bridget has significantly strengthened the quality and effectiveness of community-based neonatal care under the KMC program.



Lillian Lakot, Midwife

Lilian Lakot is a midwife at Nama Wellness whose role expanded significantly in 2025 after she completed training as an Emergency Medical Technician (EMT) in Basic Life Support. This training strengthened Nama Wellness' capacity to respond rapidly and effectively to medical and trauma emergencies, both within the community and during referrals.

Since her training, Lilian has successfully responded to a wide range of emergencies, providing timely, life-saving interventions including airway management, hemorrhage control, cardiopulmonary resuscitation (CPR), oxygen therapy, and intravenous access.

She has played a critical role in stabilizing severely ill patients during pre-hospital care and ensuring safe, well-coordinated transfers to higher-level facilities, significantly reducing delays in emergency treatment.

Beyond emergency response, Lilian has strengthened emergency preparedness within the hospital by sharing her pre-hospital experience with ward staff and working closely with multidisciplinary teams, including clinicians, nurses, and drivers.



CHW SPOTLIGHT: ROSET SAMA

Roset Sama has been a CHW since 2020, when we started implementing our CHW program. Over the years, her consistent dedication and selfless service to her community particularly children, adolescents, and pregnant women has distinguished her as a trusted and impactful Community health worker.

In recognition of her commitment and performance, Roset was recently selected by her community members as a Community Health Extension Worker (CHEW), a new cadre in community health programming in Uganda to serve her community at parish level. This milestone reflects the depth of her contribution at community level and her leadership in improving access to essential health services. Beyond her role as a CHW, Roset has also served as a peer educator, focusing on sexual and reproductive health and rights (SRHR) among adolescent girls, where she has played a key role in health education, mentorship, and prevention.

Reflecting on her journey, Roset shares,

“Nama Wellness has trained me, supervised me, equipped me, and facilitated my work in the community. This support has motivated me to serve my people better, and I have seen real improvements in the health of my community.”

Through her passion, leadership, and commitment to community wellbeing, Roset exemplifies the impact of investing in and professionalizing community health workers.



CHW SPOTLIGHT: SHANIA SSEKITOLEEKO

Shania Sekitoleeko is a dedicated Community Health Worker who has been instrumental in advancing mental health support within her community through the delivery of Interpersonal Therapy Group (IPTG) sessions. Her commitment, consistency, and the trust she has built with community members have made her a key driver of Nama Wellness' community-based mental health interventions.

In 2025, Shania successfully facilitated two cycles of IPTG, supporting 22 women to graduate with minimal or no symptoms of depression, a significant achievement that reflects both the effectiveness of the intervention and her deep dedication to the wellbeing of women in her community. In recognition of her hardwork and impact, Shania was also selected as a Community Health Extension Worker to serve her community at parish level.

Speaking about her motivation, Shania says,

“My passion for IPTG comes from the desire to extend a helping hand to women facing daily challenges that often lead to depression and anxiety. When women are supported and listened to, healing begins.”

Through her compassion, hard work, and commitment to mental health care, Shania exemplifies the critical role of community health workers in addressing depression and anxiety and restoring hope at community level.



KEY CHALLENGES AND STRATEGIC PRIORITIES FOR 2026

2025 marked a year of significant progress and resilience for Nama Wellness Community Centre, characterized by notable achievements alongside persistent operational challenges. One of the critical challenges faced during the year was the absence of an operating theatre, which necessitated the referral of an average of 17 mothers per month to nearby health facilities for caesarean sections and the management of other obstetric complications. This infrastructure gap increases risks for mothers requiring urgent surgical intervention and places additional pressure on already overburdened referral facilities.

The organization also grappled with rising supply costs, as post-COVID inflation continued to drive up the prices of essential medical supplies and services, at times limiting service delivery and delaying planned community outreaches. In addition, currency volatility, particularly the depreciation of the US dollar against the Ugandan shilling, resulted in significant exchange losses, affecting CHW stipends, procurement of supplies, and overall operational costs.

Despite these challenges, NAWEC's operations continued to grow stronger and expand in scale and impact. In preparation for 2026, the organization has embarked on resource mobilization to train 194 Community Health Extension Workers (CHEWs) in Mukono District, beginning in January 2026. The six-month training program will include four months of classroom-based learning and two months of supervised practicum. CHEWs represent a professionalized cadre of CHWs who will be formally remunerated, adequately equipped, continuously supplied, and effectively supervised, strengthening primary healthcare delivery at the community level.

Responding to increasing community demand for diagnostic services, NAWEC is also mobilizing resources to introduce X-ray services at NAWEC Health Centre III in 2026, further expanding access to essential diagnostic care and reducing the burden on referral facilities.



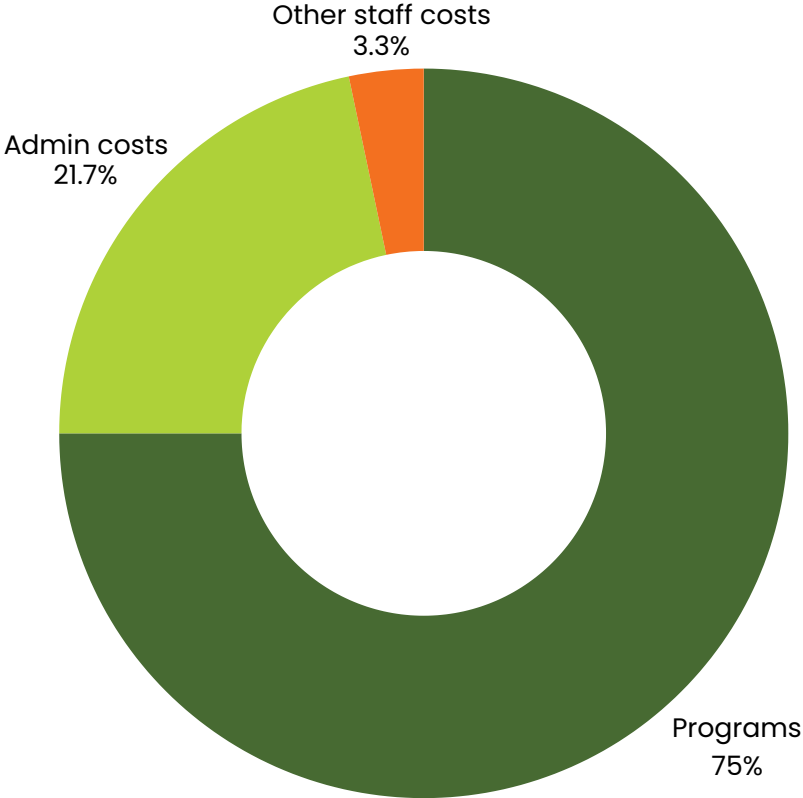
WITH GRATITUDE TO OUR PARTNERS



FINANCES UPDATE FOR 2025

In 2025 Nama Wellness Community Centre's **budget was US\$ 837,950.**

Our **expenses in 2025 totaled US\$ 630,360.** 75% of this was directed towards our programs, 21.7% to administrative costs and 3.3% on other staff costs.



EXCITING NEWS FOR 2026

In 2026, we will embark on an important new chapter with the rebranding of Nama Wellness Community Centre to Nama Health Impact. This transition reflects our growth, expanding reach, and sharpened focus on driving measurable, sustainable health outcomes at community and systems levels.

As part of this transformation, we will unveil a new organizational logo and a redesigned website, both scheduled for launch in the first quarter of 2026. The new brand identity will strengthen our visibility, enhance engagement with partners and stakeholders, and better communicate our mission, impact, and commitment to community-driven health solutions.

This rebrand marks more than a change in name—it signals our evolution into an organization positioned to influence policy, scale impact, and deepen investment in professionalized community health systems.





Nama Wellness
COMMUNITY CENTRE



P. O. Box 420, Mukono - Uganda



Info@namahealth.org



www.namahealth.org



@NamaWellness



@Nama Wellness Community Centre



+256754658130, +256 778408937