

Injury control in Uganda

The story of Uganda's Injury Control Centre (ICC-U) illustrates a new kind of "critical mass".

Dr. Olive Kobusingye, a trauma surgeon and epidemiologist, returned to Uganda in 1996 after some years of post-graduate training in the U.K. and U.S.A. She became interested in the problem of road traffic accidents, but realized that the evidence base for defining and managing this problem was weak. Her work began with the development of a hospital based trauma registry, and a monitoring tool—the Kampala Trauma Score. With some external support, Dr Kobusingye established the ICC-U in 1997. Working with colleagues in the CEU at Makerere University, she conducted further prevalence studies, as well as training sessions regarding the care of trauma victims.

It soon became apparent that in order to reduce Uganda's burden of illness due to trauma, a range of stakeholders needed to be included in the work of the ICC-U. And so various research "user groups" became involved—planners from the police traffic division, members of the Uganda Road Safety Council, and policy makers from the Ministry of Health. The ICC-U group also organized pedestrian safety campaigns, involving local schools (both teachers and students). With the Kampala City Council, a feasibility study was conducted about the state of the city's ambulance services. All of this involved increasing experience in creating and managing effective inter-sectoral teams.

Along with research, advocacy and action elements, the ICC-U has also become an important learning center. Postgraduate students from the University, serving as research associates, are conducting various studies related to the problem of injuries. Hospital personnel are being trained in the management of trauma victims. A specialized trauma library has been established. With some initial funding from INCLEN, the ICC-U played a leading role in the creation of a problem-specific African coalition—the Injury Prevention Initiative of Africa (IPIFA). It now includes colleagues from eight African countries who are involved in various research, training and advocacy activities. Members of this group have also contributed to seminars and workshops related to injuries in other parts of the world.

The ICC-U thus provides a good example of a "research and learning coalition"—the new form of "critical mass". There is a specific focus (injury control). Both research producers and users are included in research and action coalitions. National policy has been influenced, with injury prevention and management now included as a high priority in Uganda's new 5-year health strategy. Intentional learning is included in the range of activities. The Uganda team has demonstrated leadership in the creation of a regional injury control network.