

ABSTRACT

Delivering palliative care education at The Institute of Hospice and Palliative Care in Africa-Hospice Africa Uganda amidst the Covid-19 pandemic: Opportunities and challenges.

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BACKGROUND

- Deciding to open the institute to students was guided by the need to relieve pain and other distresses that were being experienced by all those in need in Africa through training palliative care specialists who would afterwards offer the much needed holistic pain management among those who had been sick but disadvantaged because of the effects of lock down and those that had just been subjected to psychosocial distress and isolation as a result of a positive COVID 19 diagnosis.

OBJECTIVES

- To conduct an effective professional palliative care training amidst COVID-19 Pandemic

METHODS

- We conducted four face to face teaching segments starting 25th January 2021 till 1st April 2021 each lasting one month for years: three, two and one of the bachelor's program and year one of master's program with some overlapping.
- As a preventive measure, there was temperature monitoring with a temperature gun and hand washing at IHPCA entrance. Every office and lecture room had sanitizer at the entrance. Social distancing was emphasized during the lectures and at all times. Group discussions were done outside in the tent and under tree shades in small groups.
- Students were required to wear their masks appropriately at all times except during meal time. On reporting, students were sensitized and reminded about the dangers of COVID-19.



- Students in class during 2021 face to face.

RESULTS

- **Challenges:** Preparing to teach during a pandemic is financially draining and time consuming as the investment needed to put SOPs in place is big. The faculty need to be trained and psychologically prepared to handle a mixture of local and international students some of whom had much worse COVID-19 outbreaks in their countries of origin. Some of the students didn't report for classes due to COVID-19 diagnosis.

RESULTS

- We successfully conducted the three months face to face teaching without any infection of COVID-19 being recorded.
- In the period, a Master of Science program in palliative care was successfully launched.

CONCLUSIONS

- **Lessons learned:** With proper planning, preparations and strict observation of SOPs, face to face teaching can be successfully conducted without spreading COVID-19. Sharing of experiences with students brought to light the real challenges COVID-19 and its associated lockdown had presented to palliative care education and service provision.
- Discharged COVID-19 patients need more palliative care intervention than had been previously thought.