

**Team: Jonathan Emmady, Anushna Parepalli, Jessica Waller, Sudha Charwin, Prabhu Emmady, Calvin Devathala. Origin: Raleigh and Charlotte, North Carolina.**

**Dates: 5am March 7<sup>th</sup>, 2025, to 4pm March 16<sup>th</sup>, 2025**

### **Travel & Arrival**

- **March 7-8 (Friday/Saturday):** The team departed from North Carolina. 2 started in Raleigh, 4 from Charlotte. We reached Washington, DC, however the flight to Doha was delayed. This was our first time meeting as a group, which provided an opportunity to connect, share our backgrounds, and prepare spiritually for the mission ahead.
- Upon arrival in Doha, we had a tight 40-minute connection. By God's grace, we made our flight to Uganda; otherwise, we would have been delayed by a full day.
- We landed in Entebbe, where Brian was waiting to receive us. We loaded our supplies and made our way to the **Word of Life (WOL) Campus**.
- After a long journey, we were welcomed with a warm dinner and settled in for the night. Despite a power cut, we were able to rest well.

### **Sunday – Worship and Unexpected Commissioning**

- We attended church Sunday morning, where something unexpected happened. The WOL leader realized we were there and requested a **commissioning prayer for our team**. The entire congregation participated, laying hands on us and praying for God's blessing over our mission.
- Since HSFC is not officially sent out by a church, we had not received a commissioning before departure—but **God arranged it for us in Uganda!** This was a powerful moment, reinforcing that He was leading this mission.
- The church's sermon that day was about **servicing others**, aligning perfectly with our purpose, despite not being pre-planned.
- After church, we embarked on a **8-hour drive to Tororo**, arriving late at 10 PM. Tired but grateful, we rested for the work ahead.

### **Medical Camp in Tororo**

- Heavy **rains earlier in the week** made the weather cooler, making conditions more bearable for long clinic hours.

- The local community had a tradition of **honoring visitors**, but we requested that they refrain so that all glory would go to God. They graciously agreed.
- This was the **first-ever medical camp** held in these villages, making it a historic and deeply needed outreach.

### Monday – A Challenging Start

- We saw **218 patients** on the first day.
- Everything was new—**new location, new people, new cultural dynamics**. Local volunteers tried to help, but it was also their first experience with a medical camp of this scale.
- The day was busy, and the team worked through the initial challenges of organizing patient flow, understanding local medical needs, and distributing limited resources.

### Tuesday – Exhaustion and Provision

- Fatigue from long travel and lack of rest began to show. The **team was physically and emotionally drained**.
- The **number of patients waiting was overwhelming**. By midday, it became evident that we would not be able to see them all by 7 PM.
- **A major setback:** Lunch was **delayed until 4 PM** due to a miscommunication with the person in charge of ordering food. This affected morale.
- **Medication shortages worsened**. Some of the initial medical orders never arrived, and a large bag of medications was stuck in customs, with no release in sight.
- At this point, I felt the weight of our **physical limitations** and the overwhelming **logistical challenges** pressing down on me. Doubt crept in, making me wonder if we had the strength to effectively carry on and deliver this trip as planned.
- **Difficult decision:** We had to **close the clinic early**, sending many patients away. This was heartbreaking but necessary.
- **A turning point:** We called a pharmacy supplier in Kampala, who agreed to send more medications.

### Wednesday – God’s Unexpected Provision

- To prevent burnout, we **split the team into two shifts**, allowing four teammates to work half-day shifts and rest. However, transportation was limited, which meant there would be a **two-hour gap without clinic coverage**.

- **Unexpected help:** A **car breakdown** changed everything. Tom's vehicle broke down, forcing him to travel to Tororo for repairs. This delay allowed him to use another vehicle to **transport teammates and ensure continuous staffing at the clinic.**
- **This unforeseen issue solved our staffing problem and lifted morale!** The team regained energy, and despite some working half-day shifts, we saw even **more patients than before.**
- That evening, we spent extended time in **prayer and dedication**, reflecting on God's faithfulness.

#### **Thursday – Efficiency, Joy, and Cultural Connection**

- By Thursday, the team had **found its rhythm.**
- Patient intake and treatment flowed **much more efficiently**, as both our team and the local volunteers had adjusted to the process.
- The **team felt comfortable with the cultural setting**, better understanding patient concerns, expectations, and local healthcare challenges.
- **Joy in the Work:** Unlike the fatigue and doubt earlier in the week, **Thursday felt fulfilling and uplifting.** We weren't just pushing through exhaustion—we were enjoying the work, celebrating small victories, and encouraging each other.
- **Spiritual Breakthroughs:** Many patients were open to prayer, and to hear more about the gospel. There was an **atmosphere—hope, peace, and gratitude filled the clinic.**
- As we wrapped up for the day, we realized that despite the struggles of the week, **God had sustained us, refined us, and renewed our purpose.**

#### **Daily Spiritual Impact**

- **Prayers:** Every day, we prayed together on our way to and from the clinic, seeking God's strength and wisdom.
- **Gospel Message Shared:** Throughout the clinic, we not only treated physical illnesses but also spoke about spiritual healing.
  - We emphasized that we are **all born sinners**, and no good works can earn salvation.
  - **Salvation comes only through faith in Jesus Christ**, who paid the price for our sins by dying on the cross.

- The **local community was receptive**, and we trust that God will continue working in their hearts.

### Challenges & God's Grace

- **Illness:** On **Friday, one of us fell sick** with fever and weakness. We prayed and started medications. By God's grace, the teammate improved quickly and significantly and well enough to travel back.
- **Travel Blessings:** Some of us were **unexpectedly upgraded to business class** on the Entebbe-Doha flight. This was a much-needed relief, especially for the sick teammate.
- We arrived back in the U.S. on Sunday, tired but immensely grateful.

### Mission Trip Impact

- **Total Patients Treated: 1,120**
- **Community Reached:** First medical camp in the area, impacting hundreds of families.
- **Spiritual Outreach:** The gospel was shared daily with patients and local volunteers.
- **Team Growth:** The challenges strengthened our faith and resilience, teaching us to rely on God's provision.
- **Medicines:** We distributed 37 types of medications. Common medications include: Albendazole, Amlodipine, Amoxicillin, Azithromycin, Acetaminophen, Cough syrups, skin creams, and ORS solution. Total medicine quantity is 31,293 units.

### Looking Ahead

- We are praying and **planning to return within a year.**
- Future trips will benefit from lessons learned regarding **logistics, medication supply, and team support.**

### Final

### Reflection:

Despite physical exhaustion, logistical hurdles, and moments of doubt, **God's faithfulness was evident in every challenge we faced.** He provided in ways we didn't expect, from a surprise commissioning prayer to a broken-down car that solved our biggest staffing issue.

Thank you to the HSFC community for your support and prayers. This mission was a testament to what happens when we step out in faith to serve others.

**For**

**HIS**

**Glory,**

Uganda Mission Team, March 2025, Hope Street Free Clinic