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## Stigma, Accessibility, and Other Barriers to Healthcare in Uganda

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Introduction: This project aimed to explore how policy and culture shape health at the individual, community, and national levels in Uganda. Based at the Makerere University–Johns Hopkins University (MUJHU) Research Collaboration in Kampala, the study engaged physicians, healthcare workers, patients, and other stakeholders in the global health sphere through interviews to better capture the complexities of Uganda's health landscape.

**Methods:** We interviewed and observed physicians, nurses, patients and their families, and public health officials to gain insight into cultural motivations, medical practices, and socioeconomic barriers to care. Conversations were held in both rural and urban areas, across public and private hospitals and clinics, to capture a broad perspective of Uganda's healthcare system.

**Results:** Key factors impacting health are negative stigmas and stereotypes, specifically surrounding human immunodeficiency virus (HIV). Limited access to healthcare facilities, coupled with inadequate infrastructure and shortages of essential medicines, further reduced the effectiveness of interventions.

Conclusions: HIV-related stigma remains a central barrier to care, fueling secrecy, delayed treatment, and continued transmission. Geographic and financial barriers to clinic access compound health challenges. Promoting health literacy and addressing cultural stigma are critical steps toward policy changes that can build stronger, more equitable health systems.

A notable challenge we faced was establishing trust with healthcare workers. Many were hesitant to be recorded, and initial interactions were marked by reserve, underscoring the importance of relationship-building in qualitative research.

