As he savored the last few moments before leaving the Makerere Medical School, Samson couldn’t help taking one last look at the beautiful campus. It was early evening, graduation was over, and most of the guests had left the grounds. For some reason, perhaps nostalgia, Samson just wanted to be alone one last time on these grounds that held such dear memories.

He struggled with the conflicting emotions in his heart. Did he want to cry? Jump for joy? Was he frightened? Unsure? Perhaps a little of all of those feelings when he thought about leaving. However, the strongest emotion was a healthy sense of pride. He had finished medical school and earned the right to practice medicine. He had accomplished a life goal. He had done well with his studies and earned the respect of his instructors and peers. His family was proud.

But there were other emotions. Beyond the excitement of graduation and the pride of accomplishment, there was a queer sense of bewilderment now that it was all over. A chapter in his life was completed, and the weight of responsibility and accountability began to rest heavily upon him. What would he do next? He had job offers. But which of the options should he take? How soon should he begin? How he wished his father were still alive. He would have discussed his future plans with
him, and as usual, his father would have given him the practical and useful advice that so characterized his years as a father and chief.

Then there was this young lady, Mary Muwonge. He found her so attractive and appealing; whenever he was around her he felt strange things happening inside. Often he’d tried to figure it out. Was it her beauty? Her smile? The way she looked at him? He wasn’t sure. But one thing he knew, she evoked his strongest and best feelings. When she was around he felt as if he were able to conquer the world. Yet around her he was awkward, unsure of what he should say next. His friends said he was in love. That he found difficult to deny. However, since he wasn’t inclined to display his emotions, he didn’t spend a lot of time talking about it. Nevertheless, as he stood there that evening in 1938, he knew that marriage was among the many decisions that he would have to make. He wanted to spend his life with Mary.

Like all young people, Samson was experiencing the feelings of uncertainty that accompany the transition from the security of an educational setting and youthful aspirations to the harsh realities of adulthood and responsible decision making.

However, not given to wishful thinking and mental procrastination, Samson looked around a final time, squared his shoulders, and left the campus with the same sense of determination that he’d exhibited 10 years earlier when undertaking the long walk to his uncle’s house. Recalling his resolve of earlier years, he again reminded himself, I am the son of a Muluka chief, a Ugandan, and now a doctor! I will make these necessary decisions; I will do what I must.

The sun slowly disappeared as he turned his back on Makerere. He once again settled in his mind that his
decisions would be sound. As always, three factors were uppermost in his mind: **service** to others, **determination** to succeed, and **commitment** to high ideals.

After the death of his father, one of Samson's goals was to start his own hospital. By doing so, he felt he could best help his people and provide for them a health service that would give equal treatment to all. But the time was not yet right. The government extended an offer to work in the well-known Mulago Hospital, and after consideration he took the job. It wasn't that government service was inviting. It wasn't. But it offered him an opportunity to obtain experience in medicine.

After a year of civil service, young Dr. Kisekka decided the time was right to marry pretty, intelligent Mary Nanfuka Muwonge. So on February 3, 1940, Samson and Mary were joined together in marriage.

What determined his choice of a life partner? Well, primarily he was looking for a young lady of good background and training, someone who would be willing to support him in achieving his objectives. The worst thing that could happen to a man or woman, according to Dr. Kisekka, is to be married to someone who doesn't agree with your ideals and goals. Incidentally, or perhaps not so incidentally, he added that he found Mary to be an attractive woman.

Mary passed all these criteria. Her parents worked in the medical field. Her mother was a Seventh-day Adventist and had taught her the principles of the Bible from an early age. Though at the time Mary wasn't a Seventh-day Adventist, her exposure to its teachings exerted a positive influence on her throughout their marriage. Mary was also supportive of her husband's plans and aspirations. "I had big ideas," said Dr. Kisekka "and I
wanted to marry someone who could share these ideas with me. I also wanted a wife whose ambitions were similar to mine. If you marry someone who has different ambitions than yours—you’re in trouble!” Though love was certainly a factor, that wasn’t the only motivation for marriage. Like other areas in life, Dr. Kisekka approached marriage pragmatically.

Later when asked whether he would consider more than one wife—allowable at the time—Dr. Kisekka quickly said, “No! It is far too expensive.” At that time his decision was motivated less by religious concerns than by economic realities. And further, he felt a polygamous situation was unhealthy for the entire family.

Mary admired Samson because he was, in her words, “a strong, determined man.” Though well aware of his commitment to help others, she felt he was a person who would amply provide for his own family. When talking about their marriage, she added with a smile that “getting married to a man who was a doctor by profession was prestigious. And certainly he was quite handsome. I appreciated his looks.”

A year after their marriage, the first of 15 children (seven boys and eight girls) joined the new Kisekka home. The young father’s goals for his family were to provide a good home, education for his children, and a worthwhile example. Nevertheless, as a young doctor his years were filled with activity and endless demands, and so his wife played a key role in the home. While she herself was educated, Mrs. Kisekka always felt that her greatest challenge and contentment was to provide for her husband and family. “I never wanted an outside job. I was content to keep our home, prepare our food, and provide for the needs of our children. If I could do it all over again, I would choose to do the same thing.”
Samson and Mary Kisekka, 1948

Kisekkas and first child, 1941
Relating a typical day in their early years, she said, "My husband would arise very early and read or study. The family would arise and have prayer together. He would then go to work, and the children would go to school. I would do house chores, work in the garden, and possibly go to the market. I would return home in time to prepare lunch for my children." Later they would assist her in gardening or harvesting. The days were full for Mrs. Kisekka. There was time for little else.

When asked what it was like being married to a doctor, a business leader, and then a prime minister, Mrs. Kisekka replied, "I never considered myself different or better than other ladies. My husband always carried himself the same. I enjoy providing for his needs. He works all day and comes home tired, needing to relax. I try to assist him in any way I can. I always felt like God was leading him."

Mrs. Kisekka affirms that she has been blessed with a good life and family. Her key to enduring the difficulties and trials that have faced her family has been prayer. "My strength has been through praying to God."

One factor that has been an asset to their marriage of 48 years is that they have sought to avoid quarrels, fights, and bitter words. "I abhor quarreling or having a dispute with anyone," says Mrs. Kisekka. About her philosophy of life, she says, "Others may hope to get a fortune, but I sought to develop the character of my family. One way has been to refuse to allow things to annoy me. I was determined that problems would not disturb my peace." Actively maintaining that philosophy has enabled Mrs. Kisekka to successfully handle the events and pressures that they have had to experience.

Dr. Kisekka remembers that self-discipline and self-reliance were ideals for them as a young couple to work
toward. “At the time of our marriage we made very little money, so hard work and frugality were the order of the day in our home.” It was such traits that held his family together during hard times. In the early years of his marriage Dr. Kisekka decided to help his younger brother and his mother’s nephew to obtain an education. There was only one way for him to do that, and that was to get ahead. He and his wife started simple. They made a wooden box with a slot on top, and they put away extra house money in it. He challenged his wife also to deposit any leftover market money in it. He opened a savings account and saved every possible penny. He saved from his job; his wife saved at home. They even denied themselves the luxury of the social evening tea.

“At the end of the month we would open the box to find out how much we had saved. We then took it to our savings account. The little money we saved, we managed to invest it in a piece of land. After some years we mortgaged the land and built a commercial building on it. We ultimately mortgaged this building, and I was able to resign from government civil service and start to work independently.” He expresses appreciation for his wife, adding, “If I had married a lady who has expensive tastes in Africa, it would be very difficult to have done what I have done.”

Both Samson and Mary Kisekka believe that besides everything else, it is love for each other that has been the enduring strength of their marriage.

When Dr. Kisekka began his medical career, conditions for a Ugandan physician in the British civil service were difficult at best. African doctors were underpaid, overworked, and received no respect from their British
counterparts. For 14 years Dr. Kisekka worked at hospitals across Uganda, but everywhere conditions were the same. Ugandan doctors could be just as qualified, but they were never treated with equality and fairness. Referring to this period, Dr. Kisekka said, “Conditions were so bad. It was very frustrating to an ambitious man. The amenities of life could be given in just one room and a dining room. You could work night and day. The White doctors had it very nice. We had it very bad.”

During that period it was the practice that European doctors were given allowance for a car to fulfill their medical responsibilities. The African doctors were only given an allowance for a motorcycle. The problem wasn’t so obvious when the medical appointments were local, but when great distances were involved, the predicament became acute. Illustrating this, Dr. Kisekka said, “I was once working as a district medical officer, and my responsibilities required that I travel over a large area. The farthest dispensary to look after was 62 miles away. Because of time and supplies I wasn’t able to cover all that distance on a motorcycle and still meet my other responsibilities. So I bought a secondhand car to do my inspection. But the medical administrators refused to give me any allowance. They refused in spite of the fact that I was doing the same work of a White doctor who had had a car in that district before me.”

Dr. Kisekka tried to reason with the officer, but to no avail. “They wouldn’t give the same courtesies to do my work because I was a Black man. I couldn’t understand that. They had a grading system. I was graded as an African, and there was nothing I could do.”

Though Dr. Kisekka often tried to bring about reform in the medical practices of the colonial administration, he said his efforts accomplished little. During
the period from 1939 to 1953, Dr. Kisekka played a strategic leadership role in fighting for the rights of African physicians and the recognition of their professional competence.

Well respected in the medical community, in 1945 Dr. Kisekka was the first Ugandan African doctor to be gazetted (listed in official government medical journal) as a district medical officer. Those colonial days were a period of great frustration, and some African doctors resorted to drinking. But Dr. Kisekka, a teetotaler, refused either to drink or give up. He was determined to take every opportunity to use moral persuasion, politics, and speeches to resist the unjust system.

In his pamphlet *A Ugandan in Exile*, Dr. Kisekka said: "My interest [in politics] was roused largely because I resented injustice among some of our colonial masters. I resented the unfair domination, as well as the attitude of colonial civil servants. Whatever their rank or intellectual capacity, they considered themselves superior to any Black person. However foolish their opinions, they considered them to be superior to that of any African’s, however sound and reasonable."

A few victories were won. At the beginning of the Second World War (1939), during Dr. Kisekka’s first year of civil service, the government authorities ordered Uganda’s African physicians to join the war. Dr. Kisekka led the group that insisted that if they served, they be given rank equal to the White physicians who served. "Since South African Whites had been involved in fighting, the British Ugandan government had no alternative but to give up the idea of recruiting African Ugandan physicians."

In 1948 conditions reached a boiling point when an administrator unjustly penalized Dr. Kisekka over a
medical procedure. Dr. Kisekka voiced his disagree-
ment. They clashed over the issue, and Dr. Kisekka
tendered his resignation. During the time that followed,
he became inspired with the Kenyan’s struggle for
independence. With the help of a medical student, for a
brief time, he printed a weekly newspaper. It was called
the Uganda Pilot and explored issues of freedom, re-
ported news of the Mau Mau resistance, and updates on
the Kenyan struggle for independence.

Shortly thereafter, the medical officials noted their
error in the dispute and advised Dr. Kisekka of their
need for his services. The Ministry of Health made a
generous offer—if he returned, he could choose the
hospital that he wished to serve in. “This recall, he said,
“vindicated my professional point of view.” He chose to
work in Bombo Hospital near Kampala, and two years
later he was transferred to Bubulo Hospital, Mbale District.

Notwithstanding, circumstances deteriorated. Be-
cause of a shortage of qualified surgeons, the work load
increased to unbearable limits. Inequities and discrimi-
nation resulted in a lack of support. Soon Dr. Kisekka
was expected to cover more than one hospital, and it
reached a point at which he could no longer cope
physically. He had to make a decision. His efforts to
improve the situation had failed. Professionally he felt
that he had to resign. To allow conditions to remain as
they were would put patients’ lives in jeopardy.

In January 1953 he tendered his resignation, never
to work in the government medical services again. The
next year he was fortunate to be granted a license for
private practice, and thereafter he conducted his med-
ical practice and business ventures independently.
Involved in a number of private entrepreneurial ventures, Dr. Kisekka utilized the knowledge acquired from the business courses taken by correspondence. At various times he had either invested in or was operating a bus company, a fishing company, a farming association, a dairy cooperative, an insurance company, and a transportation cooperative.

A number of companies with which he was associated collapsed. Through a careful review of each situation, he traced the cause to one or more of three reasons: first, financial mismanagement and lack of know-how; second, lack of necessary discipline; and third, the opposition of colonial authorities to African-owned businesses. Most ministers of state in the Third World favored the continuation of foreign companies.

He believed that, given the opportunity, Africans could operate their own businesses. So in 1965 he began to operate a family dairy farm, K. B. Farms, Ltd. As a producer, he supplied a prominent hospital, an orphanage, and other businesses with fresh, clean, milk for more than 15 years at less than market price.

His business acumen increasing, Dr. Kisekka soon became involved in a number of successful businesses and medical-help programs for the general public as well as for orphans and other disadvantaged groups. Often providing funds and free services to the needy, Dr. Kisekka considered that his business skills had been granted to him to provide a service for his community and to prove that “it could be done by Africans.”

He developed what he refers to as CES, an acronym based on three elements of his business philosophy: “One must have first commitment to an idea or objective. But he must also have the necessary economic backing to make it viable and functioning. But
no program or business should be supported and al-
lowed unless it has the social aim of ultimately being for
the good of others."

According to Dr. Kisekka, one of the main goals of
social involvement and true politics is to "protect the
individual's right to be committed, to exercise eco-

demic freedom, and to facilitate the safety and well-
being of society. Every individual is a unique creation
and therefore precious. An individual must be allowed
to effect change, to determine his own destiny. Care for
the individual, and society will look after itself."

Through cooperation in business ventures, he has
come to respect the varied contributions of different
races and to prize the lessons he has learned from them.
Asians, Indians, Europeans, Blacks—each group has its
own particular strengths and gifts. From each he has
sought to internalize those strengths.

Dr. Kisekka has developed some close friendships
among Asians, and mutual respect was built up. As a
result of his partnership with the Asians in the insurance
business, when Amin expelled them from Uganda in
1972, he was able to carry on the business. "When the
Asians were sent out of the country, I was the only
African director of the East African General Insurance
Company. I staged a drama and made it impossible for
Amin's government to confiscate the company."

In the home, on the job, within social circles, Dr.
Kisekka believes that any success he has experienced is
the result of self-discipline, self-reliance, commitment,
determination, and most important, trust in God. A man
must stand and speak for what he believes. Like Booker
T. Washington said, people must "cast down their
buckets where they are!"
Thoughts on Medicine

- The strength of a nation depends on the health of its people. And good health in its most basic form depends on ample food, pure water, adequate shelter, and health education.

- More emphasis should be placed on preventive rather than curative medicine. A balance must be achieved, especially in developing countries.

- Prevention is better than cure. And in terms of national expenditure, it is cheaper to prevent frequent occurrences and outbreaks of fatal diseases than it is to curb epidemics or pandemics.

- Doctors, like other professionals, have an obligation to support freedom and democracy whenever and wherever they can.

- A nation must have a government that is committed to the health and welfare of its citizens.

- Physicians everywhere have a moral obligation to fight the scourges of poverty, disease, and ignorance everywhere.

- Many health problems can be directly traced to poor economic conditions. This condition must be remedied to make medicine effective.

- One doctor’s lack of integrity impacts on the credibility of all doctors everywhere.

- The scourge today is that more and more doctors are coming to worship money as an end in itself.

- Every doctor must preserve time to study, to do research, and to have leisure time. This will ensure continual growth.

- There is a need to revive the sacrificial practice of medicine that once operated in the rural areas.

- To be conscious of right doing is the best medicine for diseased bodies and minds.

S. Kisekka