

STOP PRESS: *Special Appeal*



Hospice Care Kenya



UK Registered Charity No. 1001709

Special Appeal edition: what's happening at the hospices in Kenya?

Spring 2008

Many of our supporters will have been following reports of the post-election violence in Kenya with considerable concern, both for the fate of the hospices and welfare of their patients and staff. Several of you have written individually to voice these concerns and ask for news. HCK and its trustees have been in touch with the hospices and KEHPCA (The Kenya Hospices and Palliative Care Association) during the crisis. One trustee has just returned from a private visit to Nairobi and another will leave shortly for Kenya and take the opportunity to visit several of the hospices there.

Reports in the media suggest that the political situation may be beginning to improve a little, following the power-sharing deal brokered by Kofi Annan. The situation for displaced refugees who have suffered or fled from violence nevertheless continues at crisis levels and, sadly, may take years to resolve.

In a report 'Charities Overwhelmed by Kenya Refugees' on 16 February, quoting sources from OCHA, the Kenyan Red Cross and USAID, *The Times* quantified the scale of the crisis as follows:

Desperate plight of displaced

1,000 people killed in political violence since 27 December elections.

600,000 people have been displaced.

50 per cent of these are in camps.

347 settlement camps for refugees have been set up.

12,000 displaced Kenyans have fled into Uganda.

45 per cent of the registered refugees in Ugandan camps are children.

Source: The Times.

The hospices supported by HCK through your donations inevitably have been affected by this desperate situation too and, as their reports here show, most have had to divert valuable resources into looking after victims of violence and those who have lost their homes. At its meeting on 29 February HCK made several special grants to help with those hospices most badly affected, including Kisumu for the project described overleaf, but we urgently need to send more funds to help the hospices to deal with the present crisis as well as their normal work. We appreciate the support that you already give, but ask you to respond to this special appeal if you can. All donations will be much appreciated, as always.

The situation in Kenya

To support this appeal we are sending you this brief 'situation report' on the hospices in Kenya and how their staff and patients are being affected by the crisis. You will see from the news from hospices (and others) received so far that hospices are having to deal with the needs of victims of violence and refugees or displaced persons alongside their normal work for the terminally ill. In addition, staff and patients often have concerns for their own relatives to deal with too.

KEHPCA

Dr Zipporah Ali of KEHPCA has reported to the Press and HCK that hospices and other palliative care providers have not been immune to the impact of the post election crisis:

'Many patients have been cut off from services designed to reduce the suffering of the terminally ill. Concern is rising over the fate of hospice patients, many of whom require regular home visits and pain-relief medication to manage the terminal stages of cancer or HIV/AIDS.'

Dr Ali told the Africa Science News Service that the turn-out of patients at clinics had been drastically reduced as a result of the continued insecurity.

Nairobi

At the Nairobi Hospice, CEO Dr Brigid Sirengo reported in February that:

'...outpatient attendance reduced drastically in early January 2008, although the numbers are now slowly picking up. The uncertainty over a lasting political solution leaves no doubt that normalcy will take time to return.'

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Nairobi Hospice runs a day-care service every Thursday. But the turn-out is still very low, despite the programme's [previous] popularity with patients and their families. Some of the patients who manage to come to centres are already wasting away because they are not eating properly, while others break down emotionally when they narrate what they have

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been through and seen others go through. They talk of the pain they have suffered by not being able to access their drugs in time. Home visits to patients have been disrupted. The situation is compounded by the displacement of large sections of the population into camps for internally displaced persons.

In addition, most of the patients in Nairobi live in slum areas where there is a heightened sense of insecurity, further frustrating the home-visit programmes.'

HCK trustee Keith Wood visited Kenya in February and wrote to HCK on 21 February:

'Came back from Nairobi last night. Nairobi Hospice is reasonably back to normal although they are not doing home visits in Kibera, parts of Eastleigh, Karogocho and Mathare. Patients/relatives in these areas have all been contacted and are coming into the Hospice in virtually all cases.

Because the Hospice was closed over Christmas/New Year patients had been given a month's supply of drugs so effectively reducing the problems during the disturbances.

I visited Kibera and did not feel threatened in any way but locals are concerned about the "thugs" who have jumped on the band wagon and are causing pockets of disturbances. They are also wary of speaking in tongues other than Swahili and English. However, whilst there is relative calm there is an underlying fear that troubles could break out again. The wananchi seem to have lost faith with the politicians and just want to get on with their lives.'

Eldoret

Paul Asige, in charge of the Eldoret Hospice, reported to the Africa Science News Service that he was concerned about two of his patients who cannot be traced after they were displaced by the violence. 'Both must be suffering if they are unable to receive their usual medications, which include morphine for pain. Hospices exist to minimise the suffering of patients physically, emotionally, psychologically, spiritually and also financially, as most patients receive free care,' he said.

Coast (Mombasa)

Hospice Director Faustin Mgendi wrote to HCK Trustee Dr Sally Hull highlighting the effect on the sharp downturn (70%) in the tourist trade will have on local fundraising for the Coast and other hospices.

Kisumu

Dr Julius Onyango, CEO of the Kisumu Hospice, wrote on 18 February: 'I wish to break the silence after almost two months and express our appreciation for the concern you all have shown

during the hard and deadly political situation we have had in Kenya.

I am glad to say that all our staff and Board Members and also our patients have gone through the crisis without personal injuries. Some have had deaths in the family or destruction of their properties in various parts of the country.

The situation has brought us a great number of internally-displaced people, among who are widows, widowers and orphans, due to post-election violence. They have been displaced from towns and farms where they have lived and worked peacefully for as many as 40 years.

Kisumu Hospice is the only Palliative Care initiator and provider in the Province, and this situation has created for us much more urgent needs both in Kisumu City, where all the returning displaced persons are received before being transported to their various locations of origin, and at their homes after [they reach] there.

The people are brought in with different degrees of trauma, including sickness e.g. HIV-AIDS, cancers, depressions, malaria, TB, etc.. Some are brought with actual direct injuries from the violence like severe cuts and burns. The work that begins here is counselling - trauma, spiritual and general. Our volunteer counsellor is involved daily.

Those requiring admission to various hospitals in the city are referred to the Hospital; the Kisumu Hospice ambulance is on stand-by day and night. We have supplied gloves, dressing materials and disinfectants on a regular basis.

The biggest concern is the position after transporting them home. These people require continuous counselling and rehabilitation before they can adapt especially the children and those with various diseases and other traumas as having lost their loved ones, and not knowing what the future holds for them in their own Country.

Kisumu Hospice [...] is organizing training workshops in various districts, especially in the areas where we have already trained palliative care nurses, to continue the work at home levels. The first course will be in Bondo from 25-27 March, for 50 participants.

Courses will be continued according to the districts having most victims as per records from the receiving centres in Kisumu. The hospice centre staff and volunteers have carried out their duties without discrimination as our constitution says; we are non-partisan, non-denominational and non-racial.'

Dr Onyango finished:

'NB: The light is still dim at the end of the tunnel.'

Please help HCK to help the hospices.