



Chief Executive of Nairobi Hospice receives Honorary Doctorate from Oxford Brookes University

In September 2006, Brigid Sirengo was awarded an honorary doctorate by Oxford Brookes University in recognition of her work in Palliative Care in Kenya.

Brigid's work has involved not only being Chief Executive of the Nairobi Hospice for many years, but also establishing with Oxford Brookes University the diploma course in palliative care. This is run over 14 months by distance learning, with three one week long residential study blocks taught in Nairobi. It has attracted students from other African countries besides Kenya, and done much to raise the profile of palliative care within Kenya. In 2008, the franchise for the course will be transferred to Nairobi, and Dr Sirengo is currently working with the two universities on the arrangements for this.

Brigid's award was conferred at a ceremony in Oxford in October 2006, as shown in the picture above. Brigid says, 'The Vice Chancellor explained that in conferring these awards, the University seeks to honour those who serve as role models for the present

generation of students. Graduation Day, Friday, 15th September 2006, was a very special day for me. It was a gratifying and yet such a humbling experience.'

All those who know Brigid will wish to join HCK in congratulating her on receiving this exceptional honour.

Vehicle for Nyahururu Hospice

In May this year Nyahururu Hospice, which operates as a satellite of the hospice at Nyeri, took delivery of this splendid vehicle paid for by donors to Hospice Care Kenya. Despite its shiny appearance, the 4WD truck is in fact second-hand, which reduced the price considerably. It will make a tremendous difference to the work of hospice staff in this particularly remote area, as medical teams will now be able to make home visits more frequently and easily, regardless of road and weather conditions.



HCK builds links with Kijabe Hospice and planned Nakuru Hospice

Nakuru

Can you imagine travelling 150 kms to reach a hospice – the nearest place able to dispense the essential, pain-killing drugs for your terminal cancer? And when travel becomes impossible, relying on your daughter to make the journey, for without these drugs, the pain is intolerable? And what about the cost of the journey?

Such was the plight of Elizabeth Ndungu, when her father became ill with cancer. The family lives in Nakuru, about 150 kms from Nairobi.

Elizabeth decided to try and improve the situation for others – it was too late for her father. And, being a lady of determination, she is making things happen.

First, she gained the co-operation and support of the doctor who had treated her father, in order to start a palliative care facility in Nakuru.

Next, she contacted Nairobi Hospice, which generously agreed to send a small team to Nakuru to carry out a 4-day course in basic palliative care. 42 nurses attended this course!

Then, she convened a meeting of people interested in the project and a committee was established. The provincial medical officer has visited Nakuru, and fully supports the scheme, as does the medical superintendent at Nakuru Hospital, who has also indicated a possible building within the hospital where the palliative care facility might be housed.

Currently, Elizabeth is working on the next stage – how the hospice will operate – its funding, activities, management, sustainability, etc.. There is much hard work to be done, but with such commitment and determination, it *will* happen!

HCK has offered to support the start up, and will then consider further help as needs arise.

It's an exciting time at Nakuru - watch this space!

Kijabe

Kijabe Hospital is a well-established Mission Hospital, situated in the Rift Valley area of Kenya.

Palliative care was initiated there in 2003, with one interested nurse. Since then it has developed further and there are now three nurses, who have just completed the diploma in palliative care course at Nairobi Hospice.

However, there is no separate accommodation or facilities for this work and the number of referrals has risen to 250 - 300 per year.

So, once again, a small team at Kijabe has been dreaming – and making the dreams happen.

First, they are commencing a training programme for health professionals which starts in July 2007, supported financially by HCK. This programme will be repeated in the Autumn, and taken further afield to the districts around Kijabe.

The team is also trying to locate a suitable building where patients with terminal illnesses can be seen, counselled, prescribed medication, and where their relatives will be able to receive support and help.

A day care facility is also part of the plan, a place where patients can meet and encourage each other, have a good meal, and receive medical and nursing help.

It's an ambitious dream, but it's already beginning to happen; and with Kenyan zeal and UK commitment, through HCK and its friends and supporters, it will succeed!

2nd APCA Conference, Nairobi

The Second African Palliative Care Association Conference, *Palliative Care in Africa: Making it Real*, will take place in Nairobi in September 2007.

The First APCA conference, held in Tanzania in 2004, was attended by delegates from over 22 countries, and it is hoped that this year's conference will build upon the success of the first one. As well as plenary sessions with addresses from leading specialists, there will be workshops looking at different models of clinical provision, the particular needs of terminally-ill children and education and training, with models of best practice, and advocacy for policy change and drug availability.

HCK's Chair, Liz Salmon, will attend the conference and combine this with visits to some of the hospices in Kenya that HCK helps through the generosity of its donors and friends. HCK will also supporting attendance of 23 staff from the hospices – both those we now support and others.

There is no doubt that conferences of this quality are both encouraging and challenging, and it is particularly important that the people who are delivering the service should meet to share experiences and expertise and hear of new developments.

News from the conference will appear in the Winter Newsletter.



Trek in the UK or climb Mount Kenya for HCK!

Following the successful 'Three Peaks' treks in recent years, HCK Trustee Gwen Cottrell (left) will be organising a group trek in another part of the UK during 2008 and a sponsored climb of Mount Kenya in 2009. If you are

interested in taking part in one or both of these events to raise funds for HCK, please e-mail Gwen at gwen.cottrell@member.riba.org to receive further details when they are available.

News from Meru Hospice

The following is a summary recently received from Dr Killingo M. Bactrin, Chief Executive at Meru Hospice. It seemed to encapsulate very well the day-to-day work of a hospice in Kenya and is reproduced below to help give readers of this newsletter an authentic picture of the work that HCK supports. As can be seen, this work includes not only local fundraising and promotion of the need for the care for the dying and prevention of HIV/AIDS, but also motivating local communities to help patients in very practical ways. It can also involve the provision of care for the victims of war or conflict, and their families, as well as the essential supply of drugs and treatment to patients.

Dr Killingo Bactrin's report: **Patient Care**

In 2006 the patient load was the highest since the start of the hospice, with stomach cancer being the most treated condition among the patients, but treatment for HIV and AIDS also common.



'Celebrate Life' event 2006

Meru's annual 'Celebrate Life' event was held on 9 December 2006. A procession of over 30 groups recruited by the Hospice brought Meru to a standstill and in all the event attracted over 500 participants. The crowd, dressed in hospice T-shirts and carrying hospice flags, marched through Meru to the hospice premises two kilometres away, singing African songs aimed to raise awareness of cancer, HIV and AIDS. Later, speeches were given at the hospice and a dinner held in the town that attracted almost 100 participants. Despite heavy rains, the events attracted strong support from local dignitaries, including a regional MP and the local business community.

Easter Gift event 2007

A leading supermarket in Meru provided an unusual opportunity to help hospice staff to raise awareness of the need to care for the terminally ill in the district. Hospice staff and volunteers spent their Easter holidays at the supermarket, talking to shoppers and distributing flyers with relevant messages in order to persuade them to donate items for the use of patients. The large amount of foodstuffs, toiletries and cash donations received made a big difference in the lives of the patients, whose day-to-day needs for even basic foods and medicines is always acute.

Other publicity and awareness creation

In other ways the Meru Hospice team has been creating awareness of the hospice and its patient needs within the district. Talks have been given to church groups and other institutions and contact made with the media, which has been very instrumental in creating awareness about the hospice - one radio station committing to host a 'Stop the Pain' awareness and education program which attracted an enormous response from the public. As radio is broadcast in areas that the hospice team cannot always access, members of the public have come in to seek the hospice's services after hearing the broadcasts.

Two case studies:

'The power of community mobilization'

The hospice team was honoured to be part of a life-changing event. A patient was living in terrible conditions: her right breast was horribly damaged by cancer and she writhed in pain with any attempted movement. Her muddy, tiny, house was shared with her husband and four children and had large holes in the walls. She often lay on her back on a bed without any mattress and the pain from the hardwood base was plain for all to see. The pain on her body was evident not only on her face, but in those of her family. Her eldest daughter had dropped out of school to care for her mother. Her husband was a casual worker. During one of their visits, the hospice team found out that to enable the husband to travel to the hospice to collect drugs for her, the family had to miss a meal to save for the cost of his transport.

This family's story moved the hospice staff to mobilise the local community to meet the family's needs. Villagers came together to build a bigger house for them. As the older women sang songs of encouragement, the younger ones plastered the walls

with mud and the men dug up more soil to form building materials. The hospice team joined in this rare and touching activity and by the end of the day one of the greatest needs of that family had been met. The patient did not live to see the new house, but the young children she left behind are more comfortable in their new home. The community members promised to continue in the same spirit, caring for the little children who were left without a mother and the husband who is now both the mother and the father.



'So as the graves lay fresh on the rich Meru soil, the question always on our minds is "Did we stop the pain?"'

'Relief for a displaced mother'

The challenging nature of hospice work is illustrated in the care offered to a 42-year-old mother of three who was diagnosed with cancer of the breast in 2004. She was referred to Meru Hospice by compassionate catholic sisters from Kiirua. She was made homeless and displaced after arsonists burned down her house in 1996, during border clashes. She also lost all her other belongings, including clothes and a bounty harvest of millet and maize.

Her husband was killed during the skirmishes. The trauma of losing her property and her husband made her migrate to Kiirua, 60 Kms away, where she rented a timber house, which she paid for by working as a casual labourer. She has three children, a son of 20 and other children aged 14 and eight. The younger ones are benefiting from free primary education offered by the government, but face challenges such as lack of uniform and food, and an uncertain future due to their mother's illness.

The hospice's intervention has been broad-based, covering provision of basic needs such as clothing, food and management of symptoms and pain, as well as offering psycho-social support. The whereabouts of her relatives is being researched and support networks

sought in the community where she lives, including from the church and provincial administration.

Farewell to Kate

HCK's Bristol Office said goodbye at the end of December to Kate Jones, its Trust Manager for more than five years. Kate will be well-known to many of our readers and supporters as well as to hospice staff in Kenya.

The new Office Manager is Patrick Villa (right), who has lived in Kenya and later worked for the British Council, 1972 – 1997, and the University of Bristol. Contact him at hck248@btinternet.com.



New ways to donate to Hospice Care Kenya

Supporters can now donate to HCK online via the web and CAF Bank and pay with a **credit or debit card**. There is an option for UK taxpayers to add Gift Aid to a donation. The short-cut <http://tinyurl.com/2yr3ra> will take donors directly to a CAF Bank webpage where options to donate to HCK are available. Or visit www.hospicecarekenya.com/Donating.html (where a number of other options to donate are also described), and select the option: 'Click here for the link to CAF.'

Tiverton Coffee Morning

ANNUAL COFFEE MORNING



MORE THAN EVER - KENYANS NEED OUR HELP

Do please come to our 11th
Annual Coffee Morning
on
Saturday 6th October 2007, from 10.30 am,
at 'Salama', 15, Blundell's Avenue, Tiverton, Devon
(Tel 01884 254744).

Gordon & Anne Davies are raising essential funds for Hospice Care Kenya. Since 1990 seven hospices have been registered and opened throughout Kenya, but so much more remains to be done.

We can all make a difference – so please help!

SALE OF PRODUCE, JAMS & PLANTS ~ BRING & BUY ~ RAFFLE