

Equipment for Mission Hospital at Chikuni in Zambia

Note from AFAP's Africa Program Manager, David Brett, and his wife Margaret

You've guessed it, we're after your support

To come straight to the point, we're seeking your financial support to fund the cost of sending a container of hospital equipment and medical supplies to a remote mission hospital in Zambia.

Over the next few pages we've described the hospital and its work, and the connections we have with it. We also explain what equipment we want to send, and where it comes from.

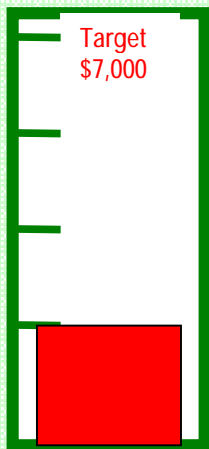
We're trying to raise \$7,000, which is the cost of shipping the container from Sydney to Dar Es Salaam in Tanzania and then by road to Zambia. All other costs and expenses are covered by other donors.

AFAP has been shipping containers of hospital equipment around the world for more than a decade through its Medical Supplies and Services projects, so it knows what it's doing.

For Australian tax payers, contributions over \$2.00 are tax deductible through AFAP's Overseas Aid Program. They can be made by cheque or by credit card, or you can use AFAP's secure on-line donation form at www.afap.org

See back page for more details.

(And – once we get the funds to send it – if you want to come and help pack the container, you'd be most welcome.)



Pledged to date: \$1,750

Chikuni Parish – 10,000 sq km; 25,000 people

The Chikuni Parish – about half-way between Lusaka and the Victoria Falls – is in the south of Zambia and covers three poor rural districts over an area of 10,000 sq km. It's home to about 25,000 Batonga people – mainly subsistence farmers and their families.

When there's not a drought, most rain in the region falls between November and March and is usually just enough to grow a crop of maize – the staple crop. For the rest of the year, water is scarce and women walk several km to fetch enough for cooking and washing.

Poverty, compounded by an HIV prevalence rate amongst adults of about 17%, is the big challenge for the parish. Chikuni's three districts are poorly serviced by government schools and health facilities. Teachers and health professionals employed by the government do their best but are poorly paid and work in schools and medical centres which are not well resourced. In short, demand for their services overwhelms the capacity of the local institutions.

Health and education services provided by the Chikuni Mission are an essential complement to those provided by the State. In rural Zambia 80% of the health services are provided by mission hospitals or similar institutions.

Established a hundred years ago, the Jesuit Mission now has a hospital, an HIV/AIDS clinic and counselling centre, a secondary school and a teacher's training college. The parish has 21 outstations, which provide the focal points for community activities.

It also has a fantastic community radio, which was built with funds donated by an Australian woman. The radio provides valuable information on issues such as health and agriculture as well as supporting local culture in music and drama.

The radio runs at a small profit by selling air time and original CDs. See www.chikuniradio.org for more information.

ural on the wall of the Batonga useum at Chikuni, illustrates that, fore European colonisation, people ed in complex family groups, farming id hunting.



About the Chikuni Hospital

The Sisters of Charity established a health centre at Chikuni in 1948. The Order still runs the institution, which has grown to a 97-bed hospital staffed by 18 nurses, 3 clinical officers, and 17 support staff. It has one volunteer doctor, Claudia Carracciolo.

Since its inception, the health centre has been offering preventive and curative care. Each year, on average, there are 2,300 admissions and 12,500 patients seek treatment at outpatients.

The hospital offers its services to all, regardless of faith. And, as the sign outside the hospital declares, offers care to people regardless of their status. (Which, in the Chikuni context, means a person's HIV status.)

The hospital is registered by the Zambian Government which provides base-level funding but the bulk of its running costs come from private donations.

Home Based Care activities were started by the hospital to care for the large numbers of people who are HIV positive – some 17% of adults. But, since 2000, Home Based Care (HBC) is now run as a separate program coordinated by a small nursing team of two and a large group of volunteers.

In collaboration with the HBC Program, the hospital is providing medical care and anti-retroviral therapy for over 400 HIV/AIDS patients.

When we visited in June, a new operating theatre was nearing completion. It will enable some surgical procedures to be done at Chikuni rather than transfer patients to the District hospital at Monze, some 50km away. (The container will include some equipment for the new theatre.)

[Continued on back page]

Home Based Care Program

With support from the Australian Agency for International Development (AusAID) AFAP has been working with the Chikuni mission to implement a Home Based Care Program since 2000.

By providing additional support in the homes of patients, volunteer care givers take some of the pressure off Chikuni hospital. And home visits by one of the two HBC nurses means that relatives don't have to transport patients long distances to receive professional health care.

The Program has had remarkable success in reducing the level of stigma and discrimination associated with people who are HIV positive. Its use of local community radio, drama, concerts, film shows and workshops is recognised throughout the region as a highly successful model.

One successful strategy has been the formation of PALS groups (Positive and Living Squads) whose members give each other mutual support.

PALS self-help groups

Through its African Women's Program, AFAP is also supporting Chikuni HBC provide training and "seed capital" for groups of women affected by HIV and AIDS to set up small businesses, such as producing tie-and-dye material for sale in the local markets (see photo opposite), keeping goats, or growing vegetables and fruit trees in communal "kitchen gardens".

Although it has limited funds, AFAP has also provided some money for safe water points.

Having clean water close to your home is important for all rural people. But it's especially important for children and for people who are vulnerable to opportunistic infections because of a lowered immune system.

Margaret visited Chikuni in June this year and met the Hospital staff, the HBC team and some of the women's groups. She, like David, can tell you more about the work at Chikuni.



Photos: hospital above, HBC Program below.



AFAP's Medical Supplies and Services (MSS)

HOW MSS STARTED

A group of doctors working as volunteers for AFAP established MSS over a decade ago. They saw MSS as a necessary and critical supplement to AFAP's development programs. Since that time about 50 containers have been sent around the world.

HOW IT WORKS

MSS uses the following guidelines:

Australian hospitals and other organisations donate equipment which they no longer need. It is taken to AFAP's warehouse in western Sydney, where it is assessed and catalogued.

AFAP volunteers test and refurbish mechanical items such as beds and wheelchairs. Volunteer health professionals check that no supplies have passed their "use by" dates.

Requests are received from participating hospitals and clinics in countries where AFAP has a local partner and with whom it has been implementing development programs.

Funding for shipments is provided by individuals and organisations, with volunteers and staff overseeing the final packing and dispatch of containers

When the container arrives overseas, AFAP's local partners clear it through customs and ensure that the equipment and supplies reach the hospital or clinic. And the partners ensure that training is provided for any equipment which needs trained staff to operate and maintain.

GUIDELINES FOR SELECTING THE HEALTH INSTITUTIONS

Health institutions must be in need, due to factors that can include remoteness, failed Government health systems, or recent civil or natural disasters.

Institutions must be located in countries where AFAP has local partners who are implementing development programs and who can facilitate the disbursement of equipment and provide support for training if necessary.

Health institutions which receive MSS equipment must provide services to all members of the public free of any restrictions.

BENEFITS

Overseas

Hospitals and clinics get to use a better standard of equipment than they can afford to buy.

The equipment contributes to an improved quality of health care for local communities.

With better equipped hospitals, local medical staff are able to use more of the skills they gained during their professional training.

In Australia

Recycling perfectly good medical equipment from Australian hospitals for use in developing countries means that the equipment is not just "thrown away". It also reduces the negative environmental impact of dumping the equipment in Australian landfills.

Much of the surplus equipment such as hydraulically operated beds are only a few years old and cost more than \$10,000 to buy new. But there's no second-hand market for them in Australia.

Across all Australian States, near-new hydraulically operated beds are being replaced by electrically operated beds. (What it is to be a wealthy country!) Hospitals have to dump the beds (at a cost) or find an organisation like AFAP who can help to make good use of them.

FUNDING FOR MSS

AFAP is a small membership NGO, which relies on contributions from the general public to fund its MSS activities. At the moment, a generous individual is covering the warehouse rent and related costs.

But AFAP has no pool of money to pay for the freight of containers. To pay the freight costs, AFAP relies on the generosity of individuals and organisations like service clubs.

Equipment for Chikuni will include some adjustable beds, inspection trolleys, lights and sterilising equipment for the new operating theatre; boxes of gloves, syringes, and gowns; children's and adult's wheelchairs; shower chairs; and more... [Photos from AFAP warehouse]





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Wanted: nurse ... doctor...

When we were talking with Dr Claudia Carracciolo she asked us whether we knew anyone who could be interested in a short voluntary assignment at Chikuni Mission Hospital. Do you know someone?

Claudia has been working at Chikuni Hospital for three years. She is not paid but is provided with accommodation and meals. She also receives a return air ticket to her native Italy each year. When she's on her annual leave, there's no doctor at the hospital.

Perhaps you know of a doctor or nurse who is looking for a different sort of challenge? In addition to a doctor, Claudia said that she'd particularly value a nurse who has theatre experience and who is interested in training local nurses on theatre procedures.

Volunteers would need to pay their own air fare to Zambia but, once there, Chikuni hospital will provide free accommodation and meals. Length of stay and timing are flexible. Contact one of us if you want more information.

Chikuni Hospital (continued from page 2)

The hospital has a safe and reliable water supply from a bore hole. Electricity from Zambia's grid is not reliable but the hospital has a back-up generator for emergencies.

Over the years, Chikuni Mission has grown to become like a small town. Yes, it's remote but it's inspirational to visit and experience the commitment and dedication of the people living and working there.



Monica Nsofu – Registered nurse and HBC Coordinator

Helping to pack the container

If you want to help pack the container, then drop us a line at our email address. We'll let you know the date the container will be packed and the exact location of the AFAP warehouse in Western Sydney.

Donations to fund container

If the total donations exceed the amount needed to send the container, then AFAP will use the excess funds to support other development projects in Chikuni, such as the provision of safe water for vulnerable children and orphans.

Making a tax deductible donation*

How to contribute to improved health care at Chikuni Hospital and its HBC Program, Zambia
Complete your details, tear off this section and mail it to: AFAP, PO Box 12, Crows Nest, NSW 1585

I would like to make a donation to help fund the cost of sending a container of medical equipment to Chikuni Mission Hospital, Zambia. I understand that the equipment will be used as part of a longer term development program which is helping to build the capacity of Chikuni's health care services.

Name:.....

Address:

Total Amount Enclosed \$:.....

Please find enclosed cheque/money order payable to AFAP – Chikuni MSS

OR Please debit my credit card:

Visa Card

Master Card

Bank Card

Expiry date:.....

Credit Card Number:

Name on Credit Card:

Signature:

Date:

OR Go to www.afap.org and make an on-line donation using a credit card.

(Write: "Chikuni Medical Support" where the form asks for the "Program to donate to").

OR Donate by phone on toll-free number: 1800 007 308

Thank you for your support.

* Donations of \$2.00 or more are tax deductible