

Vicky Lavy highlights news from four CMF members



CHANGING ATTITUDES BRINGING HEALING CHANGING LIVES

Nepal: fistula camps



Watch the CMF video of Shirley Heywood transforming lives in Nepal online at cmf.org.uk/media

Shirley Heywood went to medical school because she felt called to work as a doctor in Nepal. She arrived there nine years ago, via Liverpool, London, Pakistan and Papua New Guinea. She works with International Nepal Fellowship (INF) in district hospitals to support and train local surgeons, as well as running camps to treat women with obstetric fistula. She writes:

Thank you for your prayers for the fistula camp this year. We saw many answers to prayer. Patients came in numbers we could manage and roads stayed open for them to come and return home. We had a wonderful team of nurses and the tent was a place of peace and fellowship as the women became friends and encouraged each other. God gave strength to keep going and wisdom to manage difficulties. 52 patients attended from 17 different districts. Some were new patients; some friends from last year who came for a check-up or needing further surgery.

One of the first to arrive was Khinti. She has had a very hard life; she married and had her first baby

at 15, labouring for three days. The baby was still-born and she was left with a fistula. Her husband took a second wife after she had delivered three more babies born too early to survive. He has children now, but Khinti lives with her in-laws, sleeping in an outhouse and caring for the goats. Her mother-in-law opposed her coming to the camp last year but a health worker brought her.

The fistula is healed but her life isn't much better. She lost her place and respect in the family 13 years ago when she failed to produce a living child and became incontinent. She is still the family servant, sent back to care for the goats only days after she returned following the operation. Yet she is grateful and she brought a gift for me, a chicken, still half grown. I remember Khinti when I look out over my back garden and watch my little red hen scratching around. I pray that one day there will be fruit from our efforts to raise awareness of obstetric fistula, and no more women will suffer as Khinti has, losing her babies, her husband, her health, her place in society, her dignity and self-respect.

Somaliland: new arrival



Becky Hammond is a surgical trainee from Norwich. She did the CMF Developing Health Course this summer, during which she signed up to work with Medair, a Christian humanitarian organisation. She has just arrived in Somaliland for 18 months where she will be the manager of a nutrition project in Burao. She writes:

Working in Africa is a dream I have held since the age of six when my heart was touched by images of the 1984 famine in Ethiopia, which shook the world at the time. Sadly, similar tragedies exist today and so

I find now the dream of a six year old becoming a reality.

Thanks to the Developing Health Course, I arrived in Somaliland with a good social network. On my second evening I went out for dinner with a friend from the course. Yesterday I had lunch with two others. The teaching on the course was great, but I am even more grateful for the friendships I formed. To find yourself in a country that most people have never heard of and to have friends here is absolutely amazing. We all seem to be settling in well and slowly adjusting to the heat and dust. And there is so much dust.

Mozambique: latrines and paediatrics



Sam Dunnet trained in general practice but has worked overseas for several years in a number of African countries. She is now in Mozambique, managing community health programmes in Zambesia province for Save the Children Fund. As well as this, she is setting up a health project with her church there to improve the health situation in the local area and working in the provincial hospital at weekends. Her latest newsletter describes some of the challenges:

The health situation in the area is dire with very poor sanitation and a high incidence of disease. As far as I know, there is not a single latrine in the entire area so people go in the bush or the mangrove swamp. Many families do not have 'bathrooms' – usually just an open structure with four straw-covered walls where you can have a bucket bath – so they have to wait until it's dark. Washing up is done squatting on the ground using ash and rice husks or a piece of sacking and occasionally washing powder; then the dishes are left to dry on the ground with the chickens, goats and dogs all around.

Our first step was to train people from the church in hygiene and sanitation so they could work to change attitudes and encourage healthy habits. Nine

volunteers were trained and they are just starting their activities. A major challenge is keeping them motivated since they are not receiving any payment. We had a graduation ceremony at church to show that we value their work in the community.

CMF has over 150 members living and working overseas. They are in a variety of settings and have many different roles

I'm thoroughly enjoying doing clinical work in the hospital on Saturdays. The paediatric ward is large with about 60 beds and usually two children per bed. This hospital serves a provincial population of four million and yet there seems to be only one blood sugar metre in the entire hospital and the biochemistry machine stops working for days at a time. This week the observation charts ran out and on Saturday I was shocked to discover that no obs (temp, pulse) were being done at all since there was nowhere to write them down. Infection control is a disaster. Haemoglobin levels of two are a daily occurrence and it can be a struggle to get blood. However, I am enjoying it!

Madagascar: Good News Hospital, Mandritsara



Vic Parsonson finished foundation training a year ago and set off to work in a mission hospital in Madagascar. She is in charge of paediatrics, but in a rural hospital you end up doing a bit of everything, as her Facebook posts vividly describe:

Have discovered one of the many disadvantages of being the only doctor in the hospital overnight: 4am, was donating a pint of blood for the massive GI bleed I'd just admitted as there were no donors and we don't have a blood bank. Blood bag was half full when a nurse comes running to the lab, 'You have to come now, there is a paediatric resus and another patient is fitting...' Err... I wait a further five minutes till bag full, needle out of arm and run back to the ward.

You know it's going to be a bad day on call when you've already done five lumbar punctures before 10am, and three have been confirmed as bacterial meningitis. Hospital bursting at the seams, considering introducing bunk beds...

Today the med students here on elective announced the nurses told them they should do all their on-calls with me 'because I attract disaster and crazy things'. Hmmm...

Will never fail to be amused by African mechanisms of injury. 'So how did you get your head injury?' 'I was having a nap under my palm tree when a

coconut fell on me...' Ouch.

Only in Madagascar – results from the lumbar puncture I did today: white cells three, red cells ten, spiders one. No-one is quite sure how the spider got there, but the lab assistant came to show me that quite clearly, there WAS one...

I wish that all consultations were this simple. Patient: 'I can't see very well, doctor.' I ask the patient to pass me his glasses, remove the price tag off the left lens and hey presto, he is cured, and as a bonus he thinks I did something amazing!

Monday morning ward round chaos. Apparently 8am on a Monday is a good time for spring cleaning. Items tripped over: a relative sleeping on the floor, three buckets of water, an oxygen concentrator, and a chicken. Catastrophes during ward round: five. Lizards that dropped on my head whilst doing lumbar puncture: one. Doctors in the hospital: only me. Just another average Monday morning then.

'My child has been vomiting up large 6cm worms all night,' said mum. Small child then proceeds to wretch and chuck up said worms all over my desk. 'Yes, just like that!' said mum, jubilantly. Could have done without the practical demonstration.

Vicky Lavoy is CMF Head of International Ministries