

Context matters! Thinking about what you give

By Diane Holt

Many of us when faced with someone who is in less fortunate circumstances than ourselves think what can I do to help? What can I give? But for those of us who are not millionaires much of what we give is related to what we can afford and what we think might be of use to someone. So we may think of giving someone who is hungry some food, sponsoring a child in school, or buying a copy of The Big Issue. For those travelling to low income communities many of us would like to bring something that may be useful to our host communities. But what do we bring?

The context of what we give is something that I have been thinking about as I travel in the Amboseli region of Kenya where much of the land is dominated by Maasai tribes scattered across the landscape, where up to 8000 people live in pastoral communities moving across the landscape with their cattle.

For the last 19 years Dr Francesca has run the Fatima Health Centre Lenkisem and mobile clinic. Supported by donations and the small income her patients can afford she has equipped the clinic with equipment testing for diseases such as HIV, TB and syphilis, or to undertake minor surgical procedures and for childbirth. She also administers many of the medial programmes supported by the State or NGOs such as feeding, vaccination, mosquito bed nets and HIV programmes. The nearest government clinic is 90km away over rough terrain.

Born in Italy, many of her Italian friends support the clinic with donations of money and medicines. But the financial crisis has also hit them hard and she has seen a massive drop in donations over the last 2 years. This clinic is a lifeline to this isolated community, where demand for gynaecological care, antimalarials, HIV treatments and even snakebites place huge demands on the staff and their resources. Dr Francesca is incredibly grateful for all donations — whatever they are. But unfortunately some of what she is given she really cannot use or would be easily available for small amounts of money in Nairobi.



So someone carries by hand a box of donated medicines all the way to this isolated spot over 60 km from the main road, on dirt tracks often inaccessible to all but the hardiest 4x4. They have spent time selecting these, paying for them, probably arguing with customs about bringing them into the country in bulk and then they lie unused in a cupboard. Why? Here is an example Dr Francesca told us about, concerning a large donation of Paracetamol drops.

'We received this package.. but 100% of women of age 30 or above here cannot read or write. The women have to count the drops – it becomes very difficult for them. The drops need to be put in water but water is not available or not clean. We are not able to use them. Now we are buying in Kenya Paracetamol in syrup which is very easy for them because they just put in the cup or spoon and they give to the baby'.

So medicines that require illiterate women to count the drops and time how often these are administered, or those requiring water to be added are not really feasible outside the hospital. How does a young Maasia warrior measure 100ml when herding cattle for days at a time in the African bush? Plasters, needles, aspirin, anti diuretics are also easily available in Nairobi and inexpensive.

So what would make a difference to her I ask? Something that I, as a tourist, might carry in my luggage? There is a simple answer – antibiotics, antibiotic cream and antihistamine cream.

There are some simple guidelines to follow:

- If you can contact a local clinic and ask what they need
- If going with a safari company ask them to consult the nearest clinic to where you are going to be based. Ask if they willing drop them into the clinic
- Pick items that do not need measuring beyond that of a simple lid on a syrup bottle
- Avoid those needing water
- Look for simple pop package, for instance one at night and one in morning
- Something light that fits in your bag.
- Only carry one or two that might be used for personal use to avoid problems with customs.

Another programme she ran was the malaria bed net programme where every newborn was given a net. As she travelled on her mobile rounds she gave these away and credits them with dramatic impacts on the local families' health. But these have all gone now — so again a treated single net is something that would be a really useful donation.

But what can one person do? Well one packet of antibiotics might save a mother's life, antibiotic cream might save a father's leg and a treated bed net might save a newborn from cerebral malaria. But how do you get these to the needy clinics?

Often you may travel with a tour company. Many will arrange visits to local clinics — they always know the best ones in case someone gets sick. So arrange for them to deliver these. If you are in a group think how powerful 20 packs of donated antibiotics and bed nets may be!

I also visited a local school. Here it was a similar story - the teachers were incredibly grateful for all donations but they again struggled to make full use of them. The headmaster Julius told me that only Kenyan all-leather balls survived the terrain —an 'international' football brought by visitors would likely last only 2 days. Coloured pencils are only used by the kindergarten classes, equally crayons. They need biros, exercise books, school books and if you bring a football it must be all-leather, ideally with a pump.

You can also visit sites like Stuff your Rucksac at http://www.stuffyourrucksack.com/ whose interactive map allows you to see projects and their donation needs near where you are travelling.

So think about the context of what you give.

Remember many simple items like basic aspirin or plasters are available locally to clinics in many of the most popular tourist destinations.

If you are unsure – ask! Find out what might actually be of use.

You do not want what you bring languishing in a cupboard unused!

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