## FOR A BETTER START





# WOMEN WELCOME THE SOS MATERNITY WING

THE CONSTRUCTION OF A MATERNITY WING AT THE SOS MEDICAL CENTRE IN ELDORET IS RECEIVED WITH GREAT RELIEF IN THE LOCAL COMMUNITY. DELIVERY AT THE PUBLIC HOSPITALS OR AT HOME HAS TOO OFTEN TURNED INTO A TALE OF HORROR, TELL THE WOMEN OF ELDORET.

"I wish I could have had my baby here at the SOS Clinic. The staff really cares for me and makes me feel safe. When I showed up at the local hospital in labour I was left alone on a bed – no one had the time to attend to me, they were too busy. By the time a doctor came to help me deliver my baby was almost completely born."

After this experience 26 year old Doricus Nanyama Nyongesa developed a birth trauma and was depressed for a long time. Six months has passed after the unsafe delivery and it is only now with caring postnatal service at the SOS Medical Centre in Eldoret that she can tell her story.

### A MATTER OF LIFE OR DEATH

Delivering a baby requires the presence of skilled medical staff if both mother and child are to be safe. But in Kenya both maternity and infant death rates are high.

"Pregnant women need to go to a medical clinic or hospital when the time comes to deliver. If the birth cord is wrapped around the infants neck, the child will lack oxygen or suffocate and die during the delivery, and only experienced professionals know how to deal with such a situation. There is also the risk of the mother hemorrhaging to death if the bleeding is not stopped," explains Doctor Angela Ndaga, head of the SOS Medical Centres in Kenya.



A happy mother today, but Doricus Nanyama Nyongesa didn't receive the necessary medical service during delivery of her baby daughter Angel and was traumatized for months after this experience. She is also mother to four year old Alexi standing next to her. Photo: Mette Schmidt



33 year old Gladys J. Kibiwott is pregnant with her third child. She comes to the SOS Medical Centre in Eldoret for antenatal care. Clinical Officer Celestine Mukite Nalianya will also give Gladys postnatal care at the clinic. In the future women will be able to give birth at the SOS Medical Centre thanks to a donation from Xellia Pharmaceuticals. Photo: Mette Schmidt

51 out of 100.000 women die in connection with pregnancy or child delivery. In Denmark the number is 6 out of 100.000. And even though the infant mortality rate has gone down the last two decades, 37 out of a 1,000 children still die before they reach their first birthday.

## TEENAGE MOTHER CALLED FOR HELP

When 18 year old Hellen Jemo gave birth to her daughter, she was very frightened. Giving birth at such a young age can be a scary experience and even though she went to a hospital, Hellen had her baby without the help of a doctor or midwife. Instead Hellen's 25 year old sister had to assist with the delivery.

"I was very afraid and didn't know what to do. When we called for help nobody came or they said that they were busy and that I had to do it myself. I think the doctors were mean to me," says Hellen Jemo, who went to the the SOS Medical Centre in

Eldoret for her antenatal care and now comes in for her postnatal care.

## A MATERNITY WING AT THE SOS MEDICAL CENTRE

Poor women are either forced to give birth at home with a traditional birth attendant or to use the public hospitals, because they cannot afford to pay the fees at a private hospital or private birth clinic. Neither Is safe for the mother or infant. The traditional birth attendants have no professional medical training and the public hospitals are understaffed and do not have the capacity to attend to the many clients showing up in labour.

To accommodate the need of safe delivery the SOS Medical Centre are opening a maternity wing. In the future the women of Eldoret will be able to have their babies born at the SOS clinic thanks to a donation from Xellia Pharmaceutical.

"The maternity wing will have a capacity of 6-10 beds and one private



19 year old Hellen 'Jemo has not fully recovered from a very bad child delivery. She gave birth on the floor in a public hospital without the help of the medical staff. Clinical Officer Celestine Mukite Nalianya from the SOS Medical Centre in Eldoret gives both postnatal care and emotional support to the young mother. Photo: Mette Schmidt

room and we will be able to offer the full package to pregnant woman – antenatal care, delivery and postnatal care. We expect to deliver 15 babies a month. The maternity wing will be staffed with one clinical officer and two midwifes," says Angela Ndaga.

Gladys J. Kibiwott is giving birth to her third child in one month and comes regularly to the SOS clinic for antenatal care. She is very pleased to hear, that the SOS Medical Centre will have a maternity wing in the future.

"The service is very good here compared to the public hospitals. I never have to wait and the staff are always kind and professional," she says, "The maternity wing is a good idea."

The construction of the maternity wing at the SOS Medical Centre in Eldoret will commence in September 2017.



Marianne Norup-Nielsen, Director IT Service and Business Applications Xellia Pharmaceuticals, talks to a woman who is being treated for a severe jigger infection. The feet are washed in a disinfectant and then the tiny fleas are removed from the feet with tweezers and razor blades. Photo: Mette Schmidt

# XELLIA EMPLOYEES WENT ON JIGGER REMOVAL OUTREACH

DURING THE 2017 EMPLOYEE VISIT AT THE SOS CHILDREN'S VILLAGE AND SOS MEDICAL CENTRE IN ELDORET, KENYA, THE VISITING DELEGATION FROM XELLIA PHARMACEUTICALS PARTICIPATED IN A JIGGER CONTROL AND TREATMENT OUTREACH IN THE KIMUMU VILLAGE.

In March 2017 staff members from the SOS Medical Centre Eldoret and five guests from Xellia conducted a mini outreach activity to Kimumu Village within the city of Eldoret targeting persons infected with jiggers.

The community is characterized by poor living condition and people live with low levels of hygiene and unsanitary dwellings.

The activity is part of an ongoing jigger eradication programme (part of local SOS Children's Villages Family Strengthening Programme supported

by Xellia), which keep the jigger infestations at bay through treatment, community health education and fumigation of homes.

### **OUTCOME OF JIGGER OUTREACH**

During the jigger removal outreach 65 children and 24 adults were treated and 53 households were sprayed in a jigger fumigation exercise to eradicate the tiny insects.

The activity also created awareness of the burden of other diseases while advertising the SOS Medical Centre Eldoret.

## PARTICIPANTS FROM XELLIA PHARMECEUTICALS

- » James Bond Vice President Strategic Marketing and Business development, Denmark
- » Marianne Norup-Nielsen Director IT Service & Business Applications, Denmark
- » Kevin Thomson Scientist, USA
- » Tea Knezevic Regulatory Affairs Assistant, Croatia
- » Per Bischoff-Kristiansen QA IT Compliance Specialist, Denmark



Many people show up for general health service when the SOS Medical Centre does an outreach in the local communities surrounding Eldoret. Clinical officer Celestine Mukite Nalianya is checking a patient's blood pressure and examining for diabetes. Photo: Mette Schmidt

In a poor community such as Kimumu many people have no shoes. After having jiggers removed children and adults receive a pair of shoes for protection against new jigger attacks. The shoes are a donation from Xellia employees in Norway and Denmark. Photo: Mette Schmidt



### **ABOUT THE JIGGER**

Jigger, or chigoe fleas, are tiny sand fleas that burrow into the skin, usually of the hands and feet, and lay pea-sized egg sacs, that cause swelling, infections, ulceration and itching.

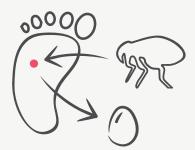
Over time, the eggs multiply and destroy soft tissue. The resulting wounds are prone to infections and

diseases like gangrene, blood poisoning, hepatitis or tetanus.

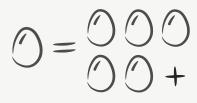
The pain often leaves people with severe walking problems unable to carry out any activities such as going to school or work and earn a living – and the wounds can lead to amputation and death if not treated properly.

There is often a social stigma and shame associated with the victims of jiggers which causes them to hide the problem, making it worse.

The only way to remove the jiggers is to cut them out of the surrounding tissue using scalpels, tweezers and razor blades.



JIGGER BURROWS INTO SOFT TISSUE AND LAYS AN EGG.



ONE EGG TURNS INTO SEVERAL EGGS AND NEW EGG SACKS.



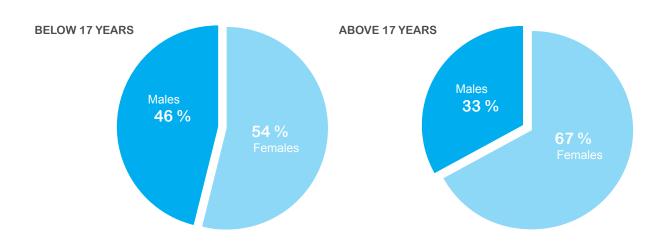
OVER TIME, THE EGGS MULTIPLY AND DESTROY SOFT TISSUE. THE RESULTING WOUNDS ARE PRONE TO INFECTIONS AND DISEASES.

# UPTAKE OF THE VARIOUS SERVICES AT THE MEDICAL CLINIC

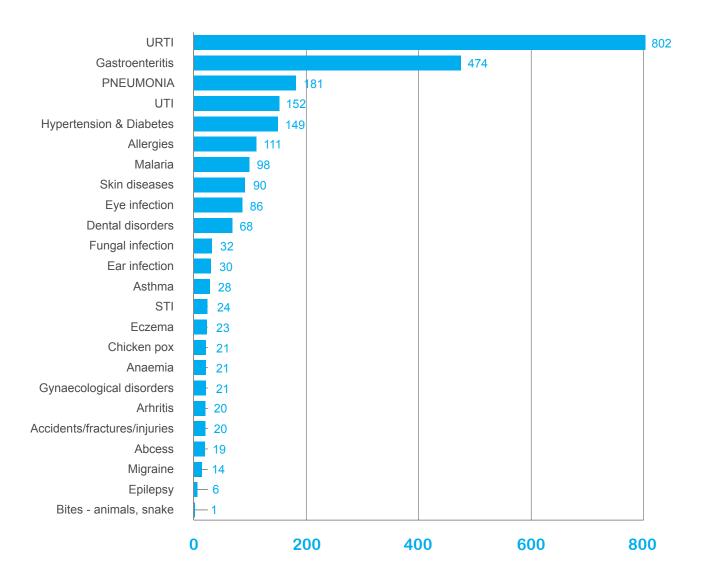
TYPE OF SERVICE OFFERED	NUMBER OF SERVICES OFFERED/ CLIENTS SEEN 2014	NUMBER OF SERVICES OFFERED/ CLIENTS SEEN 2015	NUMBER OF SERVICES OFFERED/ CLIENTS SEEN 2016	NUMBER OF SERVICES OFFERED/ CLIENTS SEEN 2017 (JAN-JUNE)
Outpatient treatment	4109	4847	5437	2797
Family planning	536	361	349	165
Antenatal & postnatal	347	393	432	124
Childwelfare	1189	1399	1603	877
Pharmacy	5544	6642	6751	3381
Laboratory	1875	2107	2409	1021
TOTAL	13,214	15,749	16,981	8365 (JAN-JUNE)

## AGE AND SEX OF CLIENTS, GENERAL OUTPATIENT CONSULTATION

Women/mothers make up majority of patients.



### DISEASE TRENDS AT THE MEDICAL CENTRE



### "I AM PROUD OF MY LIFE TODAY"

IT ONLY TOOK JOSEPHINE CHEROP FOUR YEARS TO TURN HER LIFE AROUND. FROM ILL AND UNEMPLOYED TO A WELL-EDUCATED WOMAN WHO SUPPORTS HERSELF AND HER CHILDREN. SHE RECEIVED HELP FROM SOS CHILDREN'S VILLAGES FAMILY STRENGTHENING PROGRAM IN ELDORET, KENYA.

Josephine Cherop speaks with determination in her voice, gestures vividly with her arms and looks her audience straight in their eyes. She insists on being seen and heard, as she has much to tell. About how her life as a single mother of five children was completely turned around when she came in contact with SOS Children's Villages.

"I am proud of myself and my life. Today I am healthy. I work and provide for my children myself and I thank SOS Children's Villages for it all."

When the SOS Family Strengthening Programme (FSP) in Eldoret, Kenya first met Josephine Cherop in 2010 she was in a poor state. Critically ill, unemployed and unable to take care of her six children, Josephine was living at her mother's house. Her husbond had abandoned her when she was diagnosed with HIV. She had not fully accepted her condition and every day she faced stigmatization from her own mother who resented her coming back to her parental home. She was weak and psychologically traumatized.

The purpose of the SOS Family Strengthening Programme is to enable children who are at risk of losing the care of their biological family to grow up within a caring family environment. Josephine's six children were vulnerable and at risk of losing their mother.

#### STARTING A BUSINESS

"If you had seen me at that time: I was in a deplorable state. People rejected me because I was obviously ill. The SOS social workers told me that they could help me, and I joined a support group for people with HIV. They explained to me that I could live a normal life if I took my medicine, and with their support and guidance I started to believe that I could change my situation," says Josephine Cherop.

In 2014 Josephine could leave the FSP. She had become self-reliant. During the four years Josephine Cherop achieved many things: She got her own home, started a grocery store, trained as a teacher and got







Josephine Cherop and her children outside her mother's house before she got a home of her own. Photo: Lene Godiksen

#### THE FAMILY STRENGTHENING PROGRAMME

- » The target group: Children who are at risk of loosing the care of their biological family.
- » The approach: To work directly with families and communities to empower them to effectively protect and care for their children, in cooperation with local authorities and other service providers.
- » The services: Ensuring that children have acces to essential services, (e.g. educational, nutrition, legal, health and psycho-social support). Supporting families to build their capacity to protect and care for their children (e.g. childcare skills, parental health, future planning, financial and material resources). Strengthening support systems for vulnerable children and their families within the community.

a job in a small missionary school teaching preschool children.

"The SOS Children's Villages gave me 12 iron sheets to build a house. Later I got a small loan through a saving and loan group. I began to grow vegetables and opened a small store where I sold groceries like salt and sugar and vegetables. Meanwhile the SOS programme paid for my children to go to school," says Josephine Cherop.

### **EDUCATION AND EMPOWERMENT**

The Family Strengthening
Programme started working with
Josephine Cherop by encouraging

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If you had seen me at that time: I was in a deplorable state. People rejected me because I was obviously ill."

her to join a support group so that she gained the mental skills needed to live a positive and independent life. At the SOS Social Centre and Medical Centre in the Children's Village Eldoret she participated in several courses on child caring, health and nutrition and the program helped her make a career plan.

"I began to look positively at the future and make plans for my life. The social workers were my friends and I knew I could always ask for advice. At SOS Children's Villages I also





Josephine Cherop in her grocery store with vegetables and fruit, she cultivated herself. Photo: SOS Children's Villages Kenya

learned about my civil rights, and that my children have rights. This knowledge makes me feel stronger," says Josephine Cherop.

Today she continues to be an active member of the FSP support group and offers encouragement and motivation to new members.

### LOOKING FORWARD

Josephine Cherops grocery shop gave her a modest income, but soon Josephine started having bigger dreams: She wanted to become a preschool teacher. With financial support from SOS Children's Villages Josephine Cherop in 2013 began her studies at SILA Teachers Training College in Eldoret. After graduation she got a job with a steady income and could quit working in the grocery shop.

"Today I am healthy and able to work and feed my children and send them to school. My oldest son has trained as a mechanic, and he's doing well. I live in my own house, and I contribute to society by doing volunteer work. My life is good," smiles Josephine Cherop.



By supporting the SOS
Children's Villages Medical
Centre and scholarship
programme Xellia
Pharmaceuticals and its
employees are directly
contributing to the saving
and enhancing of lives for
children and caregivers in
the Family Strengthening
Programme.



Josephine is one out of two teachers at the pre school. She dreams of becoming headteacher. Photo: Mette Schmidt





Josephine Cherop didn't speak English when she first came in contact with the SOS Children's Villages. Today she is fluent in English. Photo: Mette Schmidt