

ST LAWRENCE UNIVERSITY
Summerterm in Kenya
Health Care Delivery in a Developing Country
May 30 through June 27, 2009

The provision of adequate primary health care is a fundamental requirement for human well being. The current situation in Kenya indicates that the majority of the population lacks access to effective health care. While numbers living in rural areas are desperately in need of operational community health centers, a significant number of people living in the urban areas are equally in need of adequate and fully subsidized health care.

The evolvement of health care delivery is entwined to the historical developments of the country. In regions where the influence of Christian missionaries was experienced, the western modern allopathic medicine developed. The presence of Islamic influence dating back to the period of Arab conquest along the East African Coast has greatly influenced the health care delivery in the region. Other areas that are predominantly inhabited by the indigenous groups continue to largely practice traditional methods of healing.

Traditional medicine is widely practiced by both recognized traditional healers and herbalists and by others who claim to have this knowledge of traditional medicinal healing practices. This practice is welcomed in communities where the healers and herbalists are conversant with this method of treatment and have gained community respect. The practice is also becoming more familiarly acceptable in the slum areas where the majority of habitants are unable to afford and access modern health care practices that are often alienating in their approach. Among the pastoralist communities where medicine is hard to reach, traditional practices are widely accepted. Islamic medicine is increasingly gaining access to inner city communities where the majority of its members practice Islamic religion. Coupled with other faith based and alternative healing methods, the urban as well as rural settings become a convergence zone of many health interventions.

In the city of Nairobi, approximately sixty percent of the three million habitants reside in informal or popular settlements commonly referred to as slums. The majority of these inhabitants are migrants from rural settlements who are forced to the city in search of meaningful livelihood. With increased crowding in the slum areas, the rate of respiratory and infectious diseases is on the rise. Coupled with the poor environmental conditions and marked by lack of garbage disposal, poor drainage systems, lack of space in the slum communities, the rates of HIV/AIDS infections, the situation gives rise to poor physical, emotional and mental health and inevitably, death. While this remains a challenge for the government who has laid out plans to uplift the housing conditions in an effort to improving the basic human living conditions, the environmental health factors are increasingly deteriorating causing untold health and physical malaise.

Course Description

In an attempt to appreciate how the existing formal and informal institutions organize health care provision and services in urban based communities, this summer program seeks to provide students interested in health, social welfare and economic justice a basis for understanding these health care strategies in a resource strained environment. The course gives a practical and theoretical context in global health and its dynamics. It places health care in Africa using a background of world politics and economics. It translates international statistics into living situations and human contexts. **The course is designed to encourage reflection and critical appraisal, challenge ideas and encourage students to explore different perspectives.**

The course provides an opportunity for students to observe as well as participate in the ways that the community approaches medicine and medical care. Students will have the opportunity of experiencing how ethnicity confounded by the rise of infectious diseases in urban communities determines healthcare outcomes. Theory and practice of community organization in relation to health practices shall be reviewed. This course shall emphasize community-based learning approach in its practice. For each topic organized, the students shall get an opportunity to see how theory is affected in practice. Areas of practice to be covered shall include maternal and child health care practices in both hospitals and communities; HIV/AIDS approaches, interventions and treatment; mental health care; community involvement in eradication of infectious diseases in both the community and hospital settings. Policy and funding issues and how this facilitates or hinders interventions shall be discussed. The students are encouraged to place these situational experiences into a broader context of the International health NGO's and International policies and priorities.

Course Requirements

Students shall be required to fulfill the following criteria:

- (1) Write 3 short papers on a defined topic following the modules and associated seminars.
- (2) Pairs of students (when numbers allow for this) will give oral presentations on the weekly readings.
- (3) Due to the nature and demands of the program, attendance and participation in both the seminars and the community based learning programs is crucial and attracts a grade. In cases where a student is not able to attend class, prior warning **MUST** be provided to avoid penalizations.

Students are encouraged as much as possible to discuss possible topics with the instructor. Special reference can be made between communities in the African region with those in the US. Throughout the summer program, students shall be required to log in their daily learning experiences as well as observations in a journalized format.

ST LAWRENCE UNIVERSITY
Summerterm in Kenya
Health Care Delivery in a Developing Country
June 2009

There will be regular group sharing of key learning points and challenges during group discussions and reviews of the learning process and cultural, ethnographic and philosophical paradigms.

NOTE: A course packet with readings and suggestions for discussion topics will be provided during the month of April 2009. Students are encouraged to familiarize themselves with the contents of this packet before departure to Kenya!

Grading

Short papers on a defined topic

Assignment 1 – Paper on Health Seeking Behavior 20%

Assignment 2 – Annotated Bibliography 25%

Assignment 3 – Final Paper 30%

Oral Presentations 15%

Attendance and Participation 10%

100%

Module 1: Common Orientation and Introduction to Epidemiology and International Aspects of Health Care Delivery

Reading List

1. Newspaper articles on health care (National & International)
2. Article from Book of Choice (Student's Choice)
3. Kenya at the Crossroads: scenarios for our future (packet)
4. Sontag, S (1978) *Illness as Metaphor and AIDS and its Metaphors*
5. Cohen, M. N. (1989) Chap. 2- Behavior and Health
In Health and the Rise of Civilization (packet)

Module 2: Institutional based approaches to health care delivery in public and private health care settings.

Objective: Illustrate the interaction between community and health care system.

Learning outcomes – the students will gain the following knowledge:

- ✓ How the concept of community is applied to the care of peoples having infectious diseases.
- ✓ The financing and cost-sharing of the public referral hospital's operations.
- ✓ The decision-making process of health administration at the various health care facilities.
- ✓ Levels of care, adherence with medications and other treatment modalities.

Activities

Visit a maternal child health clinic and see the provision of primary health care – immunization, growth monitoring, infant feeding counseling, and health-education. Engage in the interviewing of clients to determine their perception and value for the preventive services.

Meet with peer counselors/community health workers and learn about their work, their role as a link between the formal health facilities and the communities, the challenges of working as a peer counselor.

Visit a ward and patients, and interact with other students, social workers, nutritionists, and clinicians. Learn about ward organization and team work in patient care.

Attend guest lectures by various cadres of health care providers from public and private health care programs.

Reading List

1. Health service pricing reforms in Kenya, Int. Journal of Social Econ (1997) pp. 282-292 (packet)
2. Systematic review of involving patients in the planning and development of health care (Crawford, M J et al, 2005) (packet)
3. Alternative provider payment methods: incentives for improving health care delivery, Partnerships for Health Reform. (packet)
4. Cohen, M N, "The History of Infectious Disease" pp. 32-54, Health and the Rise of Civilization, (1989) Yale University Press (packet)

Module 3: Introduction to Mental health care systems, approaches, and challenges in a rapidly urbanizing environment.

Objectives: introduce students to the historical development and challenges of mental health care in Kenya.

Learning outcomes

- ✓ Understand the cultural stereotypes and perspectives in mental health care.
- ✓ Understand the burden of mental illness in the community.
- ✓ Understand the treatment seeking patterns for mental illness.
- ✓ And the consequences and effects of mental illness within the families.

What changes the way you thought about these issues?

Reading List

1. Helman, C G. *Cross Cultural Psychiatry*, Culture, Health and Illness, Butterworth-Heinemann Ltd. (1990) 219-248 (packet)
2. Patel, V et al. *Models of Mental Illness in Africa*, in Essentials of Clinical Psychiatry for sub-Saharan Africa, Eds. WPA/AAPAP (2005) 44 – 56 (packet)

3. Patel, et al. *Epidemiology of Mental Disorders in sub-Saharan Africa*, Essentials of Clinical Psychiatry for sub-Saharan Africa, Eds. (2005) 57-61 (packet)
4. Ndirangu W & Njenga F. Aetiology: *Social Factors*, Essentials of Clinical Psychiatry for sub-Saharan Africa, Eds. (2005) 37-43

Module 4: Social Response and Social Responsibility? The Participatory Role of Urban Based Communities in the Provision of Holistic Health Care

Objective: Introduce students to community based health care approaches in underserved urban areas of Nairobi.

Learning outcomes – the students shall be able to:

- ✓ Find out who the health care providers are?
- ✓ Understand how funding issues are negotiated and how they sustain this community program.
- ✓ Who benefits from this program and how is the catchments area identifiable?
- ✓ What treatment methodologies are applied (biomedical, ethno medical therapies or both and why?)

What Studies can you find that tell you something new, that challenged your assumptions?

Reading List

1. Gulis G et al. Health status of people of slums in Nairobi, Kenya, Environmental Research 96 (2004) 219-227 (packet)
2. Taravella, S. Home and community-based care: transforming lives in Ethiopia, FHI (2004) 1-6 (packet)
3. Willcocks S & Conway, A. Exploring the Role of Family Caregivers and Home-Based Care Programs in Meeting the Needs of People Living with HIV/AIDS. Int. Journal of Health Care and Quality Assurance (2000) 308-315
4. Ndirangu W et al HIV/AIDS within the family: women's responses and needs FHI/USAID (1996) 27-44 (packet)
5. Doyal, L, Sex, gender and health: the need for a new approach. School for policy studies, Bristol
6. Kusimba, J et al. Traditional healers and the management of sexually transmitted diseases in Nairobi, Kenya, Int. J of STD & AIDS, 14-3 (2003), pp. 197-201 (packet)

ST LAWRENCE UNIVERSITY
Summerterm in Kenya
Health Care Delivery in a Developing Country
June 2009

SUPPLEMENTARY READING LIST:

- (1) The Fate of Africa: From the Hopes of Freedom to the Heart of Despair by Martin Meredith
- (2) Africa Unchained: The Blueprint for Africa's Future by George B. N. Ayittey (Hardcover)
- (3) A continent for the Taking: The Tragedy and Hope of Africa by Howard W. French
- (4) The Africans (vintage) by David Lamb
- (5) UNICEF STATE OF THE WORLDS CHILDREN
- (6) UNAIDS policy paper for Africa
- (7) The Lords of Poverty by Graham Hancock
- (8) US Government Policy Paper on AIDS Orphans (?)
- (9) **Kenya Demographic Health Survey**
- (10) USAID website
- (11) WHO web site/primary health care
- (12) CDC web site

Note: Readings listed above can be found at the AMREF library.

ST LAWRENCE UNIVERSITY
Summerterm in Kenya
Health Care Delivery in a Developing Country
June 2009

SEMINAR TOPICS

Introduction to Health Care Delivery in Developing Countries

Wairimu Ndirangu (PhD)
Course Director, SLUKSP

P.O.B. 1128, 00502 Nairobi
Ph. +254 722 518 351
wairimu@sluksp.com

**The Challenges of Primary Health Care and Health Reforms in Kenya
Introduction to International Health**

Dr. B.O.N. Oirere, Lecturer in Public Health
Kenya Methodist University, Nairobi, Kenya

P.O.B. 13246, 00100 Nairobi
Ph. +254 721 247 287
bon_oirere@yahoo.com

Paediatric Health Care

Prof. William M Macharia
Chair, Dept of Paediatrics & Child Health
Aga Khan University Hospital, Nairobi

Ph. +254 733 627 077
macharia.william@aku.edu

Development of Mental Health Care in Kenya

Dr. Frank Njenga (MD), Consultant Psychiatrist,
Upper Hill Medical Centre, Nairobi, Kenya

Ph. +254 733 511 366
fnjenga@africaonline.co.ke

Reproductive Health Care Delivery in Public & Private Sectors

Zahida Qureshi, MB. BSc. M.Med
Senior Lecturer, Dept. of Obstetrics and Gynaecology, UON
Consultant, Kenyatta National Hospital

Ph. +254 733 605 140
zqureshi@nbnet.co.ke

ST LAWRENCE UNIVERSITY
Summerterm in Kenya
Health Care Delivery in a Developing Country
June 2009

Female Genital Mutilation in Kenya

Guyo W. Jaldesa- MSc (Edin) M.Med (UON)
Honorary Senior Lecturer, Dept. of OB/GYN, University of Nairobi
Consultant Obstetrician-Gynaecologist Kenyatta National Hospital

P.O. Box 50976, 00200 Nairobi
Ph. +254 722 828 005
jaldesagw@yahoo.com

An Overview of Traditional Medicine in Kenya

Owuor Olungah (PhD), Research Fellow,
Institute of Anthropology and Gender Studies
University of Nairobi, Kenya

Ph. +254 722 217 132
owuorolungah@uonbi.ac.ke

Health Management among Pastoralist Communities

Peterson Muriithi, BDS. MPH, Lecturer,
Health Services Management and Community Health

P. O. Box 19676, 00202 KNH, Nairobi
Ph. +254 722 387 145
pjmuriithi@uonbi.ac.ke

Phones for Health, Health Information Systems

Paul Krystal, Chief Architect

Ph. +254 733 628 490
paulkrystal@gmail.com

Sustainability of AIDS Management and Control

From Externally Supported Projects to Sustainable Community Systems
Prof. Kihumbu Thairu, MB ChB, MD (EA) PhD (Lon) FRCP (Glasg)

Ph. 0725 299 510
thairus@nbnet.co.ke

Paediatric Infectious Diseases

Phillipa Musoke, MB. Ch.B
Senior Lecturer, Dept. of Paediatrics, Makerere University
Principal Investigator, MU-JHU Research Collaboration, Old Mulago Lecturer,

P.O.Box 7072, Kampala
Ph. +256 41 531 875
pmusoke@mujhu.org