

MEDIC ASSIST – A HOPE FOR SUDAN

Simon Radcliffe, FRCS

All of us are confronted almost daily on the news with images and stories of famine, destruction, war and suffering due to natural or man-made disasters affecting the world's poorest countries. The difficulty for me always seems to be where on earth do we start to help? How can one person possibly begin to make a difference when there seem to be so many crises? One can give to many charities that support relief efforts, but sometimes it is hard to know that the money given will really make a difference.

So why become involved with Sudan? The political, humanitarian and religious situation is certainly complicated and my understanding of it is simplistic, but the country seems to be split into a more affluent north and a poorer south, with a civil war which started half a century ago leaving the south of Sudan (a huge area about the size of western Europe, though much more scarcely populated) with almost non-existent health care provision.

Even basics of clean water and sanitation don't exist, resulting in an infant mortality rate of 20%, high levels of material mortality and virtually no medical provision whatsoever, over a massive area. Add to this no proper roads (access being by four-wheel-drive vehicle only), no native currency or banking facilities; life is hard for those living in southern Sudan and in particular Goli, which is close to the Ugandan border where Medic Assist International (MAI) are setting up a remarkable and very exciting healthcare project.

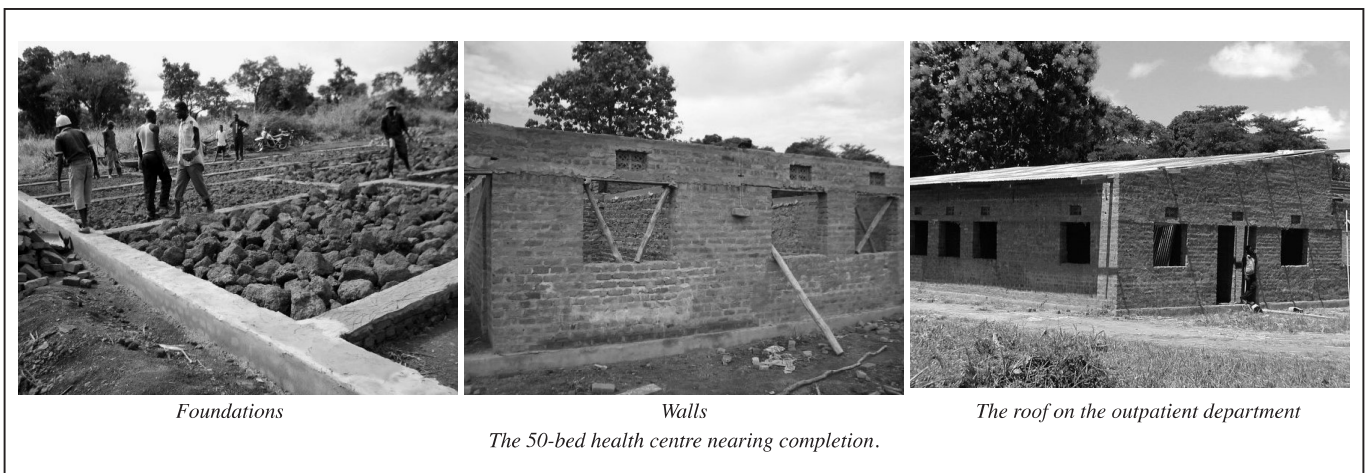
So what is Medic Assist and what is different about this project? Our main contact has been Dr David Carling, who was Medical Officer at the RLI in 1955 when the Sudanese civil war first started (Sudan became an independent state in 1956) and who has since worked on and off most of his life in Africa. He initially started a small charitable project in Goli. The money (a few thousand pounds) given at that time was invested by the local people into brick-making equipment, a lumber/timber facility, and a builder's wagon. This amazingly small investment was used with great foresight; homes, schools, an orphanage, a guesthouse and churches have been built. Dr Carling's contact has been able to make a little money go a long way providing employment for the men and women in the area and a hope for the future.

I first heard about the project to build a hospital/health centre in Goli over a year ago, and the appeal for me was that this was a local achievable project with a simple goal to provide a hospital in an area where there was no healthcare provision whatsoever. The original estimate for completing the hospital building was £50,000 and I am most grateful to colleagues, patients and friends who supported me on a sponsored bike ride last year – we managed to raise over £6,000, which was added to the total for completing the building (which rose to £80,000).

There is now a 50-bed hospital with two operating theatres and a large outpatient department. In many ways the hardest part is already done. An American charity has stepped in to supply equipment and this is in the process of being shipped over. The first stage of the project is therefore already completed. There are however three more stages!

- Money needs to be raised to pay staff wages for the next three years, after which time it is expected that the hospital will be self-sufficient. Until the hospital is fully staffed it cannot hope to run at its full potential.
- It is hoped to drill for fresh water to supply clean drinking water at various points within a 30–40 miles' radius (a day's drive) from the hospital. It is planned to not only provide clean water but also to set up satellite clinics providing care over a bigger area. The four-wheel-drive vehicle they use would have a solar panel on the roof to power a fridge for inoculations and could be used as an ambulance to transport patients needing hospital treatment to the hospital.
- Groups of healthcare professionals (medical, nursing, physio, OT, etc) are to go out to teach and educate hospital staff and perhaps to set up a link with our Health Care Trust, so that their staff could come over here for clinical attachments. I have already received a lot of interest to do this from general practitioner and hospital consultant colleagues, nursing and theatre staff.

The beauty of this project is that it is small and local with an achievable end point and that so much has been completed already with a relatively small amount of money. Contrast this with the ever-growing NHS budget with little results to be seen apart from increased stress to all.

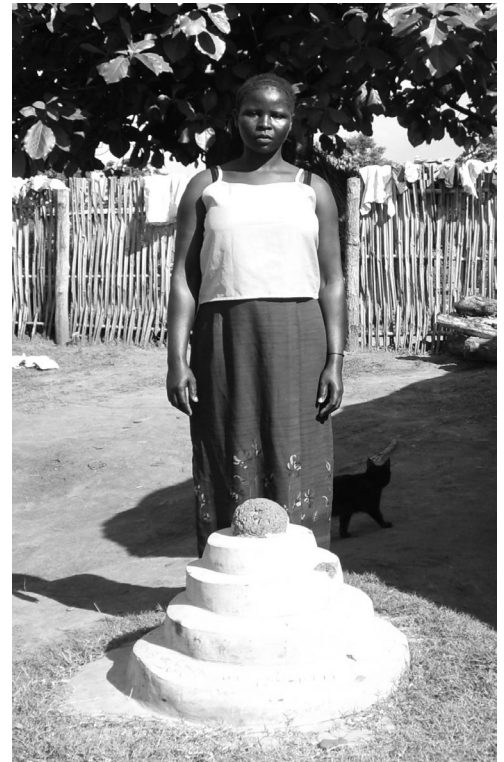


Shocking statistics for the area

- 11% of pregnant women die giving birth
- 15% of all babies die at birth
- 61% of children under 5 suffer from malaria
- one doctor for 100,000 people



A bicycle is the only way of transporting a pregnant woman many miles to find help when complications occur.



Siama Baraka standing by the grave of her child, who died at birth because of complications and the absence of any help.

FUND RAISING

I will be doing the 130-mile Coast to Coast bike ride on June 18th. This is an organised charity bike ride with support, where we cycle from Morecambe to Scarborough in one very exciting and tiring day. All money I raise will again go to Medic Assist and the Sudan project. All offers of sponsorship will be gratefully received.

We are staging a sponsored one-mile walk along Morecambe Promenade on July 9th. This will be a walk that orthopaedic patients, family and friends can take part in. The walk is entitled 'Medic Assist Walk: A Hope for Sudan' this will also be a Fun Day and all are welcome. It will be similar to the Wishbone Walk we did five years ago. Again any help financially and otherwise would be welcomed.

The Journal apologises to Mr Radcliffe for having gone to press after the two events described here, but is happy to act as receiver of any money that readers may wish to donate to this worthwhile cause.

Cheques payable to 'MAI' and/or cash can be sent to the Editorial Assistant, MBMJ, Education Centre, RLI.

(Photographs: Medic Assist International)