Sam Day, Volunteer from Australia

The actions of the clinic today were mostly concentrated on baby treatments. There was a large gathering of women, each one carrying at least one baby. The women carry the babies on their backs wrapped in cloths around their bodies. There are no prams in Sukoroi. The babies wait unbeknownst to the impending shot that is imminent. The perimeter of their eyes are inundated with incessant African flies so much so, that from a distance it appears as if they have mascara on. This does not bother them. The babies are weighed in a little waist harness that their legs slip through. This harness hangs from a weighing scale that is tied to a low hanging tree branch. This action is humorous to watch and always ends in only one way. Tears at the shock of abandonment as their respective mothers leave them to dangle momentarily and briefly. The weights are recorded in books that have been issued to the mothers by the clinic for no charge. It is imperative that the mothers hold onto these books as it maintains the record of shots and immunisations of the babies as they progress to the tender age of 5, where my understanding is the books are not required anymore. I overhear the name of one baby. America. The babies will be immunised against measles, pneumonia, tuberculosis and hoofing cough amongst other illnesses. The administering of the shots by Anne also always ends in one way. More tears. Anne apologises profusely to the babies at the downpour of tears. For the mothers they remain under the sanctuary of the shady tree and talk for most of the day. It is very much a social gathering for them also. Eventually they will leave in different directions, as the day is quenched by dusk, with their babies secured to their backs. The clinic is packed into the Land Rover. We leave.

A woman called Rebecca is pregnant. Her first. Women walk past carrying 20 litre containers of water which have straps around them that they place around their forehead. They are bent forward to counterbalance the weight. I ask Peter where they obtain the water from. He tells me a river about 2 kms away. This must be a daily routine. Once the water is taken home then it still has to be boiled before it is safe to drink. I tell Peter (the field assistant) and Anne (our nurse) that every house in Australia has a tap with running water that is safe to drink. To my surprise they are unaware of this fact and question my statement. ‘Every home?!’ Peter asks. I confirm this fact. Things don’t come easy in Kenya.

A man lingers around the inside of the church, bothersome and intrusive to no one. He waits patiently and content. He is a school teacher. I learn he performed a HIV test three months ago when the mobile clinic was last there. The test was negative. He is back again to confirm the results. He shows no signs of nervousness except for his quiet disposition. Anne informs me that before testing is done, the recipients will receive counselling to prepare themselves for the outcome if the results are positive. Anne shows great professionalism when it comes to this job and I have not seen her take any shortcuts in her tasks. While in Thome, to stay occupied I practised drawing medicine out of ampules into syringes. I was poor at this job and one syringe did not quite make the required 1ml line. Anne picked up on this and
disposed of the syringe immediately as this would not suffice for the patient. She studied nursing for three and a half years and her skills are a testament to the standard of education in Kenya which I believe is better than what people may think. Anne demonstrates this professionalism in front of Peter by explaining to him and I the process of the test and that it must be displayed in front of the patient. In Kenya if HIV results are passed onto the patient incorrectly, jail sentences for those testers will be seven years. This is because the repercussions of HIV results can be very serious for patients. Incorrect results can ruin lives. The results are negative. Peter leaves and enters back into the desert abyss.

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Yesterday afternoon before reaching the camp, a young woman stops the car in Rumuruti and asks Anne if she and others can get birth control. This morning, Anne leaves early with another community worker, Esther. They are walking door to door to administer the birth control shots. This is so as to keep the clients discretion intact. Some women do not want the community to know that they have received birth control so Anne respectfully administers the shots out of the public eye. Fourteen women in total. Peter and I run errands. We fill up jerry cans of water from the tanks at the district hospital. We stop at the council chambers where I find three buckets of sand hanging from hooks with ‘Fire Extinguisher’ written on them. A local politician has asked Peter if they can obtain thousands of Condoms for distribution through the community. We pick up boxes from the hospital. We rendezvous with Anne and Esther and drive to Kambiya Simba and set up the clinic nearby a small river.

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We arrive to a quiet reception and this is notably a quiet spot. A group of kids hang around, looking after a herd of cattle. After dealing with some patients, Anne and Esther rest their heads on the table waiting for more arrivals. Peter and I change the two original tyres back onto the rear axle and Peter is ever thankful for the assistance even though I feel like my work with the clinic is minimal. I constantly wish I was more use to them. Peter continues to fetch buckets of water from the river and clean the interior and exterior of the Land Rover. I think to myself it is to no avail as it will just get dirty again in two minutes of driving over the inhospitable dusty roads. Peter also washes his clothes in the river and hangs them up to dry over some acacia trees. It seems to me, every plant and tree in Kenya has angry thorns over them to reflect the nature of the environment. Everything in nature is aggressive out here. Subsequently, though, the acacia trees make for good clothes hangers.

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Ole Shampa* (not his real name) hails from Makandura village and has much praise for the Mpala mobile clinic. He has led a careless and romantic life. Aged 32 years, he has for the last 4 years fought with recurrent gonorrhea infection. He has been using traditional herbs to treat himself with little success. He was ashamed to seek treatment from the hospital and feared he could be even HIV positive. He has been having casual sex with different women and in particular after drinking sprees. He was aware of the services offered by the CHAT mobile but due to shame he kept off until one day he decided to watch a video show run by the organization in the field. The video titled “Silent Epidemic” almost brought him to tears and after the show he approached the nurse and explained his case. The nurse counselled him and also gave him treatment. He finally recovered and has since changed his behavior. He plans to get married this August.

It was one of those bright morning days for Samson. He planned his day as usual, checked his cattle at the shed by 6am in the morning and proceeded to milk two of his cows. Well this was about one and half a year ago. As he milked the second cow his mind came to Rebecca his secret lover for the last two years. Actually Rebecca is a wife of his friend Daniel of 15 years. He has a son with Rebecca who is now 1 year old. Samson had planned to meet Rebecca later in the afternoon secretly for some romantic moments.

Samson, 46 years of age, has been a troubled man. He is a polygamous with 3 three wives. The first wife did not bore him any child and then he took a second wife and as fate would decide they got only two sons and 1 daughter. Samson wanted to have many children like his friend Daniel who has 12 children. Many children is a sign of wealth to him and he wanted children to take his wealth in future. He opted for a third wife and now within 5 years they have 3 children. The first were twins and the younger one is two years now. He expected her to be pregnant again and no pregnancy was forth coming.

And has been planned Samson met Rebecca and he decided to tell her about her the failure of the last wife to conceive again and felt it will be the same case as the 2nd wife. At they were talking, suddenly there was sound of vehicle passing by and realized it was the CHAT Mobile vehicle passing. He is used to seeing the mobile vehicle and then a thought came to him; he
will see the nurses at the mobile to find out what could be happening to the wife after all they are the same people who have been treating his family and immunizing the children. Then came the unexpected, Rebecca ask him if the wife has been visiting the clinic and of which he confirmed. Rebecca then told him maybe the wife has been put in family planning secretly.

He turned wild and vowed to teach the nurses a lesson next time they come and also beat the wife. When he went back to his ‘boma’ he immediately picked a quarrel with the wife and demanded an explanation if she was doing family planning of which she denied and ended up beating her. Fortunately the mobile team was camping in the area and when he realized that he decided to confront the nurse. When he reached the station where the mobile team was treating people he found the local assistant chief speaking to the nurse. He heard them taking about FP and its importance. He pretended he was sick and had the chance to talk to the nurse. He decided to ask the nurse about family planning. He was well explained about FP and its benefit. He changed his mind, regretted for having beaten the wife. He went further and shared with the wives. The two younger wives have since been given contraception. He does not want to have any more children. He was also told of the idea of using condoms as well not only for FP but prevention of STIs. He is now a satisfied man and happy with the children he has so far.