

SENEGAL



Renovation of maternity section in “Belgian hospital”

In Senegal, infantile mortality (death before the age of 5) amounts to some 48 deaths out of 1000 live births. In Belgium, the comparable figure is 3 deaths/1000 live births. Similarly in Senegal 315 mothers die, and in Belgium 7, per 100 000 births. It is clear that in this vital area, much remains to be achieved in Senegal.

When we speak of the Association Femmes d'Europe, we normally indicate that our objective is to support small-scale humanitarian projects for those in need, especially women and children and with a particular emphasis on health and education. So when we had the possibility to contribute to the health and welfare of mothers and babies in Senegal, it was clearly an irresistible project!



Back in 1985, Doctor Van den Branden founded the Nema clinic financed by a Belgian NGO in Ziguinchor, in the Casamance area of Senegal - it is known colloquially as the “Belgian Hospital” and survived 20 years of rebellion, mines and general disturbance from 1990 to 2009. It currently is amongst the most important health centres in Ziguinchor, a town of some 350 000 inhabitants.



When founded, the clinic comprised consultation offices for adults and children, an injection room, a pharmacy, laboratory and treatment room. It was subsequently expanded and a small maternity section added. But over the decades since 1985 the population of Ziguinchor has expanded rapidly and although some renovation of the clinic took place in 2014, much remained to be done, and in particular the maternity section was in dire need of an upgrade.

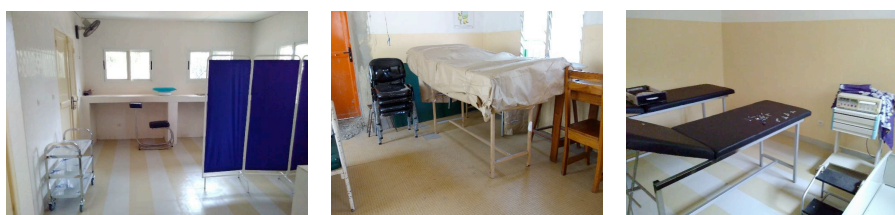
A Belgian NGO, "Casa for life" was founded in 2018 inter alia by Dr Van den Branden and his wife, to work in Ziguinchor in the area of health, maternity, small children and children with handicaps. At the request of the "Prefect" of the area, and the chief Medical Officer, Casa for Life devoted much of its time and energy in its first year to funding the renovation and equipment of the maternity section of the Nema Clinic.



One of the major problems of the clinic was cultural: the maternity ward was part of the clinic and access to it was through the main area. But women coming into a labour ward in Senegal cannot be seen by men in the area. So women only came to the clinic when labour and birth took place outside working hours; otherwise they gave birth at home, with higher risk of infant and maternal death. The new maternity section has a separate entrance, a waiting room, a labour ward with four beds, bathrooms, a birthing room, post birth ward and equipment for care of the new-born.

And Femmes d'Europe in all that?

We were asked to supply beds, cupboards, mattresses, sheets, weighing scales and other necessary medical equipment.



The clinic now has the head nurse and one mid-wife who live on the premises; they have a second nurse, 12 assistants and, since last year and the opening of the renovated maternity section, a second midwife. Before the work was carried out, the clinic had 12-25 births per month. In just one year, that has doubled to 35-50!

Our small but useful contribution to this excellent project is a perfect reflection of the role of Femmes d'Europe.

Maeve Schiratti-Doran
Projects Committee