

Subject: Litsemba Medical Team

Dear Friends/Colleagues:

We're back from our trip to Swaziland with the Litsemba Planning team. We learned a lot and made many important contacts with the government (met with the Minister of Health, his Deputy and other officials), hospitals, churches, the director of the Baylor Pediatric AIDS clinic, as well as several faith-based non-profits doing direct medical care. The focus of our medical work in July is becoming more clear – we are attempting to identify 20-30 local rural churches in the most impoverished rural areas to partner with us and to host our medical clinics. It is critically important that there will be some follow-up after we leave, at least one meal provided a day, for example. If the churches are unable to provide this support, we may offer clinics alongside existing feeding stations run by well-established Christian non-profit groups in the rural areas. Two examples of facts learned:

- 1- On the first day in Swaziland we visited a rural home that was reported to have 28 orphans living in it. We had been provided names/ages of each child so we could bring them clothes and blankets. When we arrived there were over 40 children, mostly 5 and under, living in a two-room home. We were told that on the weekends over 320 orphans came there to eat. The government official for this area told us there were 25,000 constituents in his community and that 15,000 were orphans. If you added “vulnerable children” to the description of “orphans” the number would be much larger.
- 2- One rural pastor explained there were 2,000 people in his community and 30 churches (although he estimated that only 30% of residents went to church). Most shocking to us was his statement that there were less than 100 parent/adults in that community – all others had died leaving approximately 800 grannies and 1,100 orphans/vulnerable children.

The needs of the children continue to grow. The over-riding focus of our medical team will be to provide hope, and let them know they are loved and not forgotten.

We have worked out licensing requirements, and have a plan in place to circumvent the requirement for all providers to appear in person at the Ministry of Health! A Swazi-specific formulary has been developed and we have been working with a MedAssets employee who is collecting and coordinating the donation of most of the medications we will need. At a later date, we will most probably need your help with some items.

Applications for all Litsemba medical team members will be available in early January and we will send an email notice. We will also be sending a “recruiting poster” for you to post and share with other interested medical personnel. We still need doctors and nurses, and would love to have OTs, PTs, and Social Workers, etc., as well. We have made some excellent contacts for specialty docs to provide consults at the Raleigh Fitkin Nazarene Hospital in Manzini as well as

home-based consultations with local providers. Also, they will have the opportunity to provide CME training and teaching.

We will be returning to Swaziland in the spring to complete our medical plans. We are so grateful for your interest and your heart for the children of Swaziland and look forward to serving with you soon.

Wishing you a most blessed Christmas,
Jan and Ron