How can a sustainable model of Palliative Care in the Community that includes Social Work, be developed in Poorly Resourced Areas



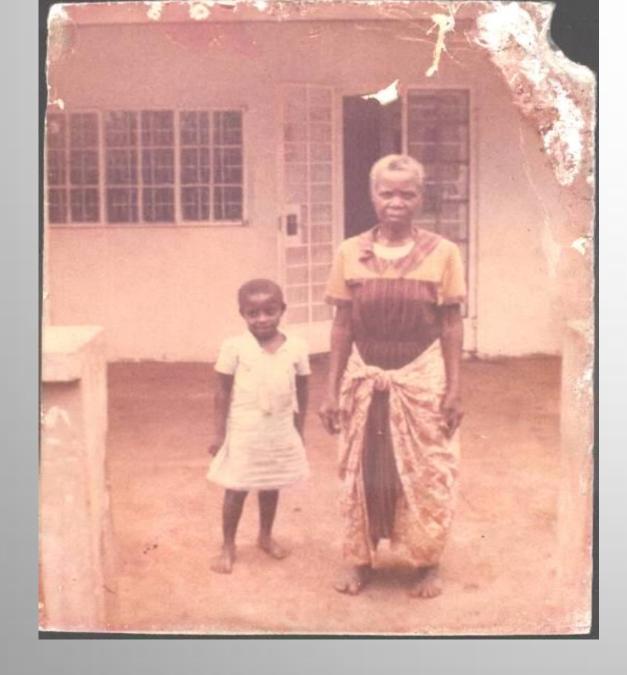
Angela Kaiza Kangalawe

Global Palliative Care – working towards sustainability

My personal journey!

- One of eight children, born in Dar es Salaam capital of Tanzania.
- As a child stayed in the village for two years.
- Experienced both sides of the world.







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What made me choose Social Work

- To understand and be with people
- To help the needy
- First hand work as a graduate in 2004 was as social worker at Muheza Hospice Care.
- MHC shaped my life long career "Palliative Care"



Social work at MCH!





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Challenges of Building Palliative Care in Africa

- Choice of palliative care practitioners
- Ownership.
- Lack of commitment
- Lack of funds/resources
- Availability and accessibility of opioids
- Lack of skills.
- Poverty
 - ✓ Unemployment
 - ✓ Low salaries



Sustainability

- Sustainability "People ownership"
- Seeing something as mine not someone else's.
- Full Participation & Involvement.
- For something to be sustainable, it must be there – You just add value, polish etc.



"You don't need to build the foundation, the foundation must be there".

Why a Community Model - understanding Tanzanian Community

- Despite modernization and globalization African ethics are still communitarian (strong family and community bond)
- Important decisions about health & treatment are made by family (MEN).
- Africans are deeply religious and have strong beliefs in God.



Why do we need PC in the Community?

- Patients and health care professionals belong to and are part of the community.
- People in the community know each other (caring values & attitudes)
- Existence of formal & informal gatherings/groups i.e. religious organizations, govt systems, VICOBA etc.



Why the Community Model?

It is our culture nowadays when you are sick lying on the bed nobody will come.

BUT when you die everyone will come, and money will be raised to drink and eat and bury you safely!



How to take Palliative Care into the Community

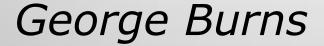
 Choose the right people in the community Not every one can do Palliative Care!!!

Remember: being a nurse or a doctor or social worker is not the only qualification for being a palliative care worker.

- Train them and form a palliative care team.
- Link them with hospital palliative care team/govt systems etc.
- Develop simple M &E tools.
- Give continuous mentorship and encouragement.



"I honestly think it is better to be a failure at something you love than to be a success at something you hate."





If you don't build your dream, someone will hire you to help build theirs.



Community Model- it has Worked!

- Received £500 from OBU Community Fund.
- Chose people from the community based on their values.
- Trained them on PC using Swahili Palliative Care Tool Kit!







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Results- A Case Study

- A seven year old child girl who was not enrolled to school.
- Lived with her father and other two young brothers.
- Her mother separated from her father when she was two years old.
- She was constantly sexually abused by the father.
- One of the PC team members shared the case.
- PC community team enabled to link she is now taken care of by the nuns



- Palliative care team meetings held monthly
- Linked abused child with orphanage.
- Community resources mobilized to help the needy.



Recommendations

- Choosing the right people is the KEY to building a successful and sustainable palliative care community programme.
- Using existing resources available in the community.
- Palliative care team meetings discussing patients are of paramount importance.
- Assisting the team with knowledge and resources is crucial.



Conclusion...

For I was hungry, and you gave me food . I was thirsty, and you gave me a drink. I was a stranger, and you invited me into your home; was naked, and you gave me clothing. I was sick, and you cared for me.....



Math 25:35-37