

Doctor's vital duty to save Africa

Harold Ayodo

The unprecedented violence that rocked parts of the country after last year's General Election had one man worried. Prof Dan Kaseje knew if the skirmishes escalated, many people would suffer, especially the rural poor.



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During the period, many health centres remained inaccessible, especially in rural areas where the poor live.

"I kept praying that the unfolding of events would not reach alarming levels," he says.

Kaseje, a doctor, who played a pivotal role in reviving collapsed health services in war-torn countries around the world, was speaking from experience.

He knew the painful effects of war and that women and children were always the worst affected.

At 62, Kaseje has spent more than 30 years developing health programmes in Rwanda, Angola, Somalia, Sierra Leone, Liberia, Sudan, the former Zaire and Afghanistan.

"I have worked with communities in countries where health structures were destroyed and it took years to rebuild them," says Kaseje.

The professor went to Rwanda immediately after the 1994 genocide, which claimed 800,000 lives.

Kaseje was also instrumental in the healing of Angola after 27 years of civil war that left more than 500,000 people dead mostly in the 1990s.

The story was the same in Sierra Leone, that experienced 11 years of civil war. About 150,000 people died and more than half the citizens were rendered homeless.

About 600,000 refugees — 12 per cent of the population — fled to neighbouring countries. More than 200,000 were women raped, and about 1,000 civilians had their limbs amputated by rebels.

"It was difficult to work in war torn countries as survivors suffered trauma and needed counselling," says Kaseje.

Other than reconstructing collapsed health centres, Kaseje is an academic who wants to see education move to higher levels.



Prof Kaseje with wife, Margaret Kaseje.

For this reason, he founded the Great Lakes University of Kisumu (GLUK) that trains health students from across the continent.

Before establishing the university, Kaseje set up the Tropical Institute of Community Health and Development in Africa in 1998. The institution later became GLUK, and is set to celebrate its 10th anniversary.

"GLUK operates under a Letter of Interim Authority issued by the Commission for Higher Education on June 30, 2006," he says.

Kaseje, who is the university vice-chancellor, says the institution's aim is to bridge training with service delivery programmes, focusing on the needs of the most vulnerable communities. "GLUK develops, tests and disseminates models and innovations in health and development through research," he says.

The vice-chancellor says his major achievement is developing and implementing community based health care in the continent.

While acknowledging that health care in Africa is burdened by poverty, Kaseje says: "There is a lot to be done towards ensuring we have a healthy continent."

"In the past three decades, I have developed distinguished professional experience in providing technical and advisory services in Africa."

Pictures: James Keyi

development of health programmes in the continent.

Kaseje has offered medical advisory services to governments and non-governmental organisations in the

His visits to war-torn countries always had his family worried. "But it reached a point where they got used to my frequent travels and nature of work," he says. Africa, says the don, is dogged by disease, destruction and death, but this can be contained.

"Accessing information and services for the poor who are the majority in the continent is like climbing a mountain," he says.

The father of four, who worked in Afghanistan a year before the Taliban regime, says disease has affected productivity in many countries.

"People cannot be productive when sick. Our governments have diverted colossal amounts of money meant for investment to treat preventable diseases," says Kaseje.

And the doctor is not about to hang up his stethoscope. Retiring from the medical field does not exist in his vocabulary, especially after the upsurge of 39 new diseases in the past 20 years in Africa.

Medical research

"I am deeply engrossed in medical research, to find solutions and treatments to new diseases like Ebola, Avian Flu and HIV/Aids among others," says the don.

Kaseje is involved in research in HIV/Aids, health systems improvement, community health care, malaria, family planning, nutrition and water and sanitation.

"I am carrying out research on reproductive health. I did the same on factors influencing sexual behaviour among adolescents and young adults in Kenya, Ethiopia and Rwanda," he says.

A recent Kenya Demographic and Health Survey (KDHS) shows 59 per cent of women deliver at home, with over 28 per cent assisted by traditional birth attendants, and 22 per cent by relatives.

The survey shows that approximately 414 maternal deaths occur per 1,000 live births.

"I have completed a research that has been published on gender-based violence, rape and care for rape survivors," he says. Most maternal deaths are related to complications of unsafe abortions, and complications during and after delivery.

Shortage of medical staff, inadequate access to skilled care during pregnancy and delivery, poor infrastructure and cultural barriers are challenges of safe motherhood.

The scholar blames the emergence of new diseases on wanton destruction of environment.

He says the weight of globalisation has exposed aspects of non-capacity to compete, which makes the continent more vulnerable.

"We have to do a lot to contain diseases by promoting health education and improving infrastructure to ensure access to healthcare for all," he says.

The professor of medicine says disease has impacted negatively on several economies in Africa as the healthy become caregivers to the sick at home.

"Effective poverty reduction intervention must be done to address the issue of disease," he advises.

Kaseje was the force behind the Integrated Health Care Programme in Somalia after the war in the mid 1990s that killed 18 US soldiers.

"I hired local militias to protect me as I moved around in that country, shortly after its war with the US between 1993 and 1995," he recalls.

"There was sporadic gunfire as we traversed the rough terrains in Somalia to offer healthcare, but that did not deter us," he says.

Kaseje, who was a director at the World Council of Churches, developed teams of multi-disciplinary professionals at various levels to respond to the needs of member churches.

This dealt with root causes of ill health, poverty and unjust structures of care and development.

Kaseje was also a director at the Christian Medical Commission that managed and coordinated the work of churches in health and healing. He knew he was risking his life but could not hold back, given his calling as a doctor.

Kaseje attended Saradid Primary School in the former Central Nyanza (the present Bondo District) where he moulded his ambition to save lives.

"I was inspired to be a doctor in Standard Five after a Dr Owino gave us a lecture on medicine," he says.

Kaseje says his father valued education despite his inability to raise fees. Villagers mocked the elder Kaseje when he ensured his daughters completed primary school.

"I was the only boy in our large family and people said my father took my elder sisters to school because he did not have a son," he says.

Kaseje's yearning for proper health and hygiene began long before he joined the medical profession. He was expelled from Maranda High School as a Form One student for leading a strike over lack of water.

The rough road to his dream of becoming a medic was tough, but it began when he joined Form Two at Tambach High School in Rift Valley.

"Students did not take biology at Tambach, and there was no teacher for the subject, so I had to read it on my own," he says.

After his O-levels, he proceeded to Thika High School for his 'As' where he passed science subjects with distinction.

Academic path

"I was admitted to the University of Nairobi Medical School between 1970 and 1975. I had to struggle as I knew I was from a poor background," he says.

After his undergraduate, he attained a Masters degree in Medicine, specialising in Community Health at the same university in 1977.

He later studied for a second master's degree at Harvard University.

"There, I attained my master's in Public Health at the Harvard School of Public Health in 1978 and a PhD 10 years later," he explains.

His PhD was in Tropical Medicine at the Liverpool School of Tropical Medicine and Hygiene in 1988.

"I was determined to ascend the academic ladder and pay back to the community since I came from a poor family," he says.

Kaseje started working as a medical doctor at The Machakos Provincial Hospital before he ventured in war torn countries.

"I was also the acting Machakos Medical Officer of Health between 1975 and 1977."

He managed clinical services and wards in the regional hospital that provided referral facilities for five districts, with a population of more than four million people.

Kaseje says his achievements in medicine in the mid 1970s included the successful management of an outbreak of a protozoan disease, Visceral Leishmaniasis.

"I directed the drug trials designed to develop short regimens for tuberculosis," he says.

Kaseje spearheaded the implementation of rural health units concept in Machakos, which covered a population of slightly over one million people. He is happy that his daughter Neema Akinyi has followed in his footsteps and is currently taking a master's in surgery in Boston.

He is married to Dr Margaret Keseje. The father of four is proud of his children's achievements.

"Neema is interested in trauma surgery while Hawi Owuor and Cephas Otieno are in business. Kwene Anyango is a final year student in the US," he says.

Kaseje, who loves preaching the gospel, singing and listening to music during his free time, preaches at the Anglican Church of Kenya.

He is a member of several professional medical bodies, which have left a mark in the world of medicine.

Kaseje is further a member of the International Epidemiology Association and Fellow of the Royal Society of Tropical Medicine.

He is also a member of the International Union for the Scientific Study of Population.

The professor has published several publications on medicine, which he has presented before international platforms across the globe.

Kaseje taught medicine at the University of Nairobi between 1976 and 1987 before his engagements with the United Nations medical agencies.

He was once the director of the Department of Community Health and Social Welfare and the Community Health Department of the International Federation of Red Cross.

"I networked with the World Health Organisation and Unep on community health," says the professor.

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