



**DR JANET
CHENNY-NSHANJI**
Interviewed by Helen Fosam



Why did you start Kindred Health Mission (KHMI)?

- To meet the needs of vulnerable people because many die unnecessarily and often from causes that are preventable
- These individuals lack of access to healthcare increasing health disparities, complications and mortality.
- KHMI has a desire to provide healthcare access that would meet immediate and basic health needs, provide health empowerment through individual and community educational activities and programs.

Who are the vulnerable people you serve?

- **Those at risk of being neglected or abused by society.**
- **Vulnerable people including infants, children, pregnant and non-pregnant women, the elderly, the sick, the disabled, prisoners, orphans, widows, the mentally ill, internally displaced persons, refugees and people living in poverty.**





What problem does KHMI solve?

- **KHMI's outreach programs provide access to urgent health needs and to vulnerable people, including providing them with knowledge for self-care and improving their health and general well-being.**
- **It provides respect and dignity to vulnerable people, supporting them to function optimally in their communities.**

What are the mission and vision of KHMI?

- To provide healthcare access to vulnerable people and communities, and basic health knowledge to enable them to live healthy lifestyles.
- To provide small and medium scale economic empowerment projects that build financial independence and improve the quality of life for vulnerable people.
- To provide needs-based humanitarian assistance, which may include mobile clinics and telehealth systems locally that attend to the health needs of vulnerable people and communities.
- Long-term, to build schools, hospitals and other large-scale projects for sustainability.



How has KHMI grown or changed over time?

Since its registration as a non-profit philanthropic organization in 2016, and the start of operations in 2019, KHMI has certainly grown and changed over time.

- Nigeria: Our initial outreach program was in Gembu Taraba State and then later in Jalingo, Nigeria. We established an Empowerment Center, which included a trainer paid for one-year paid to provide free sewing classes. In 2021-2022, we started an agricultural empowerment project for the internally displaced.**
- Cameroon: In March 2021, our outreach program served communities in Mbingo. Included three health outreach programs per month providing health education on hygiene, nutrition, mental health, and addressing chronic medical problems, and a sewing empowerment centre in Bamenda.**
- Ghana: carried out feeding project for vulnerable children**
- Namibia: provided program supplying disposal menstrual pads to young girls to encourage school attendance and humanitarian projects with an orphanage.**



How does KHMI operate in each African country?

Operation in each country is individualized and based on the laws that regulate the operations of nonprofit organizations. However, the needs of the vulnerable are the same, irrespective of the country.

- We identify a contact person to work with in each country, who then builds a team locally.
- Projects are identified based on needs assessment, and priority is given to the most urgent.
- These projects may include humanitarian assistance, health education, medical missions, including trauma healing and psychological counseling, and empowerment projects for economic independence, sewing, hairdressing, barbing, food trading, and construction.

Describe your medical mission in Nigeria in July and August 2022

The mission took place in Jalingo and Gembu in Taraba State and Ikom in Cross River State.

- KHMI provided free medical care to at least 3643 people in nine days, and included refugees, internally displaced people and indigenous people.
- KHMI care team included local doctors, surgeons, nurse practitioners, nurses, pharmacists, laboratory technicians, and students.
- Several medical conditions were diagnosed and treated including diabetes, hypertension, gastritis, gastric ulcers, gastroenteritis, urinary tract infections, and dental and vision problems.

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- Other medical conditions included spinal deformities, neurodevelopmental problems, infertility, brain tumour, hydrocephalus,
- Surgical procedures included the removal of ovarian and dermoid cysts and hernia repair.
- Individuals with complex medical issues, such as elephantiasis, were referred to specialists or local hospitals for alternate care. If immediate care is required, the patient is stabilized before transfer to a local hospital.
- Unfortunately, KHMI cannot cover the cost of hospital treatment due to a lack of funds.



**WATCH OUT FOR THE
CONCLUDING PART TOMORROW!**