



**MADAGASCAR** Sentinelles is more than a family to me

#### **BURKINA FASO**

Lack of knowledge about cleft lip-jaw-palate

SWITZERLAND Treating noma during the pandemic

# Editorial

# An extraordinary situation calls for extraordinary actions

In this last 2020 edition of our newsletter and more generally during this anniversary year, we have given a voice to the people we encountered when they were in a difficult situation. They confided in all honesty, letting us understand, through their testimony, their own commitment.

Ours has remained intact. Even though we were forced to cancel surgical missions, to adapt our awareness and prevention campaigns because of critical safety hazards and the coronavirus pandemic, our actions did continue. Our teams were more creative than ever to access remote families and make sure our care centres would operate properly.

In addition to these activities, we were alarmed by the inhuman living conditions in the Bukavu prison in the Democratic Republic of Congo and we created, with the Chaîne du Bonheur (Happiness Channel) sponsorship, a support programme to women incarcerated with their children in the penitentiary that was founded during the colonial era. Deprived of the essential, most of these women don't even know their legal status and their children grow up without any patch of green. During our first food, coal, and hygiene products distribution, real scenes of jubilation took place. In Burkina Faso, it is the fate of people who were displaced by violence and who live on the sole generous but limited support of host families that called us to mind. Urgent aid was rolled out, initially for some 250 people. In Colombia, important renovation work in our care centre were carried out, and in Switzerland several events took place to celebrate our 40th anniversary.

Without your precious support and presence, none of this would have been possible. We express here our utmost gratitude and our fervent wishes for a blissful 2021 year.

Thanks for standing by us.





Managing Director

INDEPENDENT OF ANY IDEOLOGY, SENTINELLES, FOUNDED 1980 BY EDMOND KAISER, WORKS TO RESCUE AND ACCOMPANY CHILDREN AND ADULTS IN DEEP DISTRESS.





# Letter from valentina

We wish to share with you a letter from Valentina, cared for by Tierra de Vida (name of Sentinelles in Columbia), since she was two years old. Today she's 11. Yulieth, the mother of Valentina, has spent 3 years in prison, involved in drug trafficking and organized robbery, leaving her with her sister Camilla under the care of Fredy, their father. In 2017 Camilla, victim of mistreatment at the hands of her father and her grandmother has been welcomed into a home. One year later, Valentina re-joined her there. At the end of January, their mother had obtained a period of probation by the criminal justice system. We have helped her to find a small house, she has started raising chickens and we hope to begin their family reunification soon.

"I thank Tierra de Vida for having allowed me to live in this home because here I've been able to meet lovely people, for example the educators. The children and the staff of the home give me lots of love and tenderness that I need. At the home, I have learned to give and receive love from other children. I like everything that we do here: dancing, singing, taking care of the vegetable garden, going to the swimming pool, spending time with other children, learning, and I love the food.

*Everything we are given here is important to help us achieve our goals, to help us become greater, and to be successful in life.* 

I have been part of Tierra de Vida for several years now. I have seen children arrive and others leave, seeking help to learn to live in community. For everyone who has stopped by here, it is an honour to be part of Tierra de Vida ... "



#### **INIGER**

### Upsurge in admissions to the Zinder Center

In Niger, growing insecurity is forcing us to adapt our work. One of our staff who was supposed to be working on location last August ended up being unable to re-join our team due to the uncertain security conditions after the terrorist attack claimed by the Islamic State group which claimed the lives of six French humanitarian aid workers and two Nigerians, a few kilometers from the capital Niamey. This deleterious climate continues to worsen the living conditions of local populations, in particular because of sharply reduced access to basic health services. At the same time, the villages are less and less accessible for our noma control team, which raises awareness about this disease, takes care of the medico-social follow-ups essential for children's recovery and provides food assistance to families if necessary. While an upsurge in admissions of child victims of noma is already observed at our reception Centre in Zinder, there is reason to fear that this trend will continue. Thus, the involvement of Sentinelles in Niger is more necessary than ever in this period of great instability.

# - THANKS -

Thanks to all of you who supported our efforts in favour of those who are deeply wounded during this unusual year. Thanks to you, we were able to support, help, pick up people who were in great vulnerability. Today, thanks to your support, they are on their way to autonomy.

#### Without you, none of this would have been possible

You can also support our efforts by joining the team distributing our Sentinelles newsletter. Every second month, the distribution in your neighbourhood, your village or among your significant ones is a great way to inform those of them who don't know about our work.

Another way to stand by our side is to buy the collection of texts written by Edmond Kaiser, La Grâce du Monde, or a set of postcards. You will find all necessary information on our website **www.sentinelles.org**.

We would also be grateful if you could let us know your new address when you are moving houses. This is how we will be able to keep in touch with you.



With our sincere gratitude, we wish you a happy Holiday Season and look forward to seeing you again in 2021.

# I MADAGASCAR Sentinelles as a family : testimonies

On the occasion of forty years of Sentinelles, we have collected the statements of several people who have benefited from our help through our programmes, whether in the field of care, in the prison environment or in the battle against exclusion. We have asked them if they would like to talk about their meeting with Sentinelles and the place that it took in their lives.



#### Haris, 26 years old

« Sentinelles is more than a family for me, it's a team full of devotion which takes care of the most destitute. Who knew that within a prison there is a team that welcomes detainees with open arms, who listens without judging?

I still remember that moment, a time when it was neither hot nor cold, the day of my committal order when I was crying hot tears, another mother took me to one of the Sentinelles' premises within the prison. An educator listened to me and comforted me.

From then on, assistance, moral support and help was given to me. I felt alive again and didn't see the time go by as I learned crafts, sewing, and cooking with our educator.

While I was pregnant in prison, the Sentinelles doctor took care of my pre- and post-natal consultations. A year after I gave birth, my daughter, who suffered from bronchiolitis, needed to be hospitalised. Sentinelles took care of notifying my family and providing follow-up and assistance at the hospital. When I was released from prison, Sentinelles helped me until I could work.

I am now a team leader in an IT data entry service. Sentinelles has done its part, it's up to me to continue on my journey. I thank the good Lord for putting Sentinelles in my path."



#### Albertine, 43 years old

"I am a resourceful, stable woman and a responsible mother. For years I have devoted myself to making paint which has paid off well for my family. But one day a man took me to the police station. He also made paint. He accused me of being a receiver of stolen goods and of "stealing his brand" and took me to court. I found myself incarcerated and had to take my son with me because I was still breastfeeding. I got to know Sentinelles at that time.

This unfair situation made me get sick. I fell victim to neurosis and lost my mind. Sentinelles arranged for me to be admitted to a mental hospital and I was able to get out of prison to be hospitalised. The foundation also applied for bail, which was accepted, and I was released on March 21, 2016. I recovered and was able to join my family.

During my incarceration, my husband sold all of our possessions and slipped away, abandoning our children in dire poverty. We had to start all over again after my release. I have resumed my paint production activity and at the same time I am continuing my treatment. Thanks to Sentinelles my activity has restarted and is working. My older children also managed to find income-generating activities. Things are looking up.

I recently had other concerns about my accommodation and thanks to the help of the Sentinelles' lawyer, I was successful. I can share all my sorrows and trust my social worker. I do not let go, we move forward. I give my blessing to all those who have invested themselves for our good. I can't find the words to express my gratitude."



#### Eliane, 25 years old

"I was like all the other children in my village, full of zest for life. But one day, an accident turned my life upside down, a truck hit me ... I didn't regain consciousness until I got to the hospital, in a cast and lying in a bed. Since that day, I have suffered the consequences of this accident, I have a handicap in my hip. It was this twist of fate that led me to become a beneficiary of Sentinelles through the "childcare" programme since 2008.

Throughout my various treatments and many rehabilitation sessions, I plucked up the courage and started my studies again as an intern in the college of the Sisters in my village. I finished the last year of high school and was able to take pastry training afterwards.

But misfortune does not come alone, my mum who was by my side during the darkness of my life had a stroke and suspected lupus. She became a burden for me because she was permanently bedridden; it was my turn to watch over her. After spending several months of rehabilitation and calm in the centre run by the Ursuline Sisters in Analaroa, she came back to us. She continues her treatment and we keep our joy for life. Sentinelles is a great support for us, a testimony of help to the most disadvantaged and an inexhaustible source of life. Thank you to the donors and to the whole team."



#### Geneviève, 26 years old

"Pages would not be enough for me to write all the benefits of Sentinelles' accompaniment for me. I don't remember my mother's face because I lost her when I was little, but I remember my life on the side of the street, in a plastic house in Behoririka, on the edge of a foul-smelling lake in the capital where I spent the night with my old dad and my two brothers. The image of my little family that was deep in darkness, living in extreme poverty, is anchored in my memory.

I will never forget the arrival of Madame Lalao, the social worker from Sentinelles, who reached out her hand to pull me out of this house. I was nine at the time and I was in year 4 class. Since then, I have travelled town and village to various colleges and boarding schools for my studies and I spend my holidays at the foundation's reception house. Sentinelles is always present in my journey, to congratulate me on my successes and my joys, to encourage me in my moments of pain, which are sometimes crucial in my life, such as when I lost my family members. My father and my two brothers are deceased. I am currently alone, but not alone in the world, I have a large family: Sentinelles.

I am now 26 years old and I am starting a training course in sustainable development (Masters in a specialised university). Succeeding is the only thing I can do to express my gratitude for all these years of follow-up that the foundation has given me. I feel lucky and I want to continue my fight, to complete my studies, which for me will be the only way to say "thank you" to Sentinelles. I dream of having a good job that matches my training as a manager, I dream of success, of a bright future, of having a good family life and of giving myself also for others who need help, to serve the destitute of my homeland according to the example I drew during my long journey with the Sentinelles team in Madagascar".

# **I BURKINA FASO** Fighting the stigmatisation **of facial malformations**

Newborns with cleft lip-jaw-palate in Burkina Faso are regularly referred to us. There is a risk of stigmatisation caused by an interpretation of this malformation (curse, symptom of wrongdoing by the family, etc.), and children can die due to lack of knowledge. Yet a relatively simple surgical operation can close these clefts. Over time, more than 500 children could benefit from such reparation.

A cleft lip-jaw-palate, usually called "harelip" is a congenital malformation happening during the first quarter of the pregnancy, most often without a known cause. A cleft lip is a separation of the upper lip, partial or in full (opening the nostril into the mouth), that can affect one or both sides. The cleft palate is an abnormal separation of the oral cavity that can affect only the palate muscles with a normal mucous membrane but an effect on its function, or partially or fully separating the palate.

Many very young children die, sometimes out of neglect but most of the time because of a feeding issue. Suckling become a problem and, when there is a cleft lip-palate, the divided lip and palate are unable to ensure watertightness





between the nose and oral cavities. As the mother's breasts aren't stimulated by succion, the milk supply dries out. Out of lack of information and technical means (use of breast pump or special teats), the mothers feed them as of birth with goat milk or millet porridge. In one or the other case, this diet isn't tolerated by the newborn and many are the children who die out of repeated diarrhea, being severely illnourished and dehydrated. As for artificial powder milk, it is way too expensive for these families.

While waiting for plastic surgery, since children are operated only when they reach 3 months and a minimal weight of 5 kg, we provide them the necessary conditions for proper nutrition and appropriate care, in collaboration with the Centre for recuperation and nutritional education (CRNE) of Morija in Ouagadougou. The clefts are primarily operated during ad hoc surgical missions under Dr. Baillet's direction, who has since 2013 operated more than half our patients through her NGO "For the Promotion of Reconstructive Surgery". They are also operated during reconstruction missions, where operations on various types of pathologies or maxillo-facial malformations are performed, mainly with Prof. Pittet (AEMV), Prof. Zwetyenga (Chain of Hope) and in the Burkinabe hospitals around the year with Prof. Bandré.

#### ADJARATOU AND ADJARATA – SIMILAR-ITIES AND LACK OF KNOWLEDGE

The life paths of these two newborns, as they are told by their parents when they arrived in Sentinelles, are a demonstration of the difficulties and lack of awareness that surround the birth of children affected by this malformation.

Adjaratou was born in a village a 100 km away from Kaya (Centre North region). Her mother Hawa tells us : "after delivery, when I see my daughter, I ask what it is. The village midwife answers me I should not worry because she is going to bring me luck. I am afraid but nevertheless I take her in my arms and I give her my breast."

The family members who had come to greet me go fast and tell my husband that I gave birth to "something", a genie or a jinx. The news spread like wildfire in the village. My husband cannot find the courage to visit me at the maternity."

Hawa carries on : "When I reach the house and my husband sees our daughter, he tells me: "Is this what people talk about? It doesn't matter, she is a godsend". The maieutician (a male midwife) who helped me during delivery had not explained anything, so we go back with the baby to the maternity. Since he isn't there, we talk to another health worker; he tells us he is going to give us a paper to go to Kaya. Meanwhile, the first maieutician comes back and tells us not to go to Kaya but to Ouagadougou where she can get treatment, but the child needs to be at least 3 months old. He advises us to go to Barsalogo to get support from the CRNE, since our baby wasn't able to suckle. Once in Barsalogo, we don't get help. We come back to the village and Adjaratou is fed with goat milk, but she loses weight. The maieutician takes a picture of her later during a consultation in the village and he sends it to a Sentinelles health worker, who gets us to go to Ouagadougou. Once we arrive, he refers us to the Morija CRNE because Adjaratou is too tiny and she cannot be immediately operated. She'll be when she reaches the required weight.

In conclusion, Hawa says : "I am relieved to realise that I am not the only one who gave birth to a child with this malformation and it gives me strength and courage because now I know that my little girl will get a treatment!"

Adjarata was born in a village 15 km away from Zorgho (Central Plateau region). Her mother, Fadima, tells us: "When I arrived at the village maternity for the delivery, I was with my stepmother and my stepbrother."

Since men aren't allowed in the delivery room, her husband Hassan is waiting with his brother and he learns from his mother that her wife gave birth to a baby girl.

He carries on: "When we come back to the house with my wife and the baby, I see my child and I get afraid and ask "what is this?" My mother tells me not to be afraid and to support my wife." Fadima adds: "This fear quickly disappeared thanks to my stepmother's support. I took Adjarata in my arms and tried to give her my breasts." Hassan carries on: "I also took her in my arms because I told to myself that she was a godsend and that we were going to keep her like she was. Our mother lets us know that the nurse is requesting that we go back on the next day. She wants to explain to us what we should do (editor's note: since Adjarata wasn't able to suckle due to the cleft lip-palate, her parents would give her cow milk).

On the next day, at the maternity, we are given a piece of paper instructing us to go to Zorgho. When we arrive in Zorgho, we are given another piece of paper instructing us to move on to Ouagadougou. Once in Ouagadougou, we reach a medical centre. During the consultation, the doctor asks us to exit and wait for someone who will take care of us. Sentinelles' nurse is getting us and showing us the care centre. At that point, we were wondering whether we would be asked to go round once more but fortunately we saw the pictures on the board (editor's note: an information board at the care centre is showing pictures of babies before and after the operation). This made us feel better!

Adjarata is still too small, she cannot be operated right now but we are already happy she is being taken care of. In Sentinelles, she has healthy milk to thrive on, cloths and toys until she can be operated."

Since we collected these testimonies, Adjaratou and Adjarat could both be operated to close the cleft lip. The closing of the cleft palate needs to be done as a second step.

A new mission headed by Dr Aissata Baillet was possible in October. It allowed about forty children to be operated on.



# Extension of the stays for treatment **because of the pandemic**

During last Summer, four children and a young woman from Burkina Faso who suffer from noma sequelae stayed in Switzerland for care. For three of them, Gisèle, aged six, Balguissa, nine and a half year and Nassirou, nine years, the treatment had come to an end and they were ready to go back home.

The sanitary situation due to the pandemic had a strong impact on their stay in Switzerland: medical appointments and operations were suspended for about 10 weeks and their treatments were significantly extended. They also had to wait for the borders to reopen, the commercial flights to resume and to comply with the sanitary requirements to be able to go back home, especially testing negative to the Covid-19 test.



After their surgical procedures, their stay at the guesthouse in Massongex (Terre des hommes Valais), where they were housed as soon as they arrived in Switzerland - had to be extended. They were very well taken care of by a multi-disciplinary team whom we thank from the bottom of our hearts for their commitment. After a period of strict confinement, the children were able to go back to school and do the planned activities.

During these difficult months, our volunteers' contributions were invaluable; they called and visited the children both at hospital and in Massongex, always respecting the sanitary protection measures (physical distancing and use of masks).

Eventually, a return flight was organised on September 7 and three now healthy children could be reunited with their families.

Laurence, thirty one years old, is today ready to leave.

Hadjatou will stay longer, a young, 11-year-old Burkinabe girl whose treatment is not yet complete. Suffering from severe noma sequelae, Hadjatou already underwent three surgeries and two additional ones are yet to come. Going back to her family isn't yet planned for her. We wish her strength and fortitude for her remaining surgeries.

During those troubled and complicated times, Sentinelles was able to count on the understanding of the Immigration Authorities in Lausanne to whom we express our warmest gratitude for its collaboration and the expedition of visa extensions as the treatments lasted far beyond the planned deadlines!

The coronavirus is also impacting the arrival of other children planned to come to Switzerland for operations as the borders of some countries are closed and planes are pinned to the ground, preventing any new transfer. We hope that Lawan, a young boy from Niger with noma sequelae, will be able to land soon.

# SENTINELLES

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