

Homeopathy in Swaziland



Grace DaSilva-Hill is a registered homeopath and EFT practitioner and trainer, with clinics in Kent and South West London. She runs a monthly low cost students' clinic from Canterbury.

Grace, who was born and brought up in Africa, was involved with homeopathy in Ghana for three years and is a former member of the Ghana Homeopathy Project; she is now homeopathy coordinator for S.H.I.P.



Jacquie Schaerer was born and educated in Switzerland and moved to the UK in 1973.

She was in private practice as a psychologist in London and Cambridge before she set up the Shewula Health Integration Project. She lives in Newmarket, where she also has a homeopathic practice.

by Jacqueline Schaerer and Grace DaSilva-Hill MARH

The Shewula Health Integration Project (S.H.I.P.) was started by Jacquie Schaerer in 2000. It is a UK registered charity, with objectives to relieve the poverty, sickness and distress of mainly orphaned children, destitute people and the wider community in Shewula, Swaziland (Southern Africa) by the provision of food, clothing, education, shelter and medical aid including homeopathy.

Shewula is a community in the North East of Swaziland that has suffered the catastrophic effects of the HIV / AIDS pandemic coupled with severe food shortage, due to successive years of drought.

AIDS has decimated much of the adult population, leaving many children orphaned. The whole social structure changed as the male population started dying first and many families were left with sick and also dying mothers, many young children, and elderly, mostly frail, grandparents. Nobody was tending the fields anymore and the shortage of food became a real problem, from severe malnutrition to starvation. To make matters worse, the regular rains stopped for three consecutive years.

Jacquie came across the community of Shewula during a holiday, and was deeply affected by what she saw. She started a project that

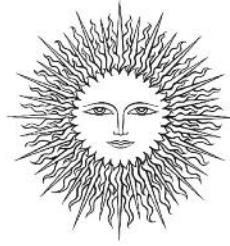
grew from initially feeding the most vulnerable children with a handful of rice or half an apple, to a very complex organisation. Within a very short period of time she was able to perceive the domestic fragmentation caused by AIDS and to set up a feeding scheme providing one ton of food per week for over three years, and she was liaising with schools to accept and feed some of the orphans. She created a community awareness programme in neighbouring sugar estates (70 kilometres away), whereby food, water and clothing are taken to the Shewula community on a regular basis. She also built a day centre for the two- to five-year-old orphans to support their development.

In 2003, Jacquie started to build a homeopathic clinic and accommodation on two acres of land bestowed to her by the local chief, which provides the project with a permanent home and presence in Swaziland. The homeopathic treatment proved so successful that the community wanted to ensure continued treatment for years to come. Therefore, up until recently, Jacquie has spent up to nine months per year working and living in Shewula.

Before Jacquie could start building, the land was covered with over 50 trees, most of them 25 metres high, and dense undergrowth, and these had to be cleared first. The clearance took quite some time, despite the donation of the use of

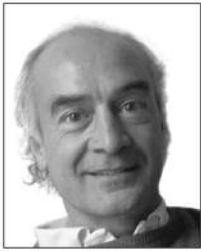
Volunteer accommodation





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➤ a bulldozer which had to negotiate treacherous mountain roads to reach the location.

To stay in keeping with the surroundings, Jacquie decided to build in true African fashion (round / oval) and by using what was available from the land. Stones were collected in the neighbourhood and sand dug from the river. Purchasing cement involved a 100km round trip.

Water was the real problem. Jacquie didn't want to use the community's drinking water, so she had to drive down the mountain, daily, to the river and transport every gallon to the building site. The community very kindly donated every available water container for that purpose, but only between the hours of 10am to 2pm. Before and afterwards they had to fetch their own water supply and all containers needed to be returned on time.

She also needed grass for the thatched roof, so Jacquie employed five women to cut grass during the cutting season (decided by the chief), which took three months. Eventually, after a lot of work and adventures, the building was finished and patients could finally be treated inside.

Other buildings were erected in the following years and the clinic was eventually moved to one of them. The large house is now used for accommodation (accommodates up to five people) and has electricity.

Thanks to a donation from a company in Holland, Jacquie had the funding to drill a well on the site (80m deep) for the use of the clinic, and also to help, and supply water to, the community. The water is pumped electrically into a large tank and distributed from there. The fact that water was found is close to a miracle in a place where historically there is no water. No drilling company was willing to come and drill for nearly two years maintaining that, despite a geological report, there can be no water. Perseverance prevailed!

Not only is a large core of patients maintained, but there has also been a significant increase in casual patients being treated on an ad hoc basis. They come as far as 100 miles, many walking for hours or even days, crossing the borders of South Africa and Mozambique. Follow-up appointments are near impossible under these circumstances. The next group of patients usually brings news about whether



patient X has recovered, and other detailed information ... a natural spread of homeopathy indeed!

It became the norm for Jacquie to be flagged down on the way to patients and asked for help, usually for a very sick or dying relative, and this made arriving anywhere at a prearranged time near impossible. However, to her relief, being on time is not regarded as at all important in this part of the world, and she soon set aside her initial apprehension.

Border protection

AIDS has decimated much of the adult population

Home visit

Jacquie's arrival was always welcome even when many hours late. She often had to walk, leaving the car behind, as the huts where patients waited were inaccessible, or she had to take a soldier with her for protection as she was right on, or sometimes over, the border. She often had one of the local volunteer interpreters with her, but on many occasions she travelled on her own, crossing bushland and rivers from one chiefdom to another, to meet patients and interpreters on location.

A large number of the population were, and still are, dying due to the very high percentage of HIV infection in the region, leaving many children and old people behind. Treating orphans and the very old has therefore been one of the principal activities for many years. Jacquie spent days in local schools or checkpoints (places where small orphans, usually between two and seven years, can meet) treating as many children as time would allow. These children usually have no medical or health care at all, and it is essential that their care is preserved and sustained. Regular special clinics for the elderly, in various different locations, are also held.

Treatment is given to people with a huge variety of conditions, including many acute situations as well as chronic and serious ailments.



➤ The quick reaction to the remedies, and subsequent positive results, which are spread by word of mouth, are responsible for the expansion and ever increasing demand for homeopathy, in a country that is unable to provide the majority of the population with even the basics of health care. As a result, many lives have been saved, and pain and misery alleviated, especially in orphans and the elderly; and that in a community which simply cannot afford orthodox treatment, even if it is available.

The hub of all activities is at the main clinic in Shewula, from where also food, clothing, blankets, water and other necessities are distributed regularly to orphans and needy members of the community, in conjunction with homeopathic treatment. Those activities became necessary due to three years of continuous drought, and in order to alleviate starvation. The large feeding programme (one ton of food per week) ended with the return of the rains in 2005.

There have been many positive developments in the last decade, including help from various organisations with the AIDS pandemic. ARV (antiretroviral) drugs have become widely available and are given free. AIDS clinics have sprung up, offering counselling and testing. Orthodox doctors are visiting periodically now, to cater for the sick. But even with this influx there are still far too many sick members of the community without treatment, mostly due to lack of money, and homeopathy still has a large part to play. It's a real humanitarian challenge, too.

In retrospect, the greatest challenge has been transport – or the lack of it. There was never enough funding to purchase a vehicle, and if there was, it was used up to help and treat the sick and poor and, over the years, cars had to be hired and borrowed.

Only at the beginning of 2010, thanks to a very generous donation, could an appropriate vehicle be purchased, hence securing the continuation of the outreach clinics.

After 10 years of solid hard

work, mostly done single-handed, Jacquie appealed to the British homeopathic community for help and support.

As a result, Grace DaSilva-Hill joined the Project in 2010. Grace says:

This is an amazing project, and I felt so humbled when I heard about it. There was no way I could say no. I am already fundraising for my first trip there.

The project is moving into its next phase, now that we have good foundations of housing, water, electricity and transportation, plus the support of the local chief and the population. We also have our own vegetable garden with chickens, all looked after by our helpers on the ground.

There is much sickness, as you can imagine, and much work to be done. Many children have no families, or they have elderly grandparents who cannot support the family. So there is no money to pay for the bus to go to the nearest hospital many miles away.

We would like to introduce you to this orphaned young man who has such a wonderful smile (see picture on page 49). His name is Ken, and his only possessions are the torn red and white shirt and trousers that he is wearing. And he still smiles!

Many children in Shewula don't go to school; if they are lucky enough to go, they receive food from Monday to Friday at school. Then, between Friday afternoon and Monday morning they have no food. Now, when did you last look forward to going to work on a Monday, in order to get some food?

Elderly people and orphans travel long distances to see the homeopath, and the need is ever constant. Homeopathic remedies work extremely well, as expected, and African populations respond very fast. Peter Chappell's remedies are being used successfully.

The project needs to establish a regular homeopathic service to the Shewula community. When no one is there, a skeleton clinic is maintained and run by local lay people who have learned the basics of homeopathy. Therefore, we need regular qualified volunteers to help keep the project going, when we are not there.

For this to happen, we need to have experienced homeopaths, with four to five years in practice, who can volunteer to go to Swaziland. If this is something you have been thinking about, we would like to hear from you.

We need volunteers who can stay for a minimum of three weeks, or longer if you wish. Please get in touch if you would like to help in Swaziland, and have the experience of a lifetime – learn about Africa and its culture in a safe environment, and develop your homeopathic skills in treating many life-threatening diseases, some of which you will not see in the UK. You will receive full induction before going.

We are also inviting students and postgraduates to come for clinical experience under supervision. This would consist of groups of three for up to three weeks.

We have more plans for the future. Our vision is to establish homeopathy beyond the Shewula area and to empower local people. We would also like to set up some research, as soon as we are able to have a laboratory for blood testing, staffed by trained people.

If you cannot volunteer at the moment, you may wish to consider supporting the project in other ways. Please remember, we can only do this work with your support.

What can you buy in the UK with £10? Perhaps a coffee or two and cake? £10 enables us to treat



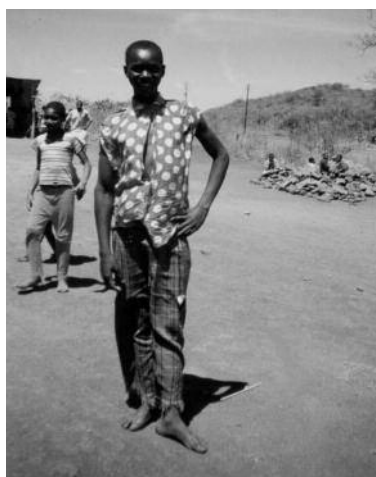
Left: Young orphans to be treated
Above: Treatment at schools

two grandparents and three children for one month. Can you go without coffee and cake on just one occasion once monthly?

We need to refurbish and update our clinic with equipment and a bed where very sick people can rest when they arrive. We also need stationery, homeopathic supplies, basic furniture like shelves and a cupboard. All this costs money. We like to have things made locally, as it supports the local economy, it's often much cheaper and saves on transportation costs.

We are also looking for donations of remedies, homeopathic books, a remedy-making machine, a PC laptop or an Apple Mac, some mobile phones and a wireless modem. A second vehicle would be a safety factor and enable more volunteers to reach people in many more outreach clinics.

You may have other skills to offer. For example, we need help with fundraising – there must be organisations out there which support charities like ours – please tell



Ken

us about them, and save us the time in searching. If you have another skill not mentioned here please let us know; or you may have useful contacts; you may be interested in helping us organise a seminar, or ask your party guests to donate to the project instead of giving you a birthday present. We can be very creative on how we raise funds.

Despite the adverse publicity that has affected homeopathy in Europe, together we can do great work with homeopathy in Africa and achieve positive long-lasting results. Homeopathy works very quickly for people in Africa, because essentially people are less complicated, their vital force is more susceptible to homeopathic remedies, and hence one sees results much faster. Therefore we all have the opportunity to share in something very rewarding, exciting and personally inspiring. We sincerely hope that you can join us in some way, and support this fantastic venture.

We have recently had some help with updating our website, so you will soon see some changes there. Meanwhile, take a look at www.shipswaziland.net.

For more information, or to obtain a donation form, contact either Jacquie Schaerer on jgschaerer@btinternet.com or Grace DaSilva-Hill on gracehomeopath2@aol.com. □

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