

Senator James Perchard Chairman of Sub Panel reviewing Jersey's Overseas Aid Scrutiny Office, States Greffe Morier House St Helier, JE1 1DD

Submission of Fundaçion Luz Y Vida

Dear Senator Perchard,

I would like to begin by giving you a little introduction to the Fundaçion.

Background

The Fundaçion was established to provide resources to support the work and development of palliative care in South America and specifically in Ecuador. The connection arose through an individual who went on a JOAC Overseas Aid trip to Ecuador.

A recent advert in the Jersey Evening Post referred to joining Overseas Aid trips as a "Life Changing Opportunity". We would echo that, as a life changing experience led to our formation.

The link to Ecuador started when Dr Nicola Bailhache went to a meeting during the visit of Reverend John Hart to Jersey to talk about Orphaids, the work he had started to provide homes to the orphans of families decimated by AIDS. In Ecuador, the disease has huge social stigma; it is perceived as a homosexual disease and, with homosexuality illegal, affected families are shunned.

Dr Bailhache, then a GP in St Helier & Grouville, visited Ecuador and ultimately that led to several Overseas Aid working parties going to Ecuador. Dr Bailhache was so struck by the impact of AIDS and the lack of palliative care on people and their suffering, that she changed track to train in palliative care, in order to return to Ecuador full-time.

The main results of this have been:

- a) Patients and their families in Ecuador have been supported through their terminal illness, whether it be AIDS, or cancer, or other illness.
- b) Suffering has been alleviated.
- c) Families are trained to care for their dying loved one and are prepared for the death.
- d) Health professionals in Ecuador have been motivated, trained and organised to provide palliative care and family support.
- e) Encouraging groups of doctors to make representation to the government agencies to support greater palliative care facilities, drugs, training, home support.

Additional information and stories from Ecuador of the work are attached as an addendum.

Why the background?

As a charity which was formed as a result of Overseas Aid working parties and in receipt of $\mathfrak L$ for $\mathfrak L$ aid from the JOAC, we have opinions on all four of the review headings above and that view is formed out of our experiences. Thus, the background should assist in explaining 'where we are coming from' and justify our representations to this scrutiny panel.

I trust that our contribution will assist you in your review.

Yours sincerely

Hugh Lawton, BSc FCCA

Chairman of Trustees

Fundaçion Luz Y Vida

Fundaçion Luz y Vida (Light and Life Foundation)

Submission to Corporate Services Scrutiny Panel

Review of Jersey Overseas Aid

Addressing:

- a) The States' Policy for upgrading the Island's Overseas Aid budget in line with GNI
- b) The JOAC's policies and procedures for the distribution of its grant aid budget
- c) The methods for measuring the effective utilisation of the JOAC's aid budget by recipients
- d) The Islands Overseas Aid contributions [compared] with other jurisdictions.

Our Submissions to the Review Terms of Reference

This submission is made believing:

- The States cannot do everything.
- Jersey is a small community.
- Communities act best through inspired, passionate, motivated individuals.

Upgrading the budget in line with GNI

If it is believed that the States of Jersey already gives a reasonable portion of its wealth to Overseas Aid, then it seems entirely appropriate to upgrade the budget in line with the Island's income growth.

However, this starting assumption that our Island gives appropriately can be challenged.

Comparing with other jurisdictions

The per capita wealth of the Island is in the highest echelons of the world. With that wealth comes the responsibility to be wise stewards. Our image in many parts of the world is tainted by the perception of the economy as a tax haven, financed at the expense of other nations. To the extent that we act with generosity in our overseas aid, we believe that our perception in the eyes of many will improve.

Therefore, all the time that the percentage of our income that is donated to overseas aid lags behind that of other developed nations, we will be seen unfavourably. Arguments we might propose about the better targeting of our aid and the lack of linked aid (i.e. that which other governments give linked to contracts placed with their own national corporations) sound more substantial if our level of giving at least matches the percentage of similarly developed nations.

Given our level of income, it almost demands that we give a better proportion than other nations. The UK, which has a considerably lower income per capita, gave £74 per person in 2005/6 (DFID spending excluding debt relief); Jersey in 2006 gave £66 per person. (see table overleaf)

Fundaçion Luz y Vida (Light and Life Foundation)

	Jersey Overseas Aid	UK Department for
	Commission	International Development
	2006	2005/6
Spending per capita	£66	£74
ODA/GNI	0.18%	0.47%
("Official Development		
Assistance"/"Gross		(due to rise to 0.7% by
National Income"),		2013)

Recent news items from the UK have referred to the present government and the opposition both being committed to meet the new, higher target of 0.7% ODA/GNI currently running at 0.47%, by 2013. Jersey's ODA/GNI is approximately 0.18%.

Looked at from the projects themselves, we feel that, where a commitment has been made for a number of years, increases should reflect at least the growth in cost in the country of that project. Many developing countries with a poor economy will have a working economy based on the US dollar, because the local currency is too volatile or not trusted.

With funding applied for and allocated in Sterling, there is the potential for fluctuations in what is available at the project site. It seems to us that these are situations where the Commission would benefit from an agreed adjustment procedure for these fluctuations.

It is appreciated that this could add to the burden of an extremely efficient operation in the JOAC, however, this would only apply to a small number of situations, since most are completed without dramatic movements in exchange rates or inflation.

It would be of interest to learn if any of the resident banks would be willing to offer inter-bank exchange rates for funds required in USD or similar.

JOAC's Policies and Procedures for Distribution of Grant Aid

Project Selection

Selection of appropriate projects clearly addresses the considerations:

- a) Need to look for sustainability after any initial input.
- b) Project team's experience in the country and type of project.
- c) Alignment with overriding principles, i.e. alleviation of suffering, life improvement, education, health benefits, ecological impact.

It has been our experience, especially that of Dr Bailhache both working in Ecuador and previously on JOA working parties in Albania, that preference should be given to working through NGO's. The additional layers of bureaucracy and accompanying corruption from governmental involvement in many places can stifle a project's success.

The trustees of the Fundaçion have access to experience through Dr. Bailhache and the former President of the Overseas Aid Committee, Ann Bailhache. We wonder if, in regard to experience, the charitable equivalent of non-executive directors could be

Fundaçion Luz y Vida (Light and Life Foundation)

a useful addition to projects where there is little experience of running overseas projects, but where the enthusiasm is significant.

An experienced individual could act both as an advisor to the project and as a representative from JOAC, assisting both the project with experience and the JOAC in assessment and approval of an application for funding.

It may be that good ideas founder because those having the idea lack the skills to bring it to completion. If that seems sensible, it would inevitably fall to someone to maintain a list of appropriately experienced people, as indeed is done for the Community Work Projects.

Procedures

The Fundaçion has found the process of applying for funding straightforward and has no material suggestions related to this part of the process. We would also add that the allocation of a JOAC grant to the Fundaçion has been a great encouragement in this work.

Project Results, Monitoring and Review

The way the community works, through inspired and motivated individuals, mean that we have to trust people. Therefore, it seems important for the Commission to know the organisations applying for grants. This is one of the benefits of belonging to a community like Jersey where most people know, or know of, one another. A "light" touch in review would then avoid tying up resource in excessive audit work.

If there were no monitoring, then the process could be open to abuse, thus the present process of reporting to the JOAC on the results of the expenditure seems appropriate. It is a difficult area, particularly where many projects are being run in parts of the world where corruption is rife. It is thought unlikely that inappropriate applications is a problem, rather the difficulty of ensuring it is successfully applied overseas. Hence, the importance of experience and expertise referred to earlier.

However, at present the cost of administering the JOAC expenditure is admirably small as a percentage of the budget (0.9%). If too great an effort is made in auditing the results, then the cost will rise with no benefit to those the budget is there to support. In comparison, the UK's DFID spent 5% of the budget on administration.

The Trustees, Fundaçion Luz Y Vida, Hugh Lawton, Chairman

Page 3 E:\Scrutiny Panel 2007.doc 19/01/2007 13:23:00

Home visits are different in Ecuador, they take much longer, there are no friendly district nurses to call and many cultural differences.

For example, last Tuesday I drove 60 km to see a 75 year old lady dying of cancer. The remaining ten of her sixteen children had different aims, the two who had asked me to visit wanted me to relieve her pain and as she lay semiconscious calling out ay-ay-ay the Quichua word for pain, it was obvious to see why.

The daughter who was looking after her burst into tears when I said that as her mother could no longer swallow we should give her pain relief by injection and I would teach them how to do this. Why was she crying? Well, she had heard about "these injections" and that they made people die more quickly, I tried to reassure her that this was not the case but she felt differently. This daughter said she would rather hear her mother groaning than give the injection because with each sound she knew that her mother was still alive. We had to talk at length and when every one was in agreement, another complication arose, the daughter did not read or write and I needed to leave everything explained with a written backup of how to use each medicine.

As you can see home visits are different here!

Nicky Bailhache

REPORT ON THE PALLIATIVE CARE PROJECT IN QUITO, ECUADOR, 2005.

The aim of this project is to provide good palliative care and education in the subject; this should increase awareness amongst the medical profession and public and hopefully make good pain and symptom control available to many more patients in their last days. We also aim to provide emotional and spiritual support to both patients and their families.

Home Care: The team now consists of a part-time doctor (the first who was sponsored by Fundacion Luz y Vida to study for a diploma in palliative care), a part-time nurse and me. We saw 60 patients and their families in 2005 which was an increase of 50%. 90% were able to die in their own homes with the support of the team; our patients are slightly younger and included four teenagers this year. Care can also be complicated by the long distances we sometimes have to travel. The nurse has begun to study for a diploma in palliative care and the home care team is now the best trained of all the teams where I work.

<u>Inpatient Care:</u> In 2005 I was the supervisor of inpatients who needed palliative care and supported by two junior doctors, fourteen nurses, one psychologist and one social worker. This was done through an Ecuadorian Institution (Fundacion ABEI) and we supported 97 patients and their families. This involved a daily presence in the unit, but with regular tutorials for both the nurses and the doctors. Both the doctors are studying for their diplomas and they are now much more skilled and capable of treating most patients without supervision.

We implemented the Liverpool Care Pathway which is a protocol that should improve standards of care for the dying and will be possible to audit whether we are achieving these standards or not. Many units in the United Kingdom use this protocol and it has been a challenge to translate and adapt for Ecuador.

In the same Fundacion I also see outpatients.

<u>Day Care:</u> The Carapungo clinic has reopened and provides a lovely social opportunity for some of our isolated patients.

The Cancer Hospital: It now has a new palliative care doctor, she started with no training but with a lot of enthusiasm; fortunately she came to us for help and receives a weekly tutorial and has also been sponsored to do a palliative care diploma. She has no help in the hospital and sees far too many patients (800 last year). I hope to provide more support to her next year especially in view of her work overload.

Education: As mentioned four people are studying for their diplomas and JOA has helped with 50% of the costs; all are enjoying and benefiting from the courses. Our first doctor to be sponsored two years ago is now teaching

palliative care in the two largest universities in Quito. I have had weekly teaching opportunities in ABEI and with the doctor from the cancer hospital. This year has been the most active educationally and next year looks even more promising.

Finally, I would like to thank JOA for the support to me and educational grants to my team. This year has been the most successful since I arrived and we now have some promising Ecuadorian palliative care professionals. I am now much more hopeful for the future.

Dr Nicky Bailhache