
Kinondo Kwetu Hospital in Southern Kenya

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Introduction

Kinondo Kwetu Hospital is certified by the Kenyan authorities as a level 4 Hospital, which means that they can perform all surgery except on the heart and brain. In 2022, about 120000 patient visits were registered, over 1300 babies were born and over 900 HIV-infected patients visited the hospital within the scope of a USAID-funded Stawisha Pwani project. Since 2015, 225 babies have been born at the hospital by HIV-infected mothers attending a mentor program. To this day, none of these babies have attracted HIV. The hospital has special clinics also for TB, diabetes, hypertension and gynecology.

This is a brief tale about why and how it was founded and the plans for its future.

In 2005, a Swedish family established Kinondo Kwetu, a “barefoot luxury hotel” at the coast in southern Kenya. They soon realized that the people in Kinondo villages had no functioning health care. Deliveries took place at home, in primitive huts and with poor sanitary conditions, with the help of traditional birth attendants. The mortality was high among delivering mothers and their babies. Some school children’s hearing was impaired due to repeated ear infections and many children suffered from the jigger parasite that caused anemia and foot pains. Malaria was not treated adequately. HIV was not talked of and, therefore not treated. In urgent cases, when hospital care was needed, the patient was carried to the hotel, as it disposed of a car that could be used as an ambulance.

So, the family decided to establish a clinic for affordable basic healthcare. To acquire funding, they founded Kinondo Kwetu Trust Fund and raised funds to build and establish the clinic, that started its activities in November 2008, well knowing that the fundraising

would have to be an ongoing activity. The average income per day is among the lowest in this part of Kenya. They were lucky to find donors with a long-term view so that they could build the clinic and run it for the first years.

It was obvious that the clinic was an answer to a need for good health care. Already in November 2009, its laboratory was recognized by the Kenyan authorities for its “excellent work” and the clinic itself for offering for best TB/HIV service in the district.

A focus was to bring down the mortality of delivering mothers and their babies. CEO Harrison Kaingu, who joined from the start in 2008 as the hospital’s laboratory chief, saw that very few pregnant women came to the clinic for antenatal care and delivery. He also understood this was due to the strong resistance from the TBAs, the traditional birth attendants. So, he invited them to, for a payment that corresponded to what they would get for traditional delivery, help him by spotting pregnant mothers as early in the pregnancy as possible and bring them to antenatal care. Now, they also assist at hospital deliveries by taking the father’s role in other parts of the world and assisting the mother after delivery. At meetings one Thursday per month at the hospital, Harrison and the TBAs share information with each other. This group of TBAs that work for the hospital has grown. They are very well respected in their villages and, therefore good ambassadors for the hospital and a perfect means of communication between the hospital and the villagers.

In 2018, Kinondo Kwetu Hospital entered a research partnership with Swedish Karolinska Institute to develop an AI-based diagnostic method for cervical cancer. The purpose is to improve the survival rate for women with cervical cancer in countries like Kenya, where the lack of pathologists prevents this disease from being detected in

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time. It has been a successful project that has resulted in many women receiving treatment for cervical cancer and its early stages. Read more <https://healthcare-in-europe.com/en/news/ai-delivers-cervical-cancer-screening-to-rural-areas-of-kenya.html>. The research to develop AI-based diagnostic methods now continues for other diagnoses.

Financial Reality

In 2017, the number of patient visits passed 100000. The costs of running the clinic had increased proportionally, as well as the need for funds to cover losses. It was clear that an operation of this size needs to be able to financially support itself or find other long-term funding, it will not survive if it is dependent on funding through donations from private persons and foundations.

The clinic's lack of a surgical room also caused great concerns, as complicated deliveries had to be referred to the state hospital quite a distance away, sometimes resulting in tragedy. These were the two main reasons for searching for funds to build two surgical rooms. A hospital that offers surgery is certified at level 4, resulting in better payments from NHIF, National Hospital Insurance Fund, so this was a way to improve not only the delivery service by offering Caesarian sections and other surgery, but also to improve the clinic's ability to generate income to cover its costs.

The hospital was certified at level 4 in January 2021, but it has taken until July 2022 to get adequate payments from NHIF. The hospital still shows losses, although the

cash flow is improving. The goal is to reach financial self-sufficiency in 2024.

The future

By building the hospital and offering affordable quality healthcare, Kinondo Kwetu Trust Fund has made a valuable contribution to the infrastructure in the district. It is in many ways a role model for the state-run hospitals in the district. Nurses and medical officers with work experience from Kinondo Kwetu Hospital are in high demand. The hospital is developing into a training center for the AI-based diagnostic method for cervical cancer and other conditions.

In many countries, a good long-term solution for the future would be to hand over the hospital to the authorities. Unfortunately, this is not the case in Kenya, where corruption and mismanagement would most likely soon impair this very well-functioning operation.

As stated earlier, the goal is to reach financial self-sufficiency. If or when that goal is reached, then the wish is to implement an administrative structure where the local management of the hospital, in the form of a partnership, like in a law firm, would run the hospital and become a showcase model for implementation in other places.

But it is a great challenge for a hospital to reach financial self-sufficiency in an area where the average income is among the lowest in Kenya. Finding long-term public funding would give long-term stability for the hospital.