18 / February 17, 2005 The LAS VEGAS SENTINEL-VOICE War waged in Kenya for unused land

Special to Sentinel-Voice A land hunger crisis in Kenya is fueling tensions between pastoralists, cattle grazers and landless Kenyans who are being evicted from government-owned lands.

Hundreds of thousands of hectares belonging to the well-to-do lie fallow and unused, while Kenyans fight each other for access to tiny parcels of overworked land and muddy trickles that were once rivers. A governmentcommissioned report last year

by lawyer Paul Ndungu alleged that Cabinet ministers, members of Parliament and state companies were "illegally occupying" much of the "prime" property.

Since the Maasai community invaded White-owned farms last August, the land hunger crisis in Kenya has intensified, driven by a bitter drought, failed harvests and intense competition between crop farmers and cattle keepers for increasingly scarce resources

This week, heavily armed security personnel evicted over 3,000 squatters from Mt. Kenya Forest in Meru - a piece of land they called home for the last 20 years.

Across Kenya, groups who previously lived together in peaceful cooperation, such as the Garre and Murule clans who keep thousands of camels in the arid wasteland that borders Somalia, are making war over the land and the little water it holds.

In a letter last month,

Catholic bishops Patrick Harrington and Maurice Crowley described the situation as "serious trouble" and pleaded with the warring communities to "pull back from the brink".

- Some Kenyan politicians say the country's best land still remains the domain of the descendants of English colonialists. The estate of Lord Thomas Delamere, for example, contains 26,000 hectares in the Great Rift Valley.

African statesman succumbs to health

Special to Sentinel-Voice

LOME (IRIN) - President Gnassingbe Eyadema of Togo, Africa's longest serving head of state, died over the weekend while he was undergoing medical evacuation for treatment abroad.

The armed forces of the small West African country immediately suspended the constitution and named one of his sons, as head of state.

The former army colonel, who seized power in a 1967 coup, had ruled Togo with an iron hand for 38 years. Eyadema's death was announced on state radio by Prime Minister Kofi Sama on Saturday night.

Two hours later, Gen. Zachari Nandja, the Chief of Staff of the Armed Forces, said on state television that Faure Gnassingbe, the president's son and a junior minister in the government, had been appointed head of state.

"The Togolese armed forces swear allegiance to Faure Essozima Gnassingbe as president of the Republic of Togo," said Nandja, who was flanked by the country's other top military commanders.

The move caught some Togolese by surprise as the President of the National Assembly, Ouattara Sambare Natchaba, by law, should have become acting head of state following the death in office of the president.

Eyadema had several wives and was widely believed to have fathered more than 100 children, several of whom have become influential figures in national life.

(Continued from Page 7) was, 'Oh, come on, get a clue!' It's about keeping women in their place, viewed as sexual objects."

Far from being less intense at higher professional levels, Carnes said that gender bias actually intensifies for women as they pursue higher professional rank.

"Generation after generation the awareness of gender bias increases," said Carnes. "My mother experienced gender bias in college. For me, college was a given but it (bias) kicked in at medical school. Now, for the generation after me, it doesn't kick in until medical school or residency, but at the fellowship level or faculty level where the minority level [of females] dips below 50 percent substantially. The higher up they go, the more they hit against the system that is biased against women across the board."

Dr. Alan Swann of the University of Texas Medical School at Houston is a psychiatrist specializing in suicide and in stress. He praised of the quality Schernhammer's study and agreed that much is still unknown about why physicians, male and female, have a higher suicide rate than the general population, though alcohol and substance abuse, depression, stress and loss of social supports and isolation, such as after divorce, play a part in suicides generally.

Swann said physicians' overall suicide rate, though troubling, remains lower than that of alcoholics, and lower still than that of elderly White men, who have the highest suicide rate. Still, Swann was surprised to see female physicians' risk far exceed that

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of other women.

But, Swann said, alcoholism, major depression or bipolar disorder magnify the risk of suicide and "it's a higher magnification in women than in men. Sort of like being a doctor does, but it's a gender effect."

Attention to all physician suicide is overdue, said Hendin, a suicide specialist. He said Schernhammer's study indicated that female physicians had risen to the persistently high rate of male physician suicide and that widespread changes are needed in their profession.

Although stressful events may trigger suicide, most people who die by suicide already suffer from a mood disorder, most commonly depression (30 percent to 70 percent of suicide victims), according to the American Foundation for Suicide Prevention, and depression is treatable.

"Physicians don't diagnose depression in themselves or in their patients. They aren't trained to recognize it," said Hendin. And when they do, they may be penalized. "If they indicate they are in treatment, in some states that makes it hard to get their license, and there are some problems with regard to insurance and how

hospitals treat them, if they will be watched or guarded," Hendin said. "And that's without regard to whether they have impairment."

Hendin said his foundation, along with the Milbank Foundation for Rehabilitation, have already gathered physicians, representatives

from hospitals, the U.S. medical licensing boards and insurance companies, to find out how to make it easier for physicians to get help. Their recommendations will be published late this year or in 2006.

for WOMENSENEWS.

Suzanne Batchelor writes

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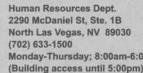
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