

# Newsletter

Issue 30. July 2007



Health And  
Development Aid Abroad  
— Australia Fund Inc.

ABN 43 739 862 351  
Registered Charity No. 1273

## HADA'S VISION

To see medical, educational,  
agricultural and sanitation  
programs established in  
countries as needed.

### Office Bearers

HADA Board for 2006-2007

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## Ten Years On . . . 1997-2007

The changing face of *Stichting Assistance International (China)*, (now called **Kham Health Associates**)

Saving face, changing face? 'Face' is so important in this society. Sometimes we make mistakes and cause our local friends to 'lose face' or be embarrassed. Sometimes they do things we don't understand, and we do things they don't understand, just because we come from different world views.

Changing face? Yes, we are now in transition and the new 'face' of SAI will be Kham Health Associates. During recent years, many relationships have been built through medical and educational projects, teaching English, or simply just being a friend. Relationship is also so important in this society. In a society where mistrust and jealousy often prevail, genuine relationships and kindness are highly valued.

In order to keep in step with the changing NGO laws of the land, SAI needs to change its 'face' slightly to become a representative office of a profit making company. Again, we are very thankful to a long-time Australian friend who has generously agreed to allow us to represent his company.

Looking back over the last ten years, SAI has a lot to be thankful for. Doors have opened to places previously closed and since April 2006, staff have had the privilege to live in Kanding City, closer to the project sites and closer to the people we work amongst. Nomads have been treated and some healed of Hydatid disease. Many families have seen poverty alleviated through child sponsorship programs, yak purchasing, or homes being built for homeless elderly people. In this all-important period of building relationships with local people in Kanding, we hear from other friends working nearby, of lives being changed. Seeds of friendship sown some years ago have yielded fruit in the form of recent renewals of contact with key personnel (some in positions of influence and authority) who are well placed to assist with the ongoing work of SAI.

### Staff needs

Qualified staff, especially medical doctors and an ultrasonographer, plus administration personnel are needed to help with existing projects and to follow-up patients, students and their families. From July, an Australian ultrasonographer is able to help us with our Hydatid Clinic on a short term basis. This is a great encouragement!

*Continued over page*

## Facts and figures

From a recent survey we have ascertained that our patients (approx. 600 people have been to our clinic) come from areas flung far and wide throughout Shiqu County. The County is 25,141 sq kms, being the largest and remotest in the province. It is a distance of 1,070 kms from Chengdu, the provincial capital. Ninety percent of the County is grassland and lies at an average altitude of 4,000 m above sea level. Plans for this year are to visit previous patients to follow-up their treatment and check on their condition. Some patients take three days to get to the clinic by horseback or walking.

We are also searching for alternative premises for the new office. We have had a suitable temporary solution, but now the office needs to move out to its own premises. One apartment recently viewed could be quite suitable as far as security and good location are concerned. Being on the seventh floor it has the added bonus of a lift, but at the moment the rent is far too high, so we are negotiating with the owner.



# Kurdish Widows' Project

**Location:** The project is located in Shorish Collective Town adjacent to the town of Chamchamal, 70 km south of the City of Sulamaniyah and 40 km north of the City of Kirkuk in northern Iraq.

## Community Situation

Shorish Collective Town is a resettlement town built by the Iraqi Government under Saddam Hussein in the 1980s. It was built to rehouse Kurdish survivors of the government's demolition of Kurdish villages and organised mass disappearances. In this community of thousands, a high proportion of widows or Female Head of Household (FHHs) exists. This is a result of the men

in their villages being apprehended for execution by the Iraqi Government in 1988 under the Anfal campaign. Conservative estimates suggest that 1,500 FHHs exist in the community. A household food security assessment in 2001-2002 by Save the Children – UK stated the FHHs and their children belong to the poorest and most vulnerable group in northern Iraq.

The women of Shorish have courageously supported and managed their own households and survived chronic poverty with little and irregular external assistance. Since 2001 surviving families of the Anfal have received a small monthly pension from the Kurdish Regional Government. It amounts to approximately \$A124 a month for the whole family. It is not sufficient to support the widow and her dependents. Work opportunities outside the home are relatively non-existent and unsatisfactory at best. Most families survive with limited resources and lack funds for larger household pur-

chases and emergencies. Cultural and religious restraints as well as widespread illiteracy limit women's empowerment.

The local government has made some inroads to improving community infrastructure and services in recent years. Sewage systems, sealed roads and local clinics are being built for the first time. Household incomes, however, remain meagre and vulnerable to risk (sickness, drought, loss of employment). There remains opportunity for organisations to address community development needs and poverty alleviation strategies at the grass roots level.



This is an existing project that was established in September 2005. The facilitators have worked in the community since 1999 and have had contact with many of the project participants since that time.

Two loan groups currently exist of 12-15 members. Each lady receives \$A496. \$248 is a gift towards an approved purchase and the other \$248 is a loan to be repaid into a group fund over twelve months. Repayment of the loan is at a set day each month and in the presence of the entire group. A record book is documented and signed. Once the loan is fully repaid the money is redistributed and used again, each lady receiving again her \$248. In this way the loan can revolve indefinitely. Both groups exhibit a 100% repayment rate. The first group has repaid its first loan in full and has now started on its second.

The loan does not revert to the initial \$496. It is a first-time bonus. \$496 is given to offset the extreme inflation currently in Iraq since the war. Only \$248 is to be repaid as it is within the capacity of the ladies to pay back. Funds are securely kept in a safe in a group leader's home.

Participants have used their loans to purchase such things as cows, sheep or goats, sewing machines, much needed home maintenance, computers for their children studying at university, fridges and air-coolers.

### Project Aim

- To support the vulnerable and disadvantaged in Shorish Collective Town.
- To provide the poor women with access to small loans for lump-sum purchases of needed items not normally afforded.

### Steps

Expand the current project and add two new savings and loans groups of twelve members each in six months.

### Project Participants

The participants are twenty-four widows in vulnerable circumstances and the project was planned and designed with members of the par-

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should be addressed to:**

**HADA  
PO Box 733  
ASHMORE CITY QLD 4214**

ticipant group and local community. We work directly with a key group leader and mentor from the participant group in the selection, implementation and monitoring processes of the project.

### Monitoring and Evaluation

Evaluation is an integral part of the project as a staff member is constantly visiting and residing within the target community. Monitoring operates through receiving continual feedback from the participants concerning the project's structure and procedures. Home visits assess the appropriateness and effectiveness of the loan purchases.

The achievement of the project aims can be monitored and evaluated through:

- Attendance and commitment to monthly loan repayment meetings.
- A high percentage of loan repayments (currently at 100% repayment rate).
- Loan groups being able to manage and maintain project procedures with less and less outside supervision.
- Loans and the consequent purchases meeting actual needs of participants.
- Three-monthly reports to HADA.

HADA would like to see another \$12,000 come in for this project.





# Current HADA Projects

*These projects have been approved by HADA*

## HADA, Yunnan, China

Managers: Dale and Jackie Bragg  
Project Officer: Gary and Ailin Leong

- Ninglang: Micro Enterprise Development; clothing for school children; sponsoring school children; training English teachers.
- Wenquan: teaching English; training English teachers; sponsoring school children; water purification and heating.
- Longchuan: Micro-Credit loans to poor families in pig and cattle farming to improve the community's standard of living; drug rehabilitation program.

## HADA, Astana, Kazakstan

Manager: Hubrecht (Hubert) de Vos

- Step: training to achieve skills to ensure that people can find gainful employment or go into business themselves.
- Pregnancy Crisis Centre: helping people make sensible family planning decisions; helping women deal with the distress caused by sexual abuse; training counsellors.
- Open Doors Community Centre: assisting the youth of the community.

## Associate organisations' projects

### Kham Health Associates (formerly SAI), Sichuan Province, China

Managers: Keith and Barbara Richardson

- Shiqu: screen and treat people with Hydatids; educate the whole community in Hydatids prevention.

### Phnom Penh, Cambodia

General Manager: Sharon Lim

- Village school projects.

Manager: Martin Aeme

- Vocational Training Centre: training young people to gain saleable skills in computers, sewing and metal work.

Manager: Tim Paton

- Bridge of Hope: assisting street children to a better life.

### Entreaide Globale, Hohhot, Inner Mongolia, China

Manager: Philip Lam

- A Cup of Water: provide finances for poor children to attend school; teach English and English teacher training.

### Bridgewater Care, Guiyang, China

Manager: Karen Malone

- Community based home rehabilitation and physiotherapy for recently disabled and trauma patients.

### International Assistance Mission, Herat, Afghanistan

Manager: Iris Jordi

- Primary Mental Health: improve mental health care of local people, through training and equipping of medical personnel, community leaders and through the provision of mental health services.

### Literacy Project, Côte d'Ivoire, West Africa

Manager: Denise Rhodes

- Literacy for teachers and children.

### Consulting Training and Support, Oujda, Morocco

Manager: Daniel Boegli

- Care of Cerebral Palsy children in their homes.

### International Nepal Fellowship, Nepal, Dang Province

Manager: Dr Julie Lincoln

- Leprosy and Tuberculosis program.
- CATS Youth assistance program in Gourahi.

### Shorish Widows, Northern Iraq

Manager: Emma Baxter.

- Micro-Credit program.

*All projects in the Newsletter are approved for tax deductibility*

**Please make your cheque payable to HADA Relief Fund. Do not include the name of the person or project on the cheque.**

Grace Farm in Brazil has been handed over to local people and HADA is no longer involved.

**Thank you** to all who made donations to the **Shorish Widows' Micro-Credit Project**. We have forwarded \$12,000 to Emma Baxter which is helping twelve widows. Now we are looking for another \$12,000 to enable another twelve widows to be assisted.

## From the Secretary . . .

Dear Readers and Supporters of HADA,

We're halfway through the year already! And still so much to do.

This year SAI celebrates their 10th year of service, a milestone in any one's language. HADA is also approaching a similar milestone and with that in mind, the board has set aside one day in July to "navel-gaze". We hope through this process to locate our strengths and weaknesses and as a result, to improve our service to "the world" and/or the beneficiaries of our projects. In any business, it is sound practice to take stock, review progress, cast off that which hinders and grasp that which improves the work. We would like to invite comments, both positive and negative, which can be brought to that day.

Once again, from all of us, a big THANK YOU.

C.L.M. (Kees) Moolenschot

Hon. Secretary.

## More Wheelchair Donations Open Doors

### Bridgewater Care, China

Thanks to funds that have come to us from HADA in the last year, we have been able to donate thirty-five wheelchairs to the poor in two urban communities in southwest China. We have located many people with disabilities who have lost hope for life and have been extremely physically and economically limited. Two 13-year-old children with progressive neuromuscular diseases, find it impossible to attend school past the third grade. We have continued to not only give them weekly rehabilitation assistance for exercises to slow the disease progression, but also have begun tutoring them. Both are delighted with the opportunity to study again.





**Health and Development Aid Abroad –  
Australia Fund Inc.  
PO Box 733  
Ashmore Qld 4214  
ABN 43 739 862 351**

*I would like to make a donation to HADA*  
(please mark the appropriate boxes)

**Non Tax Deductible Gift.** Make your cheque payable to **HADA General Fund**

- HADA General Fund \$ .....
- Make a donation of \$ ..... for .....

**Tax Deductible Gift.** Make your cheque payable to **HADA Relief Fund**

- Make a Tax Deductible gift of \$ ..... for general distribution
- Make a Tax Deductible gift of \$ ..... for .....  
(person or project)

Title ..... First Name ..... Surname .....

Address .....

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I would like my receipt sent to my email address .....

Signature .....

I/we will be paying by cheque as above OR

Visa  Mastercard  Expiry date ...../.....

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Name on card (Please print) .....

CVV (last 3 numbers on back of card in signature block) .....

Credit card transactions will show as **Strata Pay** on your statement.