

Issue 55. June 2014

HADA

encouraging development ... inspiring hope

www.hada.org.au

Health And
Development Aid
Abroad — Australia
Fund Inc.

ABN 43 739 862 351

HADA's VISION

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

All projects listed in *Inspire* are tax deductible. All monies for these projects and personnel involved in them are sent in their entirety except for bank charges. HADA does not use these funds for administration.

HADA office bearers for 2013-2014:

President Kees Moolenschot 0417 304 742

Secretary Jeanie Young (07) 5564 7476

Treasurer Neil Young (07) 5564 7476

hada@pobox.com

Medical Training in Africa

D.R. CONGO, UGANDA, GHANA

EDICAL Training in Africa was approved as a project with HADA in 2011. Prior to this, it was mainly Drs Judith Goh and Hannah Krause who volunteered in developing countries, mainly in Africa, treating women with obstetric fistula and incontinence together with upskilling local health practitioners. Since that approval was given, and with the donations received, we have been able to expand our services and treat more women.

Socially ostracised

Utero-vaginal prolapse is a common problem in Australia and Africa. However, in Africa, the women are also socially isolated and often ostracised from family, in particular their husbands. It costs \$215 to treat each woman with a prolapse. This includes travel to and from hospital, food and all hospital costs.



Women gathering outside clinic for assessment with Dr Hannah Krause

Engender Health [USA organisation] ceased its funding for fistula women in 2013. With donations to Medical Training via HADA, we were able to raise funds to continue to treat these women. It costs \$324 for each fistula woman. As a woman in rural Africa usually earns less than a dollar a day, the cost of surgery is beyond her means.

Each time we visit Uganda for example, we do up to 40 prolapse surgeries and 70 fistula cases. We have been going over to Uganda at least twice a year.

Obstetric fistula is the most common fistula worldwide. It is caused by prolonged, obstructed and neglected labour. The long labour results

Continued on page 2

in a stillborn baby and severe maternal pelvic injury. An obstetric fistula results in abnormal communication between the vagina with the bladder and/or rectum. This means that women will leak urine and/or faeces uncontrollably into the vagina. These women — who are mostly young and in their first pregnancy — are usually ostracised by their husbands and families.

The medical team

Since 2011, the team has expanded to included Drs Judith Goh, Hannah Krause, Miriam Lee, Neroli Ngenda, Barbara Hall and John Taylor. Nurse Jasinta Suric-Maguire has also assisted, as has Mr Darren Diserens.





Ugandan fistula women saying 'Thank you'

We have visited Democratic Republic of Congo twice, far western Uganda multiple times and Ghana twice. The team trained doctors and nurses in the management of obstetric fistula, pelvic organ dysfunction, cervical cancer screening and obstetric vacuum extraction. A formal pelvic floor workshop in Ghana took place in April this year. Nurses and doctors from three hospitals attended.

We are very grateful for the ongoing assistance by HADA and supporters to enable us to continue our work.

Combatting typhoid

Medical Training has also contributed to a typhoid campaign. Prior to 2010, admission to hospital in western Uganda with typhoid gut perforation was uncommon. However, since then there has been an escalation of admissions, up to one a day with significant morbidity and mortality. In 2011, Medical Training provided funds for training key community members in villages and health-care givers in ways to reduce typhoid. The campaign was successful in reducing hospital admissions and deaths in the region.

A container filled with donated medical equipment was sent to Uganda in 2013, and was distributed to three hospitals (Kagando Hospital, St Paul's Health Centre and Ishaka Adventist Hospital). Donations of clothing and school satchels were also included to be distributed in a couple of orphanages and rural villagers.

Good Neighbor Society

MONGOLIA



ER name is Byandelger (12 years) and has both parents and a sister living together. She is attending the Family Development Program in Hailaast, Ulaanbaatar. When coming to the program she had a hard time sitting quietly and concentrating; she also swore at the other children.

Some time after she joined the program, we saw progress in her study and behaviour but found she had been stealing from other kids. Several children testified to her thieving, but we weren't successful in getting any evidence so there was insufficient proof with which to confront her or her parents.

The local police were notified of her actions and through some local people she was released as a minor. Since September 2013, as Byandelger has worked through the program, she has been very open in sharing about her stealing with our staff, for which we are very grateful. Byandelger has asked the other kids to forgive her and promised she won't do it again. We've encouraged her to keep coming to the program, which she enjoys immensely, and has helped greatly improve her attention to study and relating to other children.

The family

Both her parents, alcoholics, have not had steady jobs or income throughout their lives. The house is always open to friends and strangers for drinking, and domestic violence is common. This, of course, is never helpful for Byandelger. She doesn't have space of her own to study and doesn't receive good parenting.

The family live in a five-walled ger (portable round house) which our NGO staff have visited many times this year. There is little furniture, and the ger remains in very poor condition without winter insulation.

Byandelger's father is working at a construction site. During warmer times, he has several jobs, but in winter it's hard for him to find work, so he ends up drinking most of the time and putting pressure on other family members. The local police are watching him because of the domestic violence he creates.

Byandelger's mother, with chronic epilepsy, receives some attention from the local hospital. Due to her physical condition, she can't take full-time jobs. She sells house-keeping items in the market to bring some income to the family.

Byandelger's older sister, Baasandelger (16 years), is studying to achieve a profession. She is the main person taking care of family matters and therefore shows little respect to her parents.

Some improvements in the family

Both parents attended parents' seminars for three weeks on their own initiative, which is very encouraging for our staff. They are learning to express their feelings better, and are open with others, especially admitting they have an addiction problem and that they need help. There isn't much improvement yet, though, with the father.

Byandelger is enjoying youth club and has improved a lot in sharing her ideas and thoughts with others in the group. Now she is helping the cook who feeds 65 children and is interested in learning a musical instrument.

Things we consider for this family

- 1. Encourage the parents to join the parents' group, and to be watchful of their drinking habits.
- 2. A small business opportunity for the mother, though it isn't feasible as yet, as both parents struggle in using any income to meet their family's needs, and rather use it for alcohol consumption. Primarily, we need to pay continual attention to the parents' drinking problems before we give any further financial or material assistance.
- 3. Without proper treatment the mother has daily occurrences of seizures, due to chronic epilepsy. To help her find the right medication will bring big relief for the whole family.
- 4. The staff will look into any opportunity of supporting Byandelger in learning music and computer skills.

HADA and Tax Deductible Gifts

ADA is a Gift Deductible Recipient registered with the Australian Tax Office. We have the privilege of offering donors tax deductible receipts for donations to approved projects.

What is an approved project?

AusAid and the Australian Tax Office stipulate the types of projects that are able to receive this status. Welfare assistance, that is the running of institutions, orphanages and like activities are expressly excluded, as is sponsoring children to go to school. Assistance to a community where the whole community benefits is tax deductible. If a single project includes micro credit, clean water supply and sponsoring of children, then tax deductibility is acceptable.

All projects listed on our project page are approved for tax deductibility. Some donors like to leave the distribution of their funds to the HADA board and mark their gift 'where most needed'. This allows us to help a specific project when a need arises and having this discretion is much appreciated.

By donating to tax deductible projects you are able to claim back on your personal tax return and so the Tax Office will return to you a portion of the funds donated.

All people who work with HADA are volunteers, and our operational costs of 0.9% for 2013 were minimal, paid from General Fund. Tax deductible funds are not used for administration. Our only expenses are bank fees which we try to minimise, so your gift has the maximum potential for good.

All HADA projects are run by people who are personally known to members of the board and applications go through an examination process before being accepted as a HADA project. All managers of projects are required to submit three-monthly reports.

We, the HADA board, highly value your confidence and trust in us and thank you for your donations over the past year. If you have been thinking of making a donation, but have not got around to it, now is the time and you can include the amount in this year's tax return.

Either go to www.hada.org.au (preferable) and make the donation there or use the donation form that comes with *Inspire*.

Thank you. Neil Young, Treasurer

Early Education Essential

CAMBODIA

OOD Neighbours Pre-School was a joy to visit in March this year. The class was practicing their English! Can you imagine 25 five-year-olds loudly calling out in unison the letters of the alphabet one-by-one and then words with which each letter started? They were very enthusiastic! Two very capable teachers teach this and other subjects, and one our friends in the area teaches art classes.



The pre-school was commenced two years ago in Trialeu Village, Takeo Province, at the request of the local village people. It is recognised that children who attend pre-school are less likely to drop out of primary school.

Donations through HADA keep this class going, and more pre-schools are needed in the surrounding villages. These will commence as funds become available.



~ Brian Allbutt



encouraging development ... inspiring hope

Health and Development Aid Abroad -Australia Fund Inc. **PO Box 733**

Ashmore City Qld 4214 hada@pobox.com **www.hada.org.au** ABN 43 739 862 351

07 5564 7476

I would like to make a donation to HADA

(please mark the appropriate boxes)

Non Tax Deductible gift. Make your cheque payable to HADA Fund
HADA General Fund \$
Tax Deductible gift. Make your cheque payable to HADA Relief Fund. Do not include the name of the person or project on the cheque.
Make a Tax Deductible gift of \$ for where most needed.
Make a Tax Deductible gift of \$
for: Project reference
Title First Name Surname
Address
Postcode
In the bank reference section, enter your surname and the project code. It is important to email HADA treasurer treasurer.hada@gmail.com to receive your tax deductible receipt. Cheque (Payable to HADA Relief Fund) Attach to this form and post to HADA I would like my receipt sent to my email address
Signature
I/we will be paying by cheque as above, OR Visa Mastercard
Name on card (Please print)
If paying by credit card, please complete all sections. Credit card transactions will show as Strata Pay on your statement.

We reserve the right to use designated gifts for another project if the one identified is sufficiently funded or closed.

HADA Projects

www.hada.org.au

All projects listed are approved for tax deductibility

Africa

Medical Training

Manager: Dr Judith Goh

• Training African doctors in treating women with genital

tract fistula. [AFR-010]

Library Aid International Inc

Manager: Rodney Ziersch

Providing books for schools. [AFR-011]

Cambodia

Siem Reap

Manager: Valéria F Peres [KHM-015]

 Bridge of Hope: Working with families and communities to prevent children at risk becoming street children (or sold/ending up in prostitution). [KHM-010]

Phnom Penh

Manager: Sopheap Om

- Vocational Training Program: Tailoring Workshop, Metal Workshop and I.T. Support / Customer Service. [KHM-011]
- Financial control of all projects: Michelle Kallmier [KHM-016]

Good Neighbours Pre-School

Manager: Jean-Marie Jooste [KHM-012]

A pre-school for disadvantaged children. [KHM-013]

China

Hope Of Tomorrow

Managers: Daniel and Irene Kim [CHN-014]

Giving hope to blind people. [CHN-013]

Democratic Republic of Congo

Heal Africa, Goma

• Equipping a new hospital. [COD-010]

India

Maxton Strong Orphanage School, Banbassa

Manager: Rick Shipway [IND-014]

 School buildings for orphans and local children IIND-0101

Manager: Clifton Shipway [IND-015]
• Orphan Girls Hostel [IND-011]

Vocational and Career Development, Orissa

Manager: Bill Watson

- Construction of Shepherd International School for very poor children.[IND-013]
- Construction of Jeevan Jyoti Ashram home for orphaned children. [IND-012]

Ivory Coast

Literacy Project

Manager: Alfred Kouassi [CIV-011]
• Literacy for adults. [CIV-010]

Kazakhstan

HADA, Astana

Manager: David Pichotta [KAZ-013]

- Alcoholism: Education, literature, and support groups for alcoholics and their families. [KAZ-010]
- Open Doors Community Centre: a place to gain employable skills and life skills for young adults, couples and parents. [KAZ-011]
- Valueology: assisting schools by providing materials, and teaching values to teenagers. [KAZ-012]

Liberia

Education for Life [LBR-010]

Manager: Sahr and Avina Andrews

 Construction of a primary school and further training of teachers.

Mongolia

Good Neighbor Society, Ulaanbaatar

Manager: Soon Im Casaccia [MNG-017] Family Development Program [MNG-010]

Good Neighbor Society, Uvs.

Manager: Ernesto Casaccia [MNG-016]

Day Care Centre. [MNG-013]

Nepal

Community Awakening and Transformation Society (CATS), Rapti Zone.

Manager: Dr Julie Lincoln [NPL-011]

 Community development; micro-enterprise; TB/ leprosy patient hostel/treatment centre; youth awareness program and scholarships. [NPL-010]

Sierra Leone

 Waterloo School, Teacher Training and Placement, and Amputee Clinic [SLE-011]

Uganda

100% Hope

Manager: Trishelle Grady [UGA-014]

- 100% Hope Educate: building a school. [UGA- 011]
- 100% Hope Medical Clinic: providing healthcare for children and pregnant women. [UGA-013]
- 100% Hope Women: empowering single and widowed mothers to produce an income. [UGA-010]
- 100% Hope Homes: giving children from remote areas acces to education [UGA-015]

Grace Care Child Program

Manager: Emmanuel Kanuli

 To build classrooms for orphaned and disadvantaged children [UGA-020]

Zambia

Oasis Care Project, Ndola

Manager: Margaret Parry.

Market garden for orphanage [ZMB-010]
Gardeners: Benson and Alison [ZMB-012]

Disaster Relief

Syrian Refugees [DIS-010]