

Health And Development Aid Abroad — Australia Fund Inc.

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NEWSLETTER

Issue 22. May 2005

Tsunami and Nias

Report on visit to the island of Nias, Sumatra, Indonesia, to distribute tsunami relief funds

This report was received prior to the earthquake on 28th March. We have not heard any news from Nias since then as the power supply is out of commission. We will attempt to keep you informed. Neil Young

AFTER a 17 hour sea voyage from Padang to the capital of Nias, Gunung Sitoli, on the 19th of February, Rose with her nephew, Martin, teamed up with a couple of Nias men to make preparations to visit the hard hit tsunami areas on the west coast, Sirombu and Mandrehe.

The team chartered a van to travel to Sirombu and discovered that the local government and religious organisations had done a good job of listing the families who had lost loved ones and those who were either living temporarily in make-shift shelters or in the homes of relatives. They distributed relief money to four different religious denominations or institutions (2 Protestant, 1 Catholic and 1 Muslim) in the Sirombu area whose members needed assistance. A total of rupiah 95.480.000 [AU\$16,000] was dispersed to 249 tsunami victims among those four groups, ranging from Rp 300.000 to Rp 500.000 per person (AU\$50 to \$83), with six more needy persons receiving Rp 1.000.000 [AU\$166]. Besides getting receipts for the total amount given to these groups, a signature was obtained from each person at the time he/she received money.

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A dock being built to receive larger boats to enable relief supplies to be delivered

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The team then went to Mandrehe and again were given a well-prepared list of tsunami victims in that area. A total of 160 persons were helped with the amount of Rp. 85.100.00. Rp 300.000 was given to those whose property was damaged or destroyed (116).

persons) and Rp 800.000 to those who had also lost loved ones in the disaster (44).

In this case, not all of the money was given in cash. Each of the 160 persons were given useful farming equipment (axes, sickles/chopping knives, etc.). The money they did receive was to help them begin earning money again by buying building materials and to build pig pens. When Rose makes her second trip to Nias to distribute

the rest of the Nias funds, two pigs will be purchased for each pen so they can begin raising pigs. This is a common business in Nias since pork is usually served at wedding receptions or when family members living elsewhere in Indonesia visit their home towns.

One interesting aspect of the team's visit to Mandrehe, was seeing the 6 week old baby boy, Jefri, who made the headlines after being miraculously saved from death when he was caught in the branch of a sagu tree. His mother was killed so his grandmother is now taking care of him. However, she still needed help with providing an adequate diet for Jefri, so the team purchased a six months supply of powered milk for him and also some baby food, which the grandmother really appreciated.

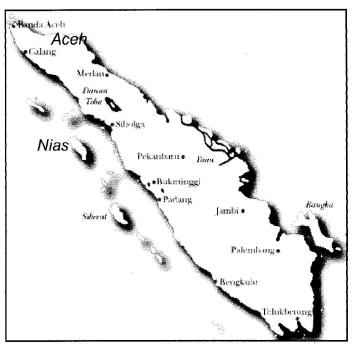
Undoubtedly, the several hundred recipients of the money reported above still need more relief aid to get back on their feet, but they are getting enough to sustain living, as noodles and rice are being supplied free of charge, and other aid teams come and supply small amounts to them from time to time.

For that reason and because Rose may only be able to make one more trip to Nias, the largest percentage (not all) of the new funds that we receive for tsunami relief will go for the greater tsunami needs in Aceh, at least until we hear that the rebuilding of the several hundred houses that were destroyed in Nias has begun. The government and other organisations have promised money for the rebuilding, so at that time it could very well be that funds will be needed for

the digging or boring of wells, the purchase of water pumps, etc.

For those of you who have sent personal funds to Bengkulu or who have sent funds received from churches, individuals etc., I trust that the information above will be useful to you personally, or in making reports back to donors.

Lloyd Sparks



Thank You

We, the HADA board, would like to thank all who contributed to help the tsunami victims. To-date we have received over \$90,000 and most of this has been sent to Sri Lanka and Indonesia. How some of this has been distributed is reported on pages 1 and 2. The workers in-country have been greatly encouraged by your generosity.



English speaking teachers are needed for one of the IAM schools in Kabul, Af ghanistan, for expatriate children. At this point, the Kabul Learning Center (KLC) has only one teacher confirmed so far for the next school year, beginning in August. The school is from 1st grade to 8th grade depending on the availability of teachers.

English speaking teachers are needed for the coming year in Istanbul, Turkey. Over 120 children are in our school and it's a big job to find qualified volunteer teachers to serve these children and their families.

Contact HADA: hada@pobox.com or Brian Allbutt (07) 3261 7368

Hope for the Hopeless

N the autumn of 2003 Mr Li, age 60, suffered a broken neck from a local Chinese masseuse, leaving him with a C6, 7 incomplete spinal cord injury. When I was introduced to him he had already lain three months in



bed in a halo. One of my former nurse/therapist students had brought me to his bedside during a followup visit I made to this hospital. (About a year before I had taught four nurses stroke rehabilitation for four months.) She had been using what she knew to help this man, but not getting the results she was working toward. How to adapt stroke rehabilitation training for spinal cord patients? Fortunately for

Mr. Li, he had some movement available in both his arms and legs, however weak. I spent the next hour showing my student how to progress him through daily exercises that would be the most beneficial for him. I showed her how to help him transfer from lying down to sitting up and eventually standing. His prognosis would depend on the return of strength gained through exercise with the therapist, his motivation to work hard, and the help of his family.

I returned to my own city and began getting phone calls every other week from my student reporting that Mr Li was improving and he could see weekly changes. He kept asking her to call me and to thank me for my visit. I revisited him three months later and discovered he was walking with a walker. One month after that he was walking with two canes. One year from his accident, Mr. Li was walking independently and even climbing hills. He and his family are extremely grateful for the rehabilitation services that are now available in this

hospital for people like him who otherwise would be left in bed for the rest of their lives. He tells everyone he meets how fortunate he is and the importance of receiving this kind of rehabilitation. His testimony, often given at length, is, that "there were nine of us in the hospital in this ward with spinal cord injuries when I first came. Four died and four went home to lie in their beds. I alone am walking all because someone came to teach rehabilitation!"

None of the others received rehabilitation because in China it is a new idea and even when rehabilitation departments are started in hospitals, doctors are often reluctant to refer patients. They would rather their patients lie in the beds in the orthopedic and neurological doctors' own patient ward, be given costly

medicines acupuncture, and spend all their money in that department before spending any money for thera-peutic exercise. It seems cruel and callous, but I sense change is in the air and we need to continue training and showing them that people



are worth so much more than the revenue they can bring the doctors. The goal should, instead, be early rehab intervention and better recovery. To me, even one person helped makes my time and effort to train worth it. I have been in China for 11 years and am beginning to see hope come to the recently disabled Chinese one life at a time.

Karen M.

Bridgewater Care is a new, accepted associate organisation with HADA

Hope in Phnom Penh



My parents named me Haiseng. It was not pleasant being the youngest in the family of five siblings because I was always in charge of household chores while my older brothers and sisters worked outside. My father's poor eyesight and my mother's inability to work due to a stroke, made it very difficult for them to provide for us.

After I completed my secondary school, I came to Phnom Penh for one year, and then studied English with a Korean NGO. Five months later I was hired, and six months later I applied, and was accepted, to study at VTC.

I chose VTC, HISC because I was looking for a centre to give me the kind of training needed and not require too much money from my family. I was not disappointed. I started the course and not only I was equipped with the training but also strengthened in my hope for the future. My family is very happy to see my independence. Now I am trying my best to save up so that someday I can study management at the Business School.

HADA's Vision: To see medical, education, agricultural and sanitation programs established in countries as needed.

Current HADA Projects

☑ These Projects have been approved by HADA to be recipients of tax deductible gifts

HADA, Yunnan, China

Manager: Colin & Margaret Dennis Project Officer: Gary & 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.
- Yuxi: Micro Credit loans to poor families to allow their children to attend school.
- Longchuan: Micro Credit loans to poor families in pig and cattle farming to improve the community's standard of living.

HADA, Astana, Kazakstan

Manager: David & Liz Graetz Administration: Ellen Lyal

- 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.

All projects in the newsletter are approved for tax deductibility.

Associate organisations projects which have been approved by HADA

STICHTING ASSISTANCE INTERNATIONAL, Sichuan, China

- Shigu: Screen and treat people with Hydatids.
- Educate the whole community in Hydatids prevention.

HARVEST INTERNATIONAL SERVICES, Phnom Penh, Cambodia

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

ENTREADE GLOBAL, Hohhot, Inner Mongolia, China

- A Cup of Water: Provide finances for poor children to attend school;
 89 beneficiaries.
- Teach English and English Teacher Training; 300 beneficiaries.

BRIDGEWATER CARE, Guiyang, China

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

INTERNATIONAL ASSISTANCE MISSION, Heart, Afghanistan

• 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.

Please advise where you prefer your gift to be see

- 1. HADA general fund and not tax deductible
- 2. Tax Deductible for the following:
 - distribution where it is most needed
 - a particular project
 - a particular person working in the project.



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All gifts are forwarded in their entirety, less bank charges, to the projects designated.