

Newsletter

Issue 29 – April 2007



**HEALTH AND
DEVELOPMENT AID
ABROAD –
AUSTRALIA FUND INC.**
ABN 43 739 862 351
Registered Charity No. 1273

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From the Secretary . . .

*Dear Friends and Supporters of
HADA,*

*In this second Newsletter of
2007, we have more beneficia-
ries thanking you for your gifts.*

*For those of you who wish to
offer material or other aid, we
have requests for assistance. I
won't write any more this time,
letting the articles speak for
themselves.*

*Thank you all once again for
your ongoing support.*

Kees Moolenschot – Secretary

The Kurdish Widows' Project

PLEASE be introduced to an amazing group of ladies living in Iraq. They are Kurdish ladies sharing a tragic story. All of them were widowed in 1988 through a dreadful genocide against the Kurds orchestrated by Saddam Hussein and his regime.

Saddam's goal was to destroy the Kurdish militia fighting his cruel and oppressive dictatorship. His strategy, however, resulted in the mass disappearances of tens of thousands of innocent civilians. Saddam's Anfal campaign targeted village communities. Many were bombed and most destroyed with villagers fleeing for their lives. People were found and rounded up by Saddam's army and placed in holding centres.

At this time many civilians, mostly men of an age to take up arms, were loaded onto cattle trucks and never seen again. Approximately 180,000 people includ-



ing some women and children were shot and buried in mass graves, discovered after the first Gulf War.

What remained were thousands of families who had lost most male members of their extended family. As many as 1,000 to 1,500 women were widowed. In Middle Eastern society the male is the provider and protector of the family. Without a husband and father, families are vulnerable and often destitute. For many long years the Anfal widows, as they came to be called, suffered terrible hardships associated with poverty.

In 2005 a micro-credit, savings and loans project was established among Anfal widows concentrated in the community of Shorish in Northern Iraq, 40 km north of the city of Kirkuk. Each participant was provided the equivalent of \$A500 for the purchase of a desired item, normally not easily afforded. Ladies have bought animals such as cows, sheep and goats for breeding and

Continued next page

milking. Sewing machines, fridges and air-coolers for the long hot summer months were also purchased. Other ladies invested in their children's education and bought a computer to assist them in their secondary and tertiary studies. A good education opens the doors to better employment and an escape from poverty.

Twenty-seven ladies are currently within the project, divided into two loan groups. They meet monthly to repay \$250 of the \$500 over twelve months. The ladies can afford to repay half the money they initially receive. The other \$250 is a one-off gift to enable them to make a useful purchase. Iraq has experienced 22% inflation since the 2003 war began. The cost of living has skyrocketed while the average in-

come has not. Anything less than \$500 buys very little.

When the loan is fully repaid it is redistributed among the group for another planned purchase. In this way the money is able to recycle indefinitely. Both loan groups have a 100% repayment rate. The ladies are delighted with the project as they appreciate the opportunity and peace of mind to know they have easy and affordable access to finance. The Kurdish Widows' Project is now ready to expand. With so many widows in the community, new savings and loan groups can be established to meet the needs of many struggling families. In the next twelve months it is hoped that two new groups of twelve members each will be formed.

Emma Baxter

Solomon Islands Tsunami Appeal

You will be aware of the destruction that occurred recently in the Solomon Islands resulting from the tsunami. HADA is able to partner with a reliable expat living in the area. All gifts to this appeal will be sent to the project in their entirety, less bank costs, and are tax deductible for you.

"A high percentage of the fatalities were children, and the tsunami buried most of the bush kitchens. Urgently needed are as much clothing and cooking utensils that we can get. Homes, schools and churches need to be rebuilt. The ability to engage in longer term relief will depend greatly on outside financial support."

Fill in the donation slip (p5) to give to this appeal.

News from BRIDGEWATER CARE

Physiotherapy and Wheelchairs — China

CHINESE New Year has come and gone. The whole nation has been on at least a week's holiday and the Year of the Pig is underway, with its ups and downs!

Wheelchairs

We started our second wheelchair donation project in December and hoped to have it completed by now. All those in a particular district recommended to us by the Disabled Person's Federation were interviewed and those people appropriate to receive a chair were measured. The hold up has occurred with the factory in Tianjin. They have been slow responding to our

order and told us they were too busy before the Chinese New Year to send our fourteen chairs. Now that the New Year is passed they tell us there are "difficulties" with our order. They do not want to provide us with the option of ordering two different seat widths and two different arm-rest heights. We are trying now to just get them to send us fourteen chairs as close to the measurements we asked for and to do it soon. Those who have been promised wheelchairs are wondering if they will come.

Teaching

I started teaching half days in a

local hospital. My students are not nurses without any therapy experience but therapists who have completed four to five years of therapy school training and one to three years of work. They are a challenge to teach as the doctors who taught them never did rehab, but did study a lot of theories in books. No practical training was offered. They were told they are therapists now and that massage and passive exercises



are the total of what rehab can offer. In some cases a specific exercise might have been discussed so it has been interpreted as being appropriate for anyone with a specific diagnosis. Out of five young men who began with me, three continue in class.

Encouragement

The patients in this department that I am seeing with the students are glad to be receiving rehab. Over the holiday I was gone for several days and upon returning a patient's wife said she had been looking for me every day and then she began to cry. "Since you have come, my husband has hope. The doctors told him he had no hope. In therapy for the first six months after his stroke he didn't move or speak. Now he is so happy to be up and he talks all the time. If you hadn't come he would never have had this much recovery."



Training

This week two of our BWC staff will begin a joint project with another community. As we begin to understand the needs, our staff will start training those who work in this government community office. The district where this community is located has many other communities that want to be trained about what rehabilitation is and what they can do for the disabled. I trust this first project will go well and we all will learn more about how we can advance the care provided for those who return home with disabilities.

Just this week we received two referrals for the first time from one rehab department about two patients who are soon to be discharged home. Our challenge now is that we have only one full time rehab aide and one full time local nurse/therapist. One of our rehab aides is on

maternity leave. Another has quit to go and start a teashop. It is hard to believe I have actually trained eleven rehab aides from five three-month courses since 2004. Not many ever caught the vision.

More workers needed

We are not able to attract more long-term workers because we can not afford to give them a full time salary and benefits. It is my desire to one day have a means for them to work and charge families that can afford their assistance and still help the poor. A rehab aide's salary is about \$A148 a month including health and re-

retirement benefits, which we must pay as dictated to us by the labour department. My thought is to try to change our registration to a "rehabilitation information service" consultancy. This would require finding a foreign partner who did not have to live in China but who had a bank account showing they had adequate funds for starting a business (I would be the part-

ner here but I have no such bank account), about \$4,960 in a bank account in China to show as capital and perhaps \$620 for registration fees. We would also then need to hire a professional accountant. We have done some research into this and I hope to submit a report this month to the appropriate government office showing why this kind of consultancy service should be allowed to register in our city.

Video program

I volunteered to help an organisation in another province complete a video teaching program on leprosy. Jean, who was going to direct this, returned to England because of a brother's serious illness. Her goal is to educate the public so that they will not fear those who have been affected by leprosy. A person is no longer contagious two weeks after taking the nine-month medicine and doesn't need to be isolated in leprosy villages. Therefore, early detection is essential and can prevent subsequent nerve damage that can result if the disease goes unchecked. Once cured, if there is nerve damage then secondary problems such as wounds and contractures due to lack of feeling and strength can be prevented or minimised in various ways. This film is not meant to be a sensational program but to teach the public not to fear.

Please advise where you prefer your gift to be sent:

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.

HADA: hada@pobox.com

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

Karen

Current HADA Projects

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

● 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 counselors.
- Open Doors Community Centre: Assisting the youth of the community.

● Associate organisations' projects

Stichting Assistance International, 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.

Grace Farm, Brazil

Manager: Ian Wood

- Care for underprivileged children; Building project.

International Nepal Fellowship, Nepal, Dang Province

Manager: Dr Julie Lincoln

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

Shorish Widows in Northern Iraq

- Micro credit program.

Nary's Story: **Cambodia** Vocational Training Centre

HELLO! My name is Sek Nary. I am 19 years old this year. I come from a family of eight children and I am the fifth child. My father passed away in 2003, which was my final year in high school. My mother's income from her small grocery stall could not support us through school. Hence, my two younger sisters dropped out of school so that I could finish. I was very sad about that and hope to make it up to my family some day.

After I passed my high school diploma in 2005, my cousin told me about the Vocational Training School of Harvest International Services in Phnom Penh which offers skills training for disadvantaged youth such as me. He encouraged me to apply to their I.T. course.

When I found out in late January 2006 that I'd been accepted I was excited, yet apprehensive, because I wasn't sure if I would be able to cope with it. My English is very poor. My first term was most frustrating because my computer kept breaking down.

Finally, a donation came in to replace my 'beloved' computer. I was overjoyed. Since then I did not have many problems. After studying for forty weeks about computer software, hardware and office skills at the Vocational Training Centre, I graduated on 12 December, 2006. I am grateful to all my teachers, friends, sponsors and donors who encouraged me and made it all possible.

Please note:

The PO Box at Clayfield is no longer in use.

All mail should be directed to:

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All projects in the
Newsletter are
approved for tax
deductibility.



Health And Development Aid Abroad —
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I would like to make a donation to HADA (please mark appropriate boxes):

Non Tax Deductible Gift:

- HADA General Fund \$.....
- Make a donation of \$..... for
- Make you cheque payable to HADA General Fund.

Tax Deductible Gift:

- Make a **Tax Deductible** gift of \$..... for general distribution.
- Make a **Tax Deductible** gift of \$..... for
(person or project)
- Make you cheque payable to HADA Relief Fund.

Title First name Surname

Address

..... Post Code

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

Signature

I/we will be paying by cheque as above OR

Visa MasterCard Bank Card Expiry date/.....

Name on card (please print)

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

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