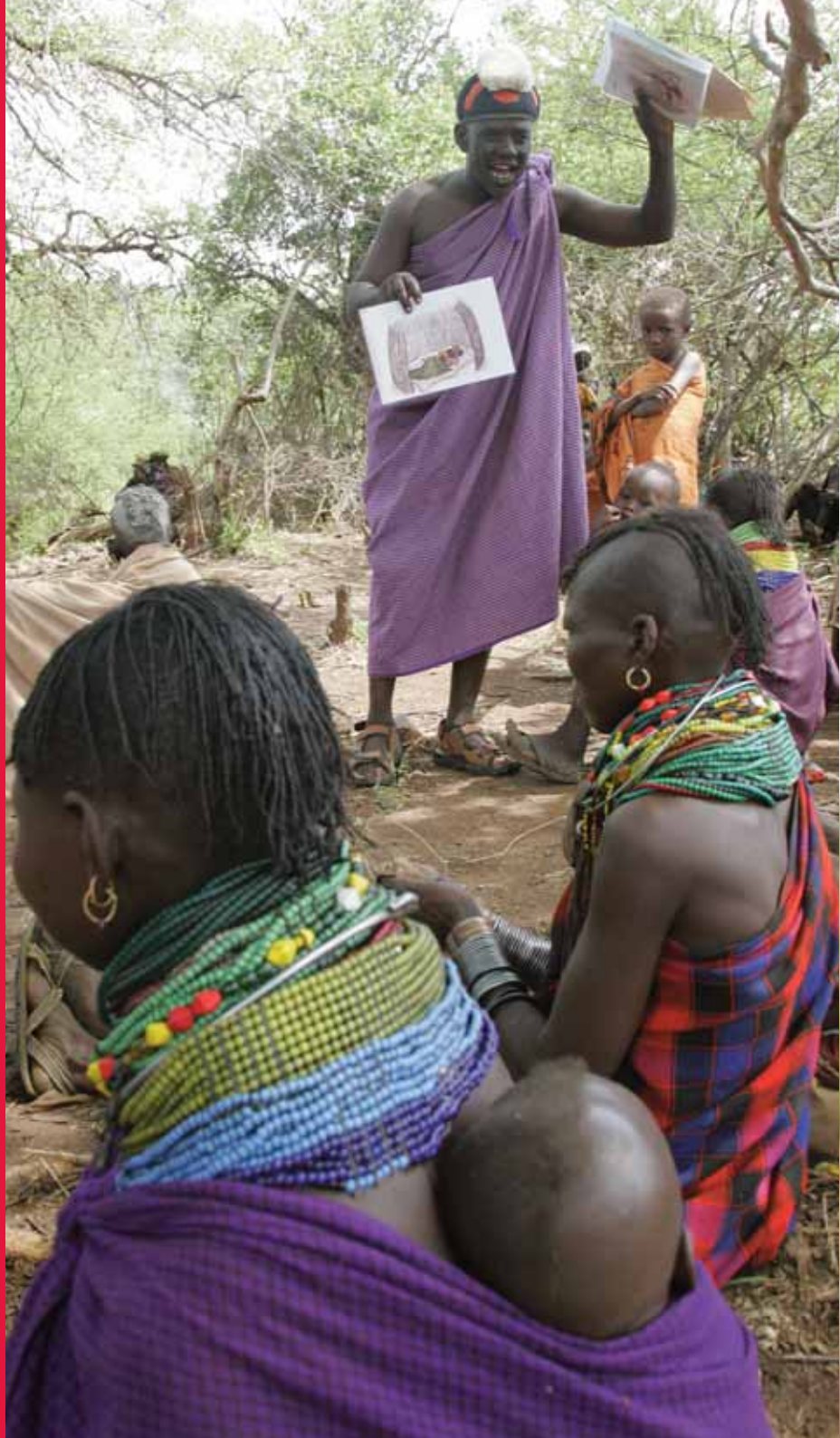


For more information, news, comment, stories from the field, and ways to get involved, visit:

www.amref.org/uk



AMREF News

African Medical and Research Foundation September 2007



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Cover image: A young girl from the Dassanech community in South Omo, Ethiopia, where AMREF has launched a new project providing health care to nomadic groups.

Photo: AMREF/Luisa Hanna

Back page image: Assistant chief John Losikiriat educates pastoralist community members about important health issues, gathered around a mobile health clinic in Turkana, northern Kenya.

Photo: Stevie Mann



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Dear Friends,

In August 2007, AMREF proudly celebrated its 50th anniversary. We would like to thank you for supporting us to achieve so much over the last 50 years.

This year, AMREF started to implement a new global strategy, addressing the challenges that prevent the majority of African people from accessing appropriate and affordable health care. The strategy's three main themes are; 'community partnering' – empowering communities to access better health care; 'capacity building' – building the skills of health workers and the systems and organisations that support them; and 'health systems research' – ensuring that all of our work generates evidence to inform and influence health policy, practice and financing.

Over the following pages, you can read about the ways in which we are doing this. For example, in Mtwara, Tanzania, we are working with communities to prevent malaria, a disease which kills an African child ever 30 seconds. In South Sudan, AMREF is training health workers, to provide vital health care to newly returned refugees. And on page 8 you can read about our new report on Africa's health worker crisis, calling on governments to urgently invest in training more health workers to tackle Africa's growing health burden.

If you would like to get more involved with AMREF's work then please take a look at page 9 and get in touch. Thank you once again for your continued support of AMREF. We look forward to continuing to work together to bring life-saving health care to many more African communities.

Joanna Ensor
Chief Executive, AMREF UK



Tackling malaria together with communities

Last year, AMREF trained more than 10,000 community health workers to deliver basic health care and education in their respective villages and towns. They play a critical role in African communities, where there is often no access to formal health care. Therefore, it is vital that the right people are chosen for these roles and are then given the right training and support to be able to carry out these roles effectively.

AMREF UK's programme manager, Luisa Hanna, recently observed the recruitment process for community health workers for a new project, Pambana na Malaria – 'tackling malaria together' in Mtwara in southern Tanzania.

"High levels of malaria in Mtwara contribute to alarming health statistics. For example, one in four children dies before reaching their fifth birthday. Lack of education is key in the fight against malaria, as many people do not know how to prevent it. For example, fishermen use mosquito nets for fishing as they do not understand that they can be used to protect their children from malaria.

I visited Mtwara in June, and

joined Dr Simbeye, AMREF's project manager, to see how AMREF works in close partnership with communities from the outset of its projects.

We visited Nyangarom on the final day of a series of visits introducing the project in each village – no mean feat given that there are 118 villages in the project. 50 people turned up to apply for the ten community health worker positions available. Village leaders reviewed their applications and the shortlisted candidates were asked to sit a test on the basics of malaria. The test whittled the candidates down to 20 and the final 10 were selected by a

Tanzania

general vote. I listened as village leaders debated the candidates' skills.

This selection process is just the start of a three-year programme. These 1180 community health workers are now starting their training course, and will provide a valuable resource educating their communities, not just on how to prevent malaria, but how to improve their health in general. We want to ensure that the communities we work with are not just recipients, but are active participants in their local health system."

Pambana na Malaria is co-funded by AMREF and the European Union.



"There is a real shortage of staff in Mtwara, as it's so poor and isolated. The district hospital and health centres (where you need to treat complicated malaria with intravenous quinine) are too far away. We need to look at prevention and at prompt treatment within the home." Project manager, Dr Simbeye. Photo: AMREF/Luisa Hanna

Bringing health care closer to those who need it most

Outside the Terekeka health centre in South Sudan, as evening approaches, a strange moving shape comes into view in the far distance. As it slowly approaches, it becomes apparent that four people are carrying a patient in a home-made stretcher of a blanket and two sturdy tree branches.

Exhausted, they gently lower the blanket and a middle-aged man racked with pain and gaunt with malnutrition emerges. Christopher Mila Fuli, AMREF's project manager in Terekeka and a clinical officer at the health centre, quickly springs into action. After quizzing the man's family about his condition, Christopher carries out a thorough examination and then cleans an open wound in the man's lower stomach.

Family members carried the man for five days after he collapsed with a burst gland as



Newly trained community health worker Abraham Ring advises Damaria Jokudo how to look after her three-year old son Christopher who has just been treated for malaria.

a result of TB. They walked this huge distance because there were no health facilities nearby, and they had no means of transport.

Christopher explained how the situation was aggravated by the fact that a traditional healer had first dealt with the wound and it had become infected. He prepared the referral note and arranged for a vehicle for the difficult four-hour journey to Lui. A surgeon operated on him immediately and he is now

making a slow recovery.

Despite these horrendous circumstances, everyone involved was keen to point out how lucky he had been. People are dying every day in South Sudan because they live days away from even the most basic health care.

AMREF is striving to bring effective health care closer to those who need it most in South Sudan so that they don't have to make gruelling journeys to far away hospitals. As part of a programme funded

by the Department for International Development (DFID), AMREF is rehabilitating and stocking primary health care centres and training community health workers to run them. It is also training health and hygiene promoters to help prevent people from getting ill in the first place.

The tumultuous welcome we received in Mading village, with drumming, dancing, singing and ululating was a sure sign of how the people felt about their new health centre and community health workers. A line of one of the songs went "You have bought medicine to the depths of the forest."

Damaria Jokudo was particularly happy as her three-year-old son had just been given treatment for malaria. "I had six children but four of them died. At the time I didn't know what they died of, but they all had high fevers and died very quickly. I was only able to treat them with herbs."

AMREF is also training community midwives so that women can give birth safely closer to their homes. Dr Monwyir Arop at the Ministry of Health said: "This is a vital programme as there are no

trained midwives to speak of in the whole country." It is hardly surprising therefore, that South Sudan now has the highest maternal mortality rates in the world.

AMREF is training 14 midwives in Lui Hospital. Every single one of the trainees know of women who have died in childbirth or have lost their babies. One of them, Eva Waseka, from Western Mundri explains: "The nearest hospital to my community is miles away and there are no community midwives. Women stay at home like cattle. Nobody has responsibility for them. Women

can be in labour for two days and then lose their babies at the end of it."

Eva was delighted to be able to put her training into practice when she delivered her first baby at the hospital, supervised by Jared Opudo, registered community health nurse and midwifery trainer. "I was so happy and proud to see such a healthy baby. And Victoria, the mother has named her baby after my grandmother Anna," she beams. "I can't wait to take my skills back to my community where they are so desperately needed."



Trainee midwife Eva Waseka sits next to Victoria Amida and her baby Anna that she has just delivered. All photos: AMREF/Louise Orton

Adapting health care to unique cultural contexts

AMREF has launched an exciting new project working in South Omo, one of the most remote areas of Ethiopia. It's an area of tremendous diversity, with 16 different ethnic groups, who are primarily nomadic and semi-nomadic pastoralists.

In Ethiopia, health care only reaches 60% of the population, primarily in urban areas. Delivery of health services to the country's 11 million pastoralists, who migrate with their livestock in search of water and grazing land for their animals, is recognised as a particular challenge.

In South Omo, a region covering 22,000 sq km, distances are long and roads very poor, particularly during the rainy season where the earth roads are impassable and riverbanks overflowing.

AMREF is bringing health care closer to those who need it most, by training health workers among the pastoralist communities to provide basic preventative and curative health care. They are also equipped to run basic mobile clinics, following the communities as they migrate. This is making a huge difference, as the pastoralists



Mobile health clinic used to treat pastoralist communities on the move

All photos: Luisa Hanna

will now be able to access vital health care on the move. The health workers speak the same languages as the communities they serve and as such, the people understand and respect what they are saying. Health workers also adapt their health education materials, such as posters, to be relevant to people's everyday lives.



South Omo is one of the most remote and isolated areas in Ethiopia

Some traditional practices in South Omo have had a negative impact on people's health, especially women and young girls. Mothers traditionally deliver alone and women and girls have low status and power to control their own health. Among some groups, female genital mutilation is practiced. Health workers, trained by AMREF are challenging these practices, while remaining respectful of the traditional way of life.

To meet the challenges of providing sustainable



Abera Owaju, district health officer in Salamago, explains the message behind a HIV/AIDS education poster. It shows the effects of HIV/AIDS using the images of traditional warriors.

All photos: AMREF/Luisa Hanna

health care to pastoralist communities, AMREF draws on its considerable experience in other pastoralist areas across East Africa; Turkana, in northern Kenya, for example.

Health indicators in South Omo

Literacy rate – under 10%

Immunisation coverage – under 25%

One hospital serves more than 0.5 million people

Zufan is a health extension worker in Malle district. AMREF will be supporting her to provide basic health care and education in her community.



AMREF addresses acute health worker crisis in Africa in parliament

AMREF held a high profile event in parliament in July to address acute health worker shortages in Africa, particularly in remote, rural areas. Africa bears 24% of the global burden of disease but has only 3% of the world's workforce, paid for with less than 1% of expenditure.

Chairs of the three all party parliamentary groups (APPGs) on HIV, TB and malaria opened the event, aimed at increasing knowledge and understanding of the health worker crisis and ensuring commitment to taking action to address it. More than 160 people attended, including MPs, academics, corporate executives, ministers and NGO staff, providing an important opportunity to raise the profile of this issue with a wide variety of stakeholders.



Daraus Bukunya, AMREF's director of community partnering, explains how AMREF is dealing with the health worker crisis in Africa. Photo: AMREF/Louise Orton

AMREF took advantage of this opportunity to launch its latest advocacy report: *People First: African solutions to the African health worker crisis*, which Lord Crisp, former head of the NHS, cited as a 'great manifesto' for addressing the crisis. Gareth Thomas, UK development minister and a key speaker at the event, also gave the report a ringing endorsement, praising AMREF's work over the years addressing the African health worker crisis.

He said: "Health workers are the backbone of every health service," and "too many countries lack the staff that they need with the right skills in the right places" – one of the key points addressed in the report.

Presenting the report at the event Dr Daraus Bukunya, AMREF's director for community partnering for health, used an example from Uganda, his country of birth. He explained: "In Uganda 70% of medical doctors and 40% of midwives are in urban areas, serving just 12 % of the population." The report calls for an urgent response to get the right workers with the right skills to areas where they are needed most.

A key recommendation of the report is for African governments to invest more in



The event marked the first time ever the three heads of the all party parliamentary groups (APPGs) for HIV/AIDS, TB and malaria had jointly hosted an event. From left to right, Andrew George, chair of the APPG for TB and Lib Dem MP for St Ives, Neil Gerrard, chair of the APPG for AIDS and Labour MP for Walthamstow and Stephen O'Brien, chair of the APPG for malaria and shadow health minister.

Photo: AMREF/Louise Orton

community health workers working in rural and remote areas, where access to health care is limited. Dr Daraus Bukunya stated: "Several governments have begun to acknowledge the role that community health workers could play in addressing the African human resource crisis, but are yet to establish clear policies and strategies that fully integrate them into the formal systems." AMREF will encourage African governments to make this a reality, and will advocate to western governments and donors to support them to do so.

AMREF to bring out 'the voice of the people' in exciting new website

AMREF will launch an exciting new website, giving a direct voice to the many fascinating characters who are involved in our work across Africa. From a clinical officer working in remote South Sudan to a young child living in Dagoretti slum in Nairobi, you will be able to read or hear their stories, straight from the horse's mouth.

"Our new strategy reflects a more 'people-centered' approach to our work and we want the new website to reflect this," says Louise Orton, AMREF UK's communications manager. "Our projects are tailored to the specific needs, values and beliefs of the different cultural groups that we work with and we want the new website to bring this to life."

To do this, AMREF will be making the most of new media technologies such as blogs (online diaries), podcasts (voice recordings) and online videos.

The new website will also reflect how AMREF has moved away from focusing on single diseases such as HIV, TB and malaria towards a more holistic

approach of improving health services. There will be a greater focus on AMREF's work preventing all diseases through education at community level, training health workers and improving health systems.

There will also be a new section entitled 'our partners' looking at all the different groups who help us achieve our objectives; from community-based organisations, to local health authorities and donors. And we will be encouraging supporters to support AMREF in many different ways within a new comprehensive 'get involved' section.

Feedback from our supporter survey showed how some of you want the website to be more interactive and fun and others expressed a need for serious in-depth health information. AMREF will take care to strike the right balance, in order to meet all of your needs.

The website, designed by IChameleon, a company specialising in charity communications, will go



live at the end of September.

Stuart Johnson, IChameleon's managing director, says: "AMREF's new website will be a rich, interactive experience; it will communicate effectively to a wider audience by personalising the work AMREF does, using real people to tell real stories. From AMREF workers, through to beneficiaries, the website will inform supporters, researchers and the general public about the great work AMREF is undertaking throughout Africa. IChameleon are excited to be working on such a great project, with such a successful and effective charity."

www.amref.org/uk

Radio 4 Appeal read by Michael Buerk raises £15,000



AMREF was delighted to receive £15,000 from a BBC Radio 4 Appeal in July and would like to thank everyone who so generously donated and spread the word among their friends and family. Michael Buerk, a long-term supporter of AMREF, presented

the appeal which focused on a country close to his heart; Ethiopia. He spoke movingly about the plight of Hasena Humed who lost twins to malaria in a remote community in north-eastern Ethiopia. He then went on to explain how AMREF refuses to accept

that people die because they simply do not have access to even the most basic health care. The money will help AMREF fulfill its vision of better health in Africa by bringing health care closer to those who need it most.

Dynamic new supporter group formed

AMREF is delighted to be working with a dynamic new supporter group. The group is made up of enthusiastic professionals living in London who are keen to get more closely involved with AMREF's work. The main aims of the supporter group are to raise

and expertise". "Everyone I know who becomes involved with AMREF feels very strongly about the organisation, so I find it frustrating that many people in the UK have not heard of AMREF. I hope the supporter group can work together to engage a new generation of supporters."

The first event organised by the group was an intimate evening for 45 guests with speakers from AMREF UK and Uganda. The group are now planning a range of events which cover a variety of interests including a barn dance, a golf day, and a possible event at the Royal Geographical Society with guest speakers.

Through our network of supporter groups we are hoping to raise AMREF's profile, engage new supporters and raise vital funds. It is a great opportunity to make new friends, have fun and get more involved with the UK team. We are keen to establish more supporter groups across the UK. If you are interested in setting up your own group or organising your own event get in touch and we can provide you with the support you need to make your event a success.



AMREF's profile in the UK and to fundraise. The group has set themselves an ambitious fundraising target to support AMREF's life-saving work.

Harriet Begg is one of the founding members of the group. "For me AMREF stands for everything I look for in a charity. An African charity working with communities to improve their lives."

"The supporter group provides the perfect opportunity to get more involved with AMREF as well as keeping me up to date with what is going on. It is great to be part of an enthusiastic group of people who all have different skills, ideas

Fundraising for AMREF

"Running the marathon for AMREF this year was a truly fantastic experience. It was really important to me to run for a charity that was small enough to have the personal touch, but large enough to make a difference. Being part of a smaller team of runners meant that we had personal contact with other runners and with individual AMREF staff. As an AMREF runner, I always felt supported and knew that my personal efforts were definitely making a difference.

Throughout the process we were sent regular training plans, met up frequently and had our own personalised running vests on the day, not to mention of course the tireless shouts from the supporters as we came past Embankment! Since running the marathon, I have continued to be involved

with AMREF and now truly feel part of the 'family'. I would thoroughly recommend running for AMREF; there is no pressure or competition, so any runner of any standard can feel supported and valued."

**Nia Godsmark,
AMREF London Marathon
Runner in 2007**



Photo: AMREF/James Purcell

Feeling inspired?

Get involved and help AMREF make a real and lasting difference to the lives of thousands across Africa. AMREF has a range of events you can get involved in.

Why not challenge yourself and take on a marathon?

- London Marathon** – 13th April 2008
- Edinburgh Marathon** – 25th May 2008
- Berlin Marathon** – 30th September 2008
- New York Marathon** – 2nd November 2008

Or how about a more exotic challenge?

Climb Africa's tallest mountain, Kilimanjaro (5,896metres) and visit an AMREF project in Africa. See first hand how your money is working to save and transform thousands of lives across Africa.

Visit our website for details of these and other exciting events that you can take part in. We'll give you all the support you need with your fundraising and training.

Photo: Charity Challenge

For more information contact Yetunde Akintola or Freya Larsen on 020 7269 5528 or visit our website, www.amref.org/uk



**Please make a regular
contribution to AMREF
by filling in the form
overleaf, and together
we can continue to
save and transform
lives across Africa.
Thank you.**



Help AMREF to save and transform more lives in Africa



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Freepost RRHG-ACGY-ABAT, AMREF, Clifford's Inn, Fetter Lane, London EC4A 1BZ

Originator's Identification Number

5 5 8 0 3 6

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Quarterly starting _____

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N.B. To reduce AMREF's costs, your gift can only be collected on the 1st of the month, quarter, or nominated month of the year. Thank you for your understanding.

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