

AMREF News

Autumn 2010

SPECIAL FOCUS: Reaching the hardest to reach



UK Charity No. 261488

Photo: AMREF / Stobart

Introduction: Supporting the most vulnerable

Welcome to this issue, which is dedicated to AMREF's work with the most vulnerable and remote communities in Africa. With its origins as the Flying Doctors Service of East Africa back in the 1950s, to today providing health care to nomadic communities living in some of the most hostile environments imaginable, AMREF has always been committed to ensuring that every African can enjoy the right to good health, no matter how hard-to-reach they may be.

Project in focus: Helping remote communities overcome disability and injury – AMREF's Flying Doctors Outreach Programme

Unfortunately, thousands of people across Africa live with disabilities or injuries, which could be corrected with access to medical care. Some disabilities are congenital malformations such as cleft lips and palates or club feet. Others develop due to complications of infectious diseases, such as polio and leprosy. Some are caused through injuries such as burns or traumatic childbirth.

While these disabilities and injuries are not life-threatening, they are debilitating and are often a cause of discrimination and isolation within communities. AMREF provides free corrective surgery to thousands of people each year which dramatically improves their quality of life in an already difficult environment. Our Flying Doctors Service, the airborne medical services arm of



Providing treatment on board the plane

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AMREF, enable these people to live full and productive lives.

AMREF's Flying Doctors Service take specialist surgeons to areas where there are no communications, limited medical services and little or no surgical services. They travel to areas which can only be reached by plane, and where the only health facility may be a man selling paracetamol in a roadside kiosk.

The team also provide intensive training for local doctors, ensuring that a legacy of skills remains within these remote areas, allowing future generations to benefit from the same life-changing work.



AMREF's Flying Doctors Service

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£50 could pay for a life-saving operation for one patient through AMREF's Flying Doctors Clinical Outreach Programme.

First person story: My visit to South Omo, Ethiopia

Victoria Rugg, AMREF UK's Communications Manager, visited Ethiopia in August 2010. The visit was supported by an educational awareness grant by the Department for International Development (DFID).

Bumping around in a jeep on extremely pot-holed, unpaved roads, our driver had to be careful to weave in and out of the herds of cattle and goats ushered along the roads by young boys wielding long sticks. This was my first trip with AMREF, and first visit to South Omo, Ethiopia - one of the most remote areas of sub-Saharan Africa. Over 50% of the population are nomadic, and depend on livestock for their livelihoods and migrate in search of water and grazing land for their animals.

Living so far from health facilities, towns or even roads it is especially difficult to deliver health care to these communities, so AMREF provides mobile health centres, bringing health care to them along their migratory routes, and trains health workers within their communities to prevent infectious diseases. No other vehicles travel through these areas, only AMREF, so the sight of a jeep brought everyone to a standstill, or running from their homes to watch in awe as we drove past. Many people shouted out 'AMREF!' with joy as we continued up the track.



After ten hours of travel through beautifully green countryside (so different from what I had imagined of Ethiopia),

with thorn trees dotted amongst the maize and corn fields, and wicker and mud huts clustered in the fields, we reached a community health post, which provides check-ups for expectant mothers, immunisation for babies and children, and diagnosis and treatment for diseases such as malaria.

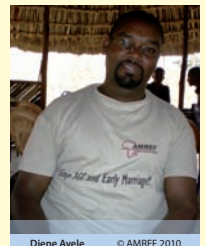


Without AMREF providing trained health workers to offer this service, malaria, water-borne diseases and diarrhoea - the main health risks in this area - would claim lives daily.



We also visited the site of a new water supply in one kebele (or village) which had been installed to provide a constant supply of clean water to the village. Meeting the community elder, he told me that he believed AMREF had been 'sent by God' to provide this. Previously, women (the main water carriers) had to walk for over three hours to obtain water from a dirty river, and they were frequently ill from diarrhoea-related illnesses. Now the community is healthy and women no longer have to trek for long distances every day to get water, giving them more time to devote to their families.

"I used to work in a city, but felt I never reached the neediest people. In South Omo it's really difficult at times, especially getting to these communities, but knowing we can really make a difference to the lives of the most isolated people makes me feel proud."



Djene Ayele, Project Manager, AMREF.

Highlights from our recent work

Standing up for African Mothers – AMREF's Gala

AMREF's 'Vibrant Africa' Gala put maternal health in the spotlight in May at the Natural History Museum in London, raising a show-stopping £150,000 to help ensure more women in Africa are able to give birth safely.

AMREF's maternal health ambassador Jumoké Fashola led the proceedings, and celebrities Jon Snow, Garth Crooks, Michelle Ryan, Jon Culshaw, and Kim Medcalf together with over 200 guests were entertained by kora player Seckou Keita and the Drum Cafe's exciting rhythms.



Baxterbear – Our loyal AMREF supporter!

We would like to introduce you to one of our new partners, Baxterbear. This kind-hearted teddy bear has had many adventures, including becoming a pilot with the AMREF Flying Doctors Service way back in the 1960s.

Baxterbear has been helping raise funds and awareness for AMREF both in the UK and in Africa, promoting events and activities such as our Radio 4 appeal and Edinburgh Festival 'Stand Up for African Mothers' comedy gala, and there are plans afoot for more activities in the future.

You can find out more about Baxterbear on his website, www.baxterbear.com



Katine project wins prestigious International Award

Together with Barclays and The Guardian, AMREF's Katine project has won the Business in the Community (BITC) Coffey International Example of Excellence award. Supported by the Department for International Development, the award recognises companies who have shown innovation, creativity and a sustained commitment to the UN Millennium Development Goals.

AMREF Patron and Business in the Community President HRH The Prince of Wales awarded AMREF UK CEO Grace Mukasa and representatives from The Guardian and Barclays the prize at a glittering awards ceremony in July. Charles Duff, Chairman of the International Award judging panel, said: *"It is easy to see that the work through this partnership has great potential for being scaled up, and is replicable in other communities in Africa and beyond."*



Broadcasting the dangers of childbirth to 1.9 million listeners



Maria and her baby from the appeal © AMREF 2010

AMREF broadcast a BBC Radio 4 appeal on Sunday 12th September, focusing its message on the importance of training midwives to prevent maternal deaths in childbirth, particularly for

women in remote communities. Our supporter Jumoké Fashola presented the appeal, explaining

how important it is to train local midwives, equipping them with the skills to save lives for years to come.

The BBC Radio 4 appeal was a great opportunity for AMREF to raise issues affecting marginalised communities in Africa to an extremely wide audience. So far we have received a great response from listeners, and donations are continuing to come in daily.

You can hear the appeal on www.bbc.co.uk/programmes/b00tndh9

The 2011 Virgin London Marathon

Though the public ballot has now closed, we have a limited amount of charitable places available to give you the chance to take part and run in support of AMREF. Everyone who runs the Virgin London Marathon on 17th April 2011 for AMREF will receive support every step of the way from our dedicated fundraising team.

To apply for a place, please contact our team on events@amrefuk.org for more information. We also have places for the Brighton Marathon on 10th April 2011, the BUPA London 10k on 30th May 2011 and the Berlin Marathon on 25th September 2011.



Mo Farah

© AMREF 2010

Running for Africa!

AMREF's long-standing partner, GlaxoSmithKline (GSK) held the first ever 'Run for Africa' event recently at Dorney Lake in Windsor, a 2012 Olympic venue. Mo Farah, the European 5,000 and 10,000m champion, was there to lend his support and to pass on training and running tips to the participants.

Over 300 GSK employees and their families attended the day, which involved a 2.5k children's race, and 5k and 10k races for adults. We anticipate that this event will raise an incredible £50,000 in support of AMREF's life-saving work on the ground in Africa.

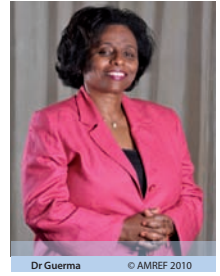


Running for Africa

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AMREF welcomes the first African woman as new Director General

Dr Teguest Guerma, an Ethiopian national with an extensive career in public health, joined AMREF as Director General in July. Dr Guerma, who was previously the Associate Director of HIV/AIDS for the World Health Organisation (WHO), began her career as a medical practitioner in Burundi in the mid-1980s. She said: *"I am very pleased to come back to Africa and will do my very best to make a difference in the health of Africans."*



Dr Guerma © AMREF 2010

Cycling around the world for AMREF

Tim Taylor was inspired to do something to help people in Africa through reading about AMREF UK's work, and decided to set himself the challenge of circumnavigating the globe on his bicycle to raise money and awareness for AMREF. He began his attempt on June 21st 2009 and completed this amazing feat on September 23rd 2010. He spent 385 days, covering 32 countries, 19,800 kilometres, three million turns of the pedals, and experiencing 280 different beds, 13 punctures and one tropical disease after leaving England. AMREF would like to say a huge



Tim Taylor in Sydney

thank you to Tim for his heroic efforts and his inspirational stories from his trip.

You can read all about his adventures on www.fullcycle.org.uk

Providing support in times of emergency: AMREF's team treats victims of the Uganda bombings

Devastating explosions rocked Uganda's capital city, Kampala, on 11th July 2010, at a time when many people were celebrating the World Cup. A total of 76 people were killed and over 80 were critically injured in the blasts. Local hospitals were overwhelmed by the number and severity of the injured, needing specialist surgeons who could extract shrapnel from people's bodies and perform brain, spine and reconstructive operations.

AMREF responded to the Ugandan Government's call for help by sending ten medical specialists from our Surgical Outreach team to perform life-saving operations. Along with treating physical wounds, AMREF also provided support to help patients deal with the emotional wounds of living through this traumatic event and set up a

trauma centre for victims to access more long-term psychological support.

Uganda's Minister of Health, Honourable Dr Stephen Mallinga, said: *"We would like to say a huge thank you to AMREF on behalf of the Ugandan Government. Thank you for an exemplary job in treating these patients."*



AMREF doctors performing an emergency operation

© AMREF 2010

AMREF's call to action:

Ensuring health workers are at the forefront of the UK Government's agenda

Long-term improvements in health will not be achieved through the delivery of health projects alone. One of AMREF UK's key activities is influencing those in power so that health policies, practices and investment better serve the needs of the most vulnerable communities. Our current focus in this area is addressing the critical shortage of health workers of all levels in sub-Saharan Africa, from community health workers to midwives and doctors. We are calling on the UK Government to commit to tackling Africa's health worker crisis. In the UK, for every 100,000 people there are 250 doctors, in Sudan for example, there are only 16. Without adequate numbers of trained doctors, nurses, midwives and community health workers to treat patients and provide medical care and advice, the people of Africa cannot hope to attain better health.

This health worker crisis is particularly acute in rural and hard-to-reach areas, where 80% of Africa's population live. In these areas, health workers often feel extremely isolated, living away from their families, and working in incredibly difficult conditions, with a critical lack of resources. Midwives have to deliver babies on makeshift sack sheets laid on the floor because they have no delivery tables. Without even a bicycle or any form of transport (not to mention heavily cratered and pot holed roads) to do outreach work with communities, health care workers have no choice but to walk considerable distances to visit their patients. Motivation, understandably, remains low, and if a chance arises for a position in a more urban area, with



Traditional Birth Attendant Photo: Dan Chung © The Guardian

better facilities and a greatly improved standard of living, the majority will seize that opportunity.

AMREF is calling for an increase in funding for health workers, and in partnership with 17 other organisations has set up a new working group, 'Human Resources for Health'. The challenges of achieving good health for the people of Africa cannot be overcome without more health workers. AMREF is urging the UK Government to deliver on this, and increase UK political and financial commitment to the health workforce.

You can find out more about our campaigns by joining our Facebook group AMREF UK or follow us on Twitter to get the latest news and updates on our work. www.twitter.com/amref_uk



£10 could train one Community Health Worker, who will then spread healthcare advice and messages throughout the wider community.

Leprosy, worms and trachoma:

Africa's preventable but often overlooked diseases

Did you know that diseases such as worms, leprosy and trachoma, examples of neglected tropical diseases (NTDs), affect the people of sub-Saharan Africa to the same extent as tuberculosis and malaria? These diseases are both treatable and preventable but research and funding is often focused instead on 'the big three', HIV/AIDS, tuberculosis and malaria. Many NTDs are spread through poor sanitation and hygiene, and AMREF focuses on reducing the incidence and spread of disease by improving water sources and sanitation facilities.

AMREF trains thousands of health workers from across Africa every year, and each of our training courses cover NTDs ensuring that treatment for



the diseases is available from skilled, motivated and supported health workers. It is because of your support that these health workers are able to dramatically improve people's lives and tackle these diseases. *"AMREF believes that NTDs are a major cause of morbidity and mortality in Africa, and not enough is being done to prevent and control them"* – Dr Jane Carter, Director of Clinical and Diagnostics, AMREF.

You can touch a million lives All it takes is one word in your Will: AMREF

We know that some of you are kindly considering making a gift to AMREF in your Will. After you have made all other important bequests to family and friends, we would ask you to consider AMREF. Any gift, no matter what size, will enable AMREF to change lives in Africa for years to come.



Support our work through a regular gift

Setting up a regular gift via direct debit to AMREF is the most efficient way of giving. The Direct Debit guarantee gives you peace of mind and you have full control over your gift – you can amend, freeze or cancel at any time. Regular gifts save us money too as they are less expensive to administer and they enable us to plan our work effectively.

Please contact our team on **0207 269 5520** or supportercare@amrefuk.org to get further information about leaving a gift in your Will or setting up a regular gift.

For every pound we receive, 84p goes directly to our projects in Africa, 15p goes towards raising more funds, and just 1p goes towards governance, office and administrative support.