

# HEALTH IN ACTION

Spring 2019

Health Poverty Action Newsletter



**THIS EDITION** MALARIA OUTREACH IN  
REMOTE CAMBODIA

Plus: the women speaking up for their rights in rural India and how we ensure that respect is at the heart of all our communications.

**HEALTH  
POVERTY  
ACTION** 

## THIS EDITION

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**SIM KUTRY**

### **My name is Sim Kutry and I am Health Poverty Action's Regional Programme Manager in Cambodia.**

I have been working with Health Poverty Action in the northeast provinces of Cambodia for around 10 years. In this newsletter you'll read about the people standing up for the health of their communities: Saigseiha and Taounsay working in Cambodia to eliminate malaria, and Nilmani speaking out

for healthcare and women's rights in rural India. You'll also hear our latest news and what we are doing to ensure respect is at the heart of all our communications.

We are grateful for your continued support, which allows us to make so much progress.

*Kutry*

### **JOIN THE MOVEMENT - HEALTH FOR ALL IN A JUST WORLD**

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# WHERE HEALTHCARE COMES BY BOAT

## THE REALITY OF ELIMINATING MALARIA IN RURAL CAMBODIA

Although malaria has been eliminated in most regions of Cambodia, it is still a dangerous reality in many of the remote places where Health Poverty Action works. This is particularly true for the most vulnerable members of society, including pregnant women and children, and the mobile migrant population who travel across borders in search of work.

Saigseiha is a Malaria Post Worker supported by Health Poverty Action



The malaria tests are quick, so the team can teach people about malaria whilst the results come through.

in rural Cambodia, along the border with Laos. He understands the importance of malaria testing, having contracted malaria as a child. Fully aware of the dangers, he now wants to ensure that the people he meets know how to look after themselves.

Malaria rates remain high in the border areas to the northeast of Cambodia. Often, communities have little to no knowledge of the disease or how it is transmitted.



Saigseiha sits at his roadside malaria post in a remote area of Cambodia.

This means workers in the forest don't wear long sleeves or use nets to protect themselves from mosquitos as they work and sleep. Saigseiha explains that if they get malaria, they will not be able to work or to look after their families, and this is often the most effective message.

**“Malaria needs to be diagnosed quickly, and most won't get tested unless it is simple for them. Malaria posts in such remote villages are so important... If I wasn't here, people would have no other option.”**

Health Poverty Action's approach is to work closely with local communities. We train people like Saigseiha to educate others on how to protect themselves from malaria, the symptoms of the illness, and where they can go to get help. Helping people understand the dangers, and



Taounsay addresses a small group to teach them about the dangers of malaria.

showing them that they have the right to access healthcare, is a vital part of the work.

**“It's a good job... But it can be hard too – the distances are huge and I live two hours away, so many times I have to stay here overnight. In the rainy season, it is very hard to travel, and we only have this little tent to protect us, but I need to do this job so that everyone knows how to look after themselves.”**

Inaccessibility is an even bigger issue for Taounsay, who works in our 'Malaria Outreach Team'. Whilst the malaria posts are static, often found on roads leading to the forests and border villages, the outreach team spends three weeks of each month away from their families. They travel across this difficult region to find people for whom accessible healthcare is not an option. Taounsay can be found travelling great distances by boat or motorbike to reach the communities.

**“My job is to travel into the forest to find mobile populations who go to remote areas to farm, fish or forage. I ask to test them for malaria, and if it is positive, I can**



Taounsay prepares a rapid diagnosis kit to test a patient for malaria.

**treat it with medication. I also spread health education because some people don't know anything about the dangers of malaria or how it's spread. Malaria is decreasing in this area, but I still find a lot of positive cases - about 1 in 10 at the moment."**

It is a situation which we see all across the world: in remote and border areas, indigenous populations are at risk of being overlooked by traditional healthcare systems. Often language barriers and a lack of information prevents people from accessing

essential care. With your support, health workers like Taounsay can spread education and accessible medicine to these communities.

**"I work with a lot of different people and ethnic minority groups, and I need to speak different languages to communicate with everyone I come across. It can be a hard job. We travel very long distances and the road can be very difficult to pass through, especially in rainy season. We often travel deep into the forests to find people."**

Despite the difficulties of the job, Taounsay is confident in the long-term change he is making in his community.

**"The people here aren't always looking after their health - they are often travelling to find work and can't easily access healthcare. When people have education about their health, they can protect themselves."**

This work is funded by Global Fund. To read more about a day in the life of the Malaria Outreach Team, visit:

[healthpovertyaction.org/malariaoutreach](http://healthpovertyaction.org/malariaoutreach)

# SPOTLIGHT ON FIND YOUR FEET

## WOMEN IN INDIA ARE SPEAKING OUT FOR THEIR COMMUNITIES

Nilmani Marandi never thought to put herself forward to speak on behalf of her village community in Jharkhand State, India. She was married at sixteen, before she had a chance to finish her education. She now has two children of her own - one boy and one girl.

**“I was struggling with life and wanted to do something good for society... I especially wanted to improve our access to health and the overall condition for women.”**

A few years ago, she was approached by a community worker from Find Your Feet’s local partner, the Badlao Foundation.

They asked her to help them form a Mahila Sabha (Women’s Self-Help Group). Nilmani was initially sceptical, but soon she started to recruit other women from the community.

Now, the group comes together to discuss social issues and their solutions, as well as saving

regularly. They plan to use the saved money for emergencies and income generation. Nilmani is now a confident and eloquent spokesperson for her community.

**“Whatever I am today, the credit goes to the Mahila Sabha. As a member of that group I have changed my thinking, my attitude and my life.”**

The other women in the village feel confident expressing their views in the development of the village, especially since Nilmani was elected as mukhiya, the elected representative of the village panchayat (council).

**“When I was elected, I didn’t know the rules or regulations, or even my rights as the elected representative. I only knew that I was representing people and that their support was with me.”**



The Women’s Self-Help Group congregate outside the community centre.



Nilmani (centre), sits in a Women's Self-Help Group Meeting.

Thanks to Nilmani, the Village Health Centre now has an Auxiliary Nurse Midwife who can provide first aid in emergencies. Nilmani will continue her advocacy for the community, and is expanding her reach by trying out new modes of transport!

**“I have also learned to drive a bike so that I can be in touch with the other villages, and now I can move freely. I feel proud to serve my community.”**

After speaking with government officials, the village has new hand pumps for drinking water and the existing ones are being repaired.

The other issues raised have been forwarded to the higher district authorities.

Women like Nilmani are now confidently driving the change they need, and getting brilliant results.

Whilst our EU funded Johar Project in Jharkhand is coming to an end, its legacy will continue in the confident hands of women like Nilmani.

Her advocacy will not only improve the life of the community today, but also help to secure a future free from poverty for her children.

# RESPECT: THE CORNERSTONE OF HOW WE COMMUNICATE

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At Health Poverty Action, we believe in using positive, empowering, respectful imagery to showcase the impact of sustainable development. In our communications, whether it's a handwritten letter or our Annual Report, we never evoke pity or guilt.

Instead, we write to empower you to feel part of a movement that advocates for justice. Our role is to reflect a reality in which change is not only possible, but is already happening.

Rather than putting ourselves at the heart of the solution to poverty, we act in solidarity with health workers, activists and communities worldwide to improve health and challenge the causes of poverty. We will always try to avoid oversimplified or sweeping statements. We want to portray people as individuals, not statistics. This is why we are always careful to treat them and their stories with the utmost respect.

We provide a platform for the voices of those we work with. That's why you always read about our work from the perspective of our friends and colleagues in the countries where we work. We constantly seek out those 'common' experiences shared between our supporters and those who we help. When it comes to the stories and images, we ask ourselves 'would I be happy to be portrayed in this way?'

We always want to show you positive and impactful change, but at the same time we try to truthfully reflect the challenges faced by these communities. We also believe that it is not only our duty to use these ideas in our own communications, but to ensure that the rest of the sector has the tools too.



**Calling all activists and campaigners for social justice!**  
Find out how to tackle the root causes of poverty and build a global movement for change through your communications in our new toolkit 'A practical guide for communicating global justice and solidarity: An alternative to the language of development, aid and charity'

[healthpovertyaction.org/toolkit](https://healthpovertyaction.org/toolkit)



# THANK YOU FOR YOUR FEEDBACK

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Last autumn we sent you a short survey: we wanted to read your feedback and find ways to improve. At Health Poverty Action and Find Your Feet, we are committed to doing what is best for the people we work with and our supporters. Thank you to everyone who took the time to fill it out and return it to us. Seeing your answers and messages of encouragement really showed us how dedicated you are.

Because so many of you said you choose a charity that tackles root causes, we're going to ensure that we talk more about how our work addresses those issues which create poverty. We understand that giving the wider context to our work helps you to understand its significance.

Lots of you said that the frequency of updates you received was 'just right' and you gave us an average score of 8 out of 10 for your satisfaction as one of our supporters. Using your feedback, we aim to improve this even more in the future.

Without you, what we do is not possible and we are incredibly grateful for all the support you give us.

The average level of satisfaction as a supporter of Health Poverty Action and Find Your Feet out of 10 was

8

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**'I PARTICULARLY VALUE THAT YOU WORK WITH COMMUNITIES AND TRAIN LOCAL PEOPLE TO HELP THEM BECOME SELF-SUSTAINING.'**

**- HEALTH POVERTY ACTION SUPPORTER**

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87%

said that the frequency of communication was just right!

An overwhelming number of you were motivated by the wish to **ensure safe, accessible healthcare for people around the world.**

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74%

of you said that you choose a charity that tackles root causes

Didn't have a chance to complete the survey? Go to [healthpovertyaction.org/survey](https://healthpovertyaction.org/survey) to give us your feedback.

# LATEST NEWS

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## CHALLENGING THE DRUG POLICIES THAT PERPETUATE POVERTY

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Those impacted by the failed ‘war on drugs’ speak out in our two latest reports on drug policy. Their diverse stories show how current drug policies are perpetuating a vicious cycle of poverty, inequality, corruption, and violence.

The first report looks at how terminally ill patients are dying in pain as many governments in poor countries adopt excessively restrictive drug policies prompted by the stigma around illegal use. The second shows how those involved in the low levels of the drugs trade have their livelihoods destroyed as a result of prohibition, pushing them further into poverty.

The co-chairs of the All Party Parliamentary Group for Drug Policy Reform – Crispin Blunt MP, Jeff Smith MP and Baroness Molly Meacher issued a statement at the event citing Health Poverty Action’s reports as a ‘wake up call to governments around the world.’

**Visit our website to read both the reports here:**  
[healthpovertyaction.org/drugpolicy](http://healthpovertyaction.org/drugpolicy)

## WHY I WANT TO LEGALLY REGULATE DRUGS - OUR NEW FILM

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Our newest film about drug policy is shot in the favelas of Sao Paulo. It provides honest testimonies from people directly affected by the failed ‘war on drugs’ in one of Brazil’s poorest cities.

The story is told by Marcio, who describes the key impacts of prohibition in his community: violent and racist policing targeted at the poorest, made worse by a lack of state support and social services. In the film, he explains, “Regulation is key, because at the moment drug policy is an excuse for many arrests and killings.”

**Like us, Marcio believes the drugs trade needs to be legally regulated. See the film here:**  
[healthpovertyaction.org/legalregulationfilm](http://healthpovertyaction.org/legalregulationfilm)



Marcio from Sao Paulo believes in legal regulation.

## STAR FUNDRAISER

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Curry for Change events have been going on across the UK, but Sharon Foxton and Stephen Waring of Café on Goldhill Organic Farm in North Dorset blew us away with theirs. They raised £800 for Curry for Change by hosting a curry evening and asking people to contribute what they felt it was worth. Sharon told us happily, “I was overwhelmed by people’s generosity. Not only did people dig deeply into their pockets, but so many people volunteered their time to help, and our lovely sponsors – Bere Marsh Farm, Whole Leaf Company, Frankbread & Kingfisher Beer – donated wonderful produce.”

**If you know a restaurant that you think should get involved with Curry for Change, get in touch with Adam:**

**[a.walker@healthpovertyaction.org](mailto:a.walker@healthpovertyaction.org)**



The happy chefs on the evening of their Curry for Change night!

## CURRY FOR CHANGE IS STILL GROWING!

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We are using all things spice to change the lives of rural families in Africa and Asia who suffer from hunger. To celebrate the lovely weather we’re determined to have this summer, we’ll be taking Curry for Change outside too – why not invite your friends around for a spicy barbeque, and change lives at the same time?

**Keep an eye on:**  
**[curryforchange.org.uk](http://curryforchange.org.uk)**

**Or find us on social media:**  
**[@curryforchange](https://www.instagram.com/curryforchange)**

it takes a  
**Village**

Our maternal health campaign is growing! We are now partnered with a number of leading UK baby brands. Together we are working to raise awareness and funds to make pregnancy and childbirth safe for every mother.

Follow our social media channels to find out how you can join in and win some amazing prizes!

Instagram [@weareavillage](https://www.instagram.com/weareavillage)  
Facebook [@ittakesavillage.org](https://www.facebook.com/ittakesavillage.org)



Health Poverty Action was founded in 1984 by a young doctor on his return from Afghanistan.



Today we work in 18 countries across Asia, Africa and Latin America.

**WE ARE THE CAMPAIGNERS, THE DOCTORS AND THE ADVOCATES WHO HAVE BEEN TAKING A DIFFERENT APPROACH TO TACKLING POVERTY AND POOR HEALTH FOR OVER THIRTY YEARS.**

**A GIFT IN YOUR WILL MEANS YOU CAN ENSURE PEOPLE AROUND THE WORLD CAN CONTINUE TO TAKE CHARGE OF THEIR OWN HEALTH.**

To find out how even a small percentage of your Will can make a difference, please contact [fundraising@healthpovertyaction.org](mailto:fundraising@healthpovertyaction.org) or 020 7840 3777.

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