

Team



Disaster Relief
International Development
Community Assistance

Talk

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Earthquake in Haiti

Immediate response and recovery

On January 12, at a few minutes before 5 in the afternoon, a massive earthquake struck Haiti, registering 7.0 on the Richter scale. At least 240,000 people died as buildings everywhere collapsed, and more than 300,000 were left injured and one million homeless. Considered the poorest country in the western hemisphere, Haiti was just beginning to recover from 3 crushing hurricanes in 2008 when this most recent catastrophe hit.



AMURT team assessing affected neighbourhood of Port au Prince

The worst destruction was in the capital city of Port au Prince, where AMURT and AMURTEL both run schools. With teams already active in the community, we were able to begin relief operations hours after the earthquake, and have continued providing food, water, medical care, and basic supplies to over 20,000 survivors.

Surrounded by tremendous needs everywhere, our AMURT and AMURTEL teams have divided up tasks. Both teams have temporarily turned their schools into medical clinics for the local communities, staffed with volunteer doctors and nurses, and continue to offer mobile medical units to outlying communities. As medicines arrive in the city from various NGOs, we continue to stock our pharmacies and make them available to those in need. A member from each team goes to the UN every day to meet with other NGOs and work to procure supplies for distribution.

AMURTEL focuses on immediate assistance, distributing food, water, tarps and any other supplies available from international agencies. Every day our community outreach team meet with community leaders to assess ongoing needs. Currently AMURTEL volunteers are working in 14 camps in the Bourdon valley with a population of about 14,000 people.

The AMURT team works in a coalition with other non government organizations and federations of empowered community groups to distribute food and non-food items to vulnerable groups. AMURT is also rolling out 20 Integrated Health and Education Centers for children throughout Port au Prince. As we have learned from many other disaster situations, it is critical to provide children with a safe environment that encourages them to feel a sense of normalcy and, through art, drama and play, begin to overcome the effects of the traumas they have experienced.

In preparation for setting up these Centers, AMURT and AMURTEL held a training with Save the Children for 70 volunteers who will be working with the children.



Doctor from AMURT's Rapid Response Team in Haiti

Volunteer Diary: Haiti

By Joni Zweig, AMURTEL Rapid Response Team



Joni in the AMURTEL clinic in Haiti

I left for Haiti very early on the 14th, traveling with another AMURT team member. Our first stop was at the AMSAI school in Delmas 31, Port au Prince. A large food distribution was in progress when we arrived, with 200 local children hungrily eating cooked beans and rice. From there I went to our center in Bourdon, and was immediately surrounded by survivors needing medical attention. As so many of the doctors and nurses living in Port au Prince were killed in the earthquake and most of the hospitals destroyed, there was a critical lack of medical care for the victims from the very beginning. As medicines ran out and patients began to overflow into the streets after the first 12 hours, many thousands with crucial injuries went untreated. In my first hour in Bourdon, I treated many with serious injuries, including a young girl of about 10 years. She had been outside, carrying her baby sister when the earthquake hit, bringing a large concrete wall down upon them. Her little sister was killed and my patient had a broken hand, many deep lacerations, and a haunted look in her eyes. A man showed up with a very badly wounded foot that already showed signs of gangrene. Due to the lack of proper medicines this man was facing an amputation. This was not uncommon, with so many dreadful injuries and no proper way to clean them or antibiotics to prevent infection, many were facing life-threatening infections.

The following 3 days I traveled around the Laval Bourdon area with a mobile medical unit of 3 doctors, 2 nurses, myself, and boxes of medicines we had gotten from the Chilean Embassy. We went to areas we knew had so far received no medical attention. The amount of devastation and destruction we saw was unprecedented. Entire communities within the city were completely leveled. The few buildings still standing were little more than shells, with the interior caved in. Most of the patients we saw had been injured by houses and walls falling on them. Many told their painful stories of family members being buried in the rubble of their fallen homes. All were living in the streets; shelter consisted of any piece of fabric, sheet metal or plastic that could be secured. Around us as we traveled through the city from site to site, setting up our clinics, we were surrounded by the smell of death. We passed numerous buildings that had collapsed, trapping and killing all inside. One elementary school was particularly sad to pass- the afternoon session had just ended and the parents were on their way to pick up their children when the quake hit. It is estimated there are over 100 students buried in the rubble there. No one was untouched by the devastation.



Joni administering homeopathic medicine



AMURTEL volunteers distribute food rations in Haiti

The need for clean drinking water, nutritious food, shelter and continued medical care is as pressing now as it was 4 weeks ago. The difference is, with time, supplies have begun to arrive into the city. It is a month since the earthquake struck, and we are racing around the clock to get proper shelter to the survivors before the spring rains come. One man came to us desperate for a tent. His wife had just given birth and they were all sleeping outside with no protection from the elements. His family is just one of thousands who must find some protection from the blistering sun during the day and chilly rains and mosquitoes at night.

Our teams in Port au Prince are working almost tirelessly to try and get provisions to the people most in need while continuing to develop practical, long-term solutions for the recovery that may take years to achieve. One of our strongest assets is the Haitian people themselves. They are strong, motivated and unwilling to bow to despair. With our philosophy of working in a grassroots style, partnering with communities in a manner that empowers them in building their future, the courage of the Haitian people will keep our work on target for now and well into the future.

Kenya: Addressing the HIV/AIDS Pandemic

An integrated approach

Emmanuel was sitting in the shade of a tree in Kibarani village (near Ukunda in Coast Province), undertaking the painstaking task of digging jiggers out of children's feet. Jiggers, or sand fleas, still menace people in the rural areas of Kenya, thriving in particular in households lacking in proper hygiene, and eating away people's toes and fingers.



Emmanuel, one of AMURT's field volunteers, patiently digs jiggers out of a child's foot. If left untouched, the jiggers would slowly eat away the child's toes.

Emmanuel is one of 120 care counselors for orphans and vulnerable children AMURT has trained for its integrated HIV/AIDS program in Kenya. Like many of our volunteer counselors, he responds beyond the call of duty to the children in his care. Not only does he visit them in their homes to make sure their basic physical and psycho-social needs are being met, but he also spends time helping to solve the tough challenges faced by the children such as the jiggers. He is currently planning a program to fumigate affected areas.

AMURT is caring for 3000 children either fully or partially orphaned by HIV/AIDS in three provinces in Kenya (Coast, Nyanza and Central). Our aim is to provide enough support to the children so they can lead a normal life in their habitual social environment. Hence we provide educational, medical, nutritional, legal and emotional services.

Once a month, in each of the nine project areas, we gather the children together for a day of fun and games, medical check ups, nutritional food and "edutainment" (a blending of entertainment and education). It is a great opportunity for the children to make new friends and learn about issues to enhance the quality of their lives.

Recently in Mahaya in Nyanza Province the youth club, which is also supported by AMURT, provided the "edutainment," which was a skit about child rights. The young actors focused on the issue of child marriage, advising the girls to avoid any advances from older men. "Finish your education, don't be lured into a trap," was the message. AMURT is cooperating closely with the District Children's Officer (DCO) in Rarieda District to eradicate child marriage. Our staff have already saved a 14 year old girl who was being forced into marriage by a man who had been providing her with small amounts of money (the legal age of marriage in Kenya is 18). With the help of the DCO we brought the case to the attention of the police and are looking for a safer place for the girl to live and continue her schooling.



AMURT's nurse provided deworming medicine to 550 children during the Saturday gathering for orphans and vulnerable children.



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Kenya (continued)

Through our child rights clubs – we have formed 7 so far in Rarieda District - we are making children aware of their rights, including the right to have access to food, medicine and education, the right of association and the right of lawful inheritance.



Children from the AMURT-sponsored child rights club at Manera Primary School in Nyanza Province expressing their rights during a public program.

AMURT's care and support program extends to people living with AIDS (PLWA). The 120 home based care providers we trained in 2009 are now visiting up to 10 PLWA on a weekly basis, providing them with nursing care, nutritional education, counseling and support, and, very importantly, making sure they are taking their medicine on time. This alone can make a huge difference in a person's life. Elisha Oteno, for example, who lives in Konounga village, is now adhering to the prescribed treatment regimen, and can walk with a stick after being bedridden for weeks. One of his neighbors said: "When a PLWA gets out of bed it brings life to the whole community."

In addition to running care and support programs for people affected by HIV, AMURT is addressing the prevention issue by engaging youth in public awareness campaigns.

Our youth club coordinators are currently working with the youth to develop effective messages and methods to reach people in an impressionable way to change behavior to help reduce the incidence of HIV in Kenya.

This integrated HIV/AIDS program is supported with the help of a grant from USAID that has enabled AMURT to scale up the HIV/AIDS-related work it has undertaken since 2002. The base of our operations is the AMURT Comprehensive Care Center near the Kangemi slums in Nairobi that includes Voluntary Counseling and Testing and Anti Retroviral programs for the surrounding population. In addition, the health center provides around 3,000 people monthly with services such as pediatrics, radiology, laboratory testing, family planning and child immunization, and a TB and malaria treatment center (in collaboration with the Kenyan Ministry of Health).

Hence, AMURT is building a comprehensive approach to the HIV/AIDS pandemic that offers integrated solutions to the disease and improved lifestyles and opportunities for its survivors.



Elisha posing with his step-mother. Elisha was bedridden when he first joined AMURT's home-based care program, and was ostracized by the community - no one would even dare to touch him for fear of contracting HIV. It was only when AMURT's field officer massaged and turned him that the villagers realized that HIV cannot be transmitted by touch.

Team  Talk



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