



## ***Ananda Marga Universal Relief Team***

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### **Ghana and Burkina Faso News June 2007**

Dear Friends of AMURT and Friends of Africa

I hope that you are all well by His Grace. Here in West Africa we are all very well. Still encouraged and inspired by the projects that we have been so blessed to be part of. Every six months we sit down to review the progress of the project work and prepare the newsletter to share the developments with all of you. With the completion last fall of the second phase of the Ghana water project, for the first time in three years we were not working under time pressure and deadlines. This permitted us to be creative and attend to details that had been neglected.

We are all feeling good about the bulldozer work on the Mafi-Zongo dam. The work, which was long over due, had become urgent with the damage the dike sustained in last year's floods. The water supply to the communities has become much more regular and the management more stable.

The most exciting new program is the launch of the Kekeli movement. With women's health promoters active in an increasing number of communities, we expect to see significant improvements in the health of the population in the project area. The positive responses to homeopathy at the Seva Clinic continue to surprise and delight us. It has now become an established part of the services.

In Burkina Faso, the training programs for the village midwives has been taken to a higher level with the added participation of very qualified trainers from Ouagadougou. It was a big breakthrough. The training of the male village health promoters also resumed.

We are now looking forward to the global forum for AMURT to be held in Germany in July. We are sure it will give a boost, not only for the programs here in West Africa, but for similar programs around the world.

As always, we are happy to get feedback on the newsletter. Any comments, questions or suggestions are very welcome. We love to hear from you!

Brotherly yours,

Dada Daneshananda  
AMURT coordinator

# Kekeli



Kekeli – 'brightness' is grassroots health education movement of women. Logo by Devi Nista; The first batch of Kekeli women graduated in April at Seva Clinic. The course was taught by Silje and Bridget, with Bernice and Enionam. The candidates were elected by the women in their communities.

## **MAFI-SEVA COMMUNITY CLINIC:**

### **Kekeli Movement launched: *Women together for health and development***

Ever since we started the community health education programs in 2005, it had been our intentions to structure the activities so as to be less dependant on outsiders. After long preparations and study, we launched a program of training women in the area as village health promoters in March. We started with the communities in the southern zone of the water project and held meetings with the women in each village where we requested them to select their best candidate.

Thirteen women attended training three days a week for four weeks. The course was compiled and taught volunteers Bridget from the US and Silje from Norway, together with Bernice and Enionam from Seva Clinic. The focus was on health hygiene, sanitation, disease prevention and women's health. They also learnt some basic first aid skills. The program was named Kekeli which means 'brightness', symbolizing the light of knowledge dispelling darkness of ignorance and superstition. Each of the candidates had been elected by the women in their village. Each received an 80 page illustrated manual, translated into the local Ewe language. The women were given a t-shirt with the Kekeli logo and slogan - 'Women together for health and development'.

The Kekeli women are emerging as leaders to dispel ignorance and superstition about health issues. The focus is on women's health and teaching precautions against preventable diseases.



Doris from Adzasika; Juliana from Sitorloko; Mawusi from Agbadzikope

The Kekeli women have already become active in teaching their communities what they learnt in the cause. They have organized cleanups in the communities, conducted meetings and classes, making house to house visits to advise the women about sexual health, hygiene, nutrition and how to take better care of their families' health. AMURT plans to continue to give more training to expand the knowledge and increase the capacity of the Kekeli women. If things go well we will have expanded the program to reach 50-60 communities by the end of 2008.

The work with T.B.A.'s (traditional birth attendants) continue. Seven T.B.A.'s assisted by AMURT delivered 37 babies during the period. With help from AMURTEL in the US and UK, we received teaching aids, such as special dolls, with umbilical cords and placenta, female pelvis model, and dolls with lungs to practice oral resuscitation, and many colored posters showing the stages of pregnancy and delivery. These visual aids are essential when teaching illiterate women who have difficulties following theoretical lectures.



Left: Bernice with one of the charts for teaching the traditional birth attendants; Right: Emperor checking blood pressure during a homeopathic consultation

At the request of the district health department, AMURT donated furniture and constructed a standpipe for a new clinic in Agoe village, which is part of the water project area.

The role of homeopathy has expanded at Seva Clinic over the last period. The alternative treatment has proven very effective and has become popular. Patients come from far away communities for homeopathic treatment.

We thank the donors for the clinic program

AMURT Italy  
Jolly Casa  
AMURT and AMURTEL United Kingdom  
AMURT and AMURTEL USA  
Ghana Homeopathy Project, UK  
Individual donors

## **GHANA – Volta Region**

### **MAFI-ZONGO WATER PROJECT**

Since the beginning of the year, the community, with AMURT's assistance, has made progress in stabilizing the water project. We have attempted to adjust the pumping schedule so as to give water regularly to all the communities. Our target is uninterrupted water supply in all the communities, and while we are yet to achieve that goal, we have come close. Much effort has been put into reducing the water losses on the lines, with encouraging results. The project has also been able to save more than 5 million cedis in the bank, which promises well for the projects long term sustainability.

The policy of dividing project into two zones, Northern and Southern Zone, for the purpose of coordination, supervision and finance has been worked very well. Monthly meetings are held in the first week of every month, where information is communicated to all the communities and issues addressed.



Left: Headmen and standpipe attendants at Southern Zone monthly meeting in May; Right: Omoro and Moses installs the new big wall to control overflow on the dam

In the second half of last year, the project experienced reduced water quality caused by increased turbidity in the raw water in the dam. At Christmas time we put up a simple installation, improvised by the local villagers, allowing us to collect the raw water from near the surface of the dam. This has minimized the effect of the floods and rains on the quality of the raw water, and stabilized the water quality.

### **Bulldozer work to repair dike and increase dam storage capacity**

After a long search, we finally located the engineer that originally designed the dam, and persuaded him to return to Mafi-Zongo to help us. Mr. Lawson conducted extensive surveying of along dike area, and completed a feasibility study. The spillway was moved from the middle of the dike to the end near the Zongo village. With nearly eleven days of bulldozer work, we were able to repair the damage the dike sustained in the floods in May 2006 and constructed the new spillway. At the same time the spillway height has been raised to allow us to store more water.





Left: The Water Treatment Plant has been painted and renovated. Right: The damage caused to the dike in last years flood was repaired and the storage capacity of the dam was increased

The Water Treatment Plant is now more presentable. It is newly painted, inside outside, and now has an office space, and meeting area,

We thank our donors for the Zongo Water Project

Amici Nel Mondo, Postal, Italy  
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Lanesra Foundation, Philippines  
AMURT UK  
AMURT USA  
Neo Humanistic Barnehage, Oslo, Norway  
Individual donors

## **BURKINA FASO**

### **DEOU SAFE MOTHERHOOD PROJECT**

In January Burkina Faso was affected by a meningitis epidemic that killed 1,000 children. Our partners in the health department was fully occupied with the urgent vaccination campaign. This caused the training sessions planned for the midwives and village health promoters to be delayed. The monthly supervision visits of the village midwives and the SMI mobile program, with checking of pregnant women in the communities, along with health education programs was unaffected by this.

### **Village midwives unite in opposition to FGM**

In May a ten-day 'repetition and further training' program for the A.V.'s (village midwives) was conducted in Deou, Gandafabou and Boulekessi. The last three days 27 of the village midwives came together in Deou. we were able to secure the services of Madame Oubda, a senior midwife and experienced trainer from Ouagadougou. She endured the hardships to travel up into the desert with us to give some very special classes. Her presentation on Female Genital Mutilation was much more detailed and compelling than our earlier efforts to address this crucial issue affecting thousands of women in these remote communities. At the end, the women made a circle, held hands, and resolved to be united in the fight to oppose FGM in the area. The vibration in the room was very strong, it was a new beginning. Mme. Oubda also gave a new class about the problems of breastfeeding, and how the midwives can help the women to overcome them, so as to ensure that their babies get the nutrition

they need.



Left: The village midwives are following the classes with great interest; Right: The Peuhl midwife from Boulekessi got the first prize at the May training session

We now have three very qualified women from Ouagadougou as our additional partners. They are members of the Midwife Association of Burkina Faso, and well trained to give teach about health issues affecting the women in the rural areas. They will participate in future training sessions for the village midwives. Their participation will add significantly to the quality and range of the training program.

In May we organized additional training session for the A.S.V.'s, (village health promoters.) The five day session was attended by 12 men, all trained several years ago. The health promoters are able to treat malaria, diarrhea, conjunctivitis, snake/scorpion bites, and wounds. These comprise the most common afflictions in the area. They all received new stock of the most important medications and supplies needed in their work.



Left: The ASVs came together for a five days repetition course with the head of Deou Medical Center in the center. Right: After the class on breastfeeding Madame Oubda took time to speak with many of midwives individually to answer their questions

The A.S.V.s (village health promoters) are all literate, and often work closely with the A.V.s' (village midwives). They help the midwives maintain their records of deliveries and fill up reports for the health department. The literacy courses we have arranged for the A.V.'s the last years have not been successful We are looking at ways of addressing this problem as all but 1 or 2 of the midwives are still functionally illiterate .

Our thanks to AMURTEL USA and AMURT and AMURTEL in the UK for providing us with the teaching aids and visual materials for teaching the midwives.

The web page for the project has been updated after a long time. Take a look:  
<http://amurt.net/africa/burkinafaso/index.htm>

We thank our donors for the Deou Health Program

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