

Canada Africa Community Health Alliance

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l'Alliance de Santé Communautaire Canada-Afrique

ASCCA**eNewsletter — May 2008****Français**

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Empowering women in Tanzania

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Join us for our upcoming fundraisers:

African Nights
May 31, 2008
Bronson Center
Start time: 5:00pm

CACHA 5th Annual Golf Tournament
June 11, 2008
Nation Golf Course

To purchase tickets, sponsor or provide gifts for an event or for more information, please email info@cacha.ca.

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**“IT IS WOMEN WHO WILL BRING AFRICA OUT OF POVERTY”**

While we would like nothing better than to see Stephen Lewis’ hopeful words come true, it will not be without the hard work of many. With Mother’s day upon us, we look at the small ways in which Canadian women are helping African women bring themselves and their families out of poverty.

Mother’s day offers people in many western countries a formal way to thank our moms for what they give us. True to its origins in goddess worship, this annual event lets every mother enjoy some well-deserved appreciation.

But what of those mothers whose dinners are cooked over a fire after walking to the well for water with a baby in the sling? Mother’s day is as foreign to most rural African women as microwaves, tap water and strollers. How could Africans begin to thank this significant group of people whose work is truly never done?



“I’d give them a day off—maybe even a weekend,” says Tania Archer, a University of Ottawa student in international development and globalization who travelled to Benin with CACHA in 2007. “Of course, this is out of the question in Benin.”

Means for an end to poverty

Humanitarian groups, together with financial institutions, are considering another kind of gift to third-world women: Microcredit. Often focussed on women, who usually lack access to finances, microcredit offers small loans for self-employment projects with the potential of bringing people out of poverty.

“...100 women showed up, proud to have been asked for their input on and participation in the project!”

As volunteers on the CACHA mission to Benin discovered, the women there have ideas for such projects in abundance.

“We initially met with ten or so women in the village of Aklampa to explain the project,” says Geneviève Alary, healthcare management professional in Montreal and CACHA volunteer.

“After consulting with one another, they asked that we reschedule for the following day so they could invite their “sisters.” The next day, over 100 women showed up, proud to have been asked for their input on and participation in the project!”

A fund of one’s own

Supporters of microcredit maintain that when women have more financial independence, all kinds of good things result.

“When women have more money, they invest in family nutrition, education and health, and have fewer children in the long term.”

“When women have more money, they invest in family nutrition, education and health, and have fewer children in the long term,” says Tania Archer, who is working together with Geneviève Alary on the CACHA Benin microcredit project. “The problem is that while men can usually find paid work, women usually cannot. Nor do they have access to credit.”

Hurdles

The trip was exploratory, allowing the two women to foresee not only the potential benefits but also the difficulties facing the project.

“For this project to succeed we need to be there for longer than three weeks,” says Tania Archer. “And there are economic hurdles, such as demand. Say we lend money to a woman so that she can buy a

better sewing machine. Will there be demand for the extra clothes she is able to make?"

A woman's place

But a more formidable hurdle by far to exiting poverty in Africa is gender inequality. Benin recently instituted a new family code in 2004 that recognizes the equality of men and women. Polygamy is now illegal, and girls and women can now legally inherit money and property from deceased parents.

"Equality is now legal, but between the application of a law and the changing of a culture, there will always be a lag."

"Equality is now legal," says Geneviève Alary, "but between the application of a law and the changing of a culture, there will always be a lag."

In a country with an infant mortality rate of between 10 and 15 percent, where malaria is the major cause of death of children under five, projects such as microcredit have the potential for improving the poor conditions.

"In the women's eyes, I saw that same glimmer of hope that I've seen in the Canadian women I've worked with," says Alary.

Doing a lot with very little

As a healthcare management professional in Canada, Alary couldn't help but compare what she saw CACHA and partners accomplishing in Benin with the system at home.

"Our healthcare system is overloaded despite the resources we have at our disposal," she says. "Our healthcare professionals depend overly on diagnostic tools to do their job. The experience in Benin only confirms with me that it is still possible to do a lot with very little."

Women working for women

CACHA volunteers often cite the ability to achieve great things with small resources as one of the most important reasons for working with the group, along with transparency and sustainable, targeted work.

"If you want to get to know the people, to truly see and understand them, you need to be there."

"The field work is real," says Tania Archer. "CACHA does what it says it's going to do. There is no money disappearing. There are no big hotels. Everyone from the founder to the student stays with the local people. If you want to get to know the people, to truly see and understand them, you need to be there."

Fieldwork with CACHA also gives students invaluable practical application to theoretical university programs.

"I thought I had learned so much in the last three years, but when I got to Benin I realized how much more I had to learn," says Archer. "It was overwhelming. But now I have a step up on other students because of this experience."

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ASCCA**eNewsletter — May 2008****Français****EMPOWERING WOMEN IN TANZANIA**

In many parts of Africa, women lack power, which means they lack money, which means they lack healthcare. Since AIDS, this equation has only become more pronounced.

Two Canadian women hope to turn this equation around, in one part of Tanzania at least. Queen's University physician Karen Yeates and Kingston businesswoman Carol Bisailon founded Prevention Through Empowerment in the hopes of improving basic health and HIV prevention among Tanzanian women.

**Together we can**

Prevention Through Empowerment, a CACHA project, started up and now helps run Pamoja Tunaweza Women's Center in the Mount Kilimanjaro area of Tanzania. The name means "together we can" in the local Kishwahili language.

"The center provides open, honest sexual health education."

Staffed by Tanzanian women with training in human rights and HIV/AIDS-related issues, the center aims to improve knowledge of and access to women's health care.

"Discussing sexual health is taboo in Tanzania," says Karen Yeates. "The center provides open, honest sexual health education. Through this, we hope to make these discussions more mainstream."

Better partners

But it is not just women who benefit from the programs and forums at the center. Men and boys are also invited to participate in sessions where they will learn how to be better partners to their wives and girlfriends in the fight against HIV.

"Being able to negotiate a sexual encounter gives women a higher probability of protecting themselves against HIV."

"We want to help women feel they have more power in sexual decision making," says Yeates. "Being able to negotiate a sexual encounter will give them a higher probability of protecting themselves against HIV infection."

The center also offers temporary shelter for women and children in need, and free and confidential HIV counselling and testing.

Universal health

To complement this already broad mandate, the center opened a women's health clinic during the CACHA-PTE Women's Health Caravan in April 2008. A female Tanzanian physician teamed with a Canadian family physician with experience in women's health provide a respectful, compassionate and confidential environment for women with HIV and other health concerns.

"Most women in Canada dislike a visit to their doctor to discuss women's health or sexual health issues," says Yeates. "Now imagine being a poor, illiterate woman in sub-Saharan Africa with HIV and trying to access health services for similar issues.

"Canada and Africa are two very different worlds, but women's health issues are universal."

Mama Minde

The idea for the center saw the light at the World AIDS Conference in Toronto 2006. There Yeates and Carol Bisailon met Elizabeth Minde, known in the Kilimanjaro area as Mama Minde.

Minde is a Tanzanian lawyer who has worked tirelessly for almost two decades as the head of a Tanzanian NGO to improve women's rights in Tanzanian society through legal aid and education.

"She told us how legal challenges were increasingly difficult to separate from social challenges," says Yeates. "All of her most disadvantaged clients were women. Her stories about the challenges women face in Tanzania solidified our partnership, not to mention our friendship."

Gender equality, health equality

The center supports the United Nation's Millennium Development Goals of improving gender equality and women's health. Its philosophy is that women will be the ones to change HIV rates, but only once they understand that they have choices.

"These women will teach their daughters a new way to live, with new expectations for the way they will be treated."

"Women who understand the health issues and see their role in prevention will teach their daughters a new way to live," says Yeates, "with new expectations for the way they will be treated."

Stephen Lewis once said that the women of Africa will bring the continent out of poverty. To that, we say "*Pamoja Tunaweza.*"

Women on the mountain

Keeping the center running costs about \$2,000 a month. Fundraising plans include a New Year's Eve 2008 Gala in Kingston and a January 2009 Mount Kilimanjaro climb.

Five Tanzanian women and a team of twenty Canadians (including Dr. Yeates and Ms. Bisailon) will undertake the approximately five-day trip to ascend the highest point in Africa.

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For the last six years, nursing students at St-Jean-sur-Richelieu Cegep have been able to combine passion for their work with compassion for others by joining the CACHA medical mission to Gabon, Africa.

Every year, seven lucky graduating students have the opportunity to spend their surgical medicine internship transferring and adapting skills gained at school to entirely different circumstances. Under the supervision of their professor and a companion, about 45 interns over six years have come to know this small corner of Africa, familiarizing themselves not only with local health problems, but also with the economic and spiritual nature of the community.

Rotating among various dispensaries, the students gain expertise in data collection, clinical examination, pharmacology, and individual and group education. For some, this experience has opened doors to positions rarely available to new graduates.



The mission team comprises both Canadians and Gabonese in many different roles, working together and learning from each another. Cultural exchanges of all kinds result from living within this community for three weeks: students and community members learn about each other's traditions and forge lasting friendships.

"For some, this experience has opened doors to positions rarely available to new graduates."

The students start preparing for the trip in the fall by organizing fundraisers. They also read up on Gabonese culture, health system, and the tropical diseases they are most likely to encounter, which helps them provide the appropriate care while on site.

Then comes the adventure. While every year the stories are different, one thing never changes: the students always leave a bit of themselves with these friendly and welcoming people.

For the supervisors, the best thing about these missions is seeing the wonder in the students' eyes as they soak in both clinical and personal knowledge.

For the students, the educational partnership with CACHA gives them an unforgettable personal and professional experience, supported by an excellent medical team experienced in humanitarian missions. For these lucky seven, it's the opportunity of a lifetime.

"The educational partnership with CACHA gives the students an unforgettable personal and professional experience, supported by an excellent medical team experienced in humanitarian missions."

By Janik Sauvé from the Comité du stage à l'international in the Département de Soins Infirmiers at St-Jean-sur-Richelieu Cegep.

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By combining their strength, CACHA, Rotary and CSRAI (Canadian Support for Rural African Initiatives) have helped improve life in the village of Kilema, Tanzania in countless small, practical and lasting ways. In January 2008, two teams of Rotarians and Friends from 12 Rotary clubs spent a total of four weeks in this area with one of the highest HIV/AIDS rates in Tanzania.

Chris Snyder recalls when four boxes of donated Canadian soccer jerseys brought together four Tanzanian village schools in some friendly competition.

"To say the fans were enthusiastic is putting it mildly," says Snyder, the overall coordinator for the Rotary trip and leader of one of the two teams. "After every goal, the whole school ran onto the field."

The tournament became a festival. It helped pull together the local schools in the district and deepen the sense of community.

One game at a time

A soccer tournament may seem small, almost insignificant in the face of the problems Africans face. But CACHA and Rotary think focussing on the small things makes a big difference.



"We call these Rotary trips 'Sweat Equity,'" says Snyder, "and what we do on them is not rocket science. We help remove obstacles. We help give a few people a chance."

"We help remove obstacles."

A twenty-dollar hearing aid can open up a world for a deaf child. A school lunch can help a student learn. Antiretrovirals can return a parent to a family, an employee to a job. In an area where one quarter of all children have lost a parent, every little thing helps.

Education matters

Last year in Kilema the Rotary group refurbished a badly deteriorating school.

This year the group helped refurbish five schools. It is funding training to upgrade English teaching skills, since high school is taught in English. It is paying the secondary school fees of 60 students. It is providing over 2,000 books in both English and Swahili, ending the practice of three or four children to a book. Rotary also gave computer training to teachers and will assist with future school improvements.

Big effort, small waste

While Rotary focuses on the small things, the word "small" does not apply to the amount of effort or funding that Rotarians have contributed to Kilema over the last three years. Apart from the sweat equity, Rotarians, through donations from Rotary clubs, partners and individuals, have donated almost \$250,000.

"None of this money goes to administration."

Much of this money was raised by students from the Kawartha Pine Ridge District School Board, under

the impassioned direction of principals Steve Truelove and Jeff Kawzenuk. Both men are also skilled carpenters and builders, which benefited the mission in many ways.

All funding collected is used in a very targeted way. "None of this money goes to administration," says Snyder.

Sustainable partners

The needs in Kilema, where poverty and AIDS have taken their toll, are wide-ranging. In an area where many people can't afford the overnight trip to the hospital, medical problems often go untreated.

"With the combined forces of CACHA, Rotary and CSRAI focussed on health, schools and orphans, we believe we have been able to improve life in many practical, lasting ways," says Snyder.

Rotary volunteers helped create a fishpond that will give a protein boost to the local diet. They visited rural areas and installed about 40 solar lights in huts. They improved many school kitchens, where typically one woman cooks in a smoke-filled hut for hundreds of students.

"We've evolved an interesting model of community partnership that we believe could be adapted and used as a template in other places," says Snyder.

Skill equity

Rotarians have engaged in 10 of these physically taxing humanitarian trips in several countries since 1998.

"You get hooked on these missions"

"You get hooked on these missions," says Snyder, who has been on most of them.

No specific skills are necessary for the work, but talents always surface. It was up to Snyder and Tom Sears, leader of the second team, to dig these skills out and put them to work.

For example, a retired art teacher on the trip illustrated a talk on AIDS and designed the soccer tournament trophy. Others taught English, organized people and projects, or taught crafts and quilting. Those with medical training—nurses and chiropractors—helped in the hospital. Some had great building and painting skills, while others had computer skills that were used in a multitude of ways.

"Everyone had good ideas and a great attitude, both very important attributes for these trips," says Snyder.

Trips inspire

Why doesn't Rotary simply send money to hire local people? In fact, on their most recent trip they employed many, including a group of people living with AIDS to paint and help build. Donation money will employ many more to complete the work Rotarians could not do.

"But when you spend two weeks in an African village, everything moves you," says Snyder. "How do you describe these things to people back in Canada?"

But describe them they do, to any and all who will listen, which makes Sweat Equity alumni such good honorary African ambassadors to Canada.

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