

Beco village well cleaning and chlorination by local volunteers and coordinator Marten Fay, East Timor.

Photo: Penny Tweedie

## Water and sanitation

In 2003 a young girl in East Timor suffocated when hundreds of intestinal worms clogged her oesophagus. Her shocking death drew attention to the link between unsafe water and poor sanitation and hygiene and high levels of worm infestation in children in developing countries.

East Timor's 64 sub-districts have just 400 water systems and many are in disrepair.

Australia is funding the training of local people to design and build water and sanitation facilities.

Women in particular are being encouraged to take part since they have the most to gain from having water systems in their villages. They are usually the ones who end up walking some distance to carry water or wash and cook in unsafe water. At the same time, Australia funds education in good hygiene practices such as hand washing after using a toilet. Basic measures like these help prevent conditions such as intestinal worms and their sometimes tragic consequences.

## Avoidable blindness

In Fiji, a special purpose Pacific Eye Institute is being built in Suva as part of a broader plan by Australia and other donors to reduce the incidence of avoidable blindness in the region.

Two inter-connected double-storey buildings will house training rooms for eye care nurses, doctors and technicians as well as operating theatres, laser treatment room, optical laboratory, offices and a resource centre. From the colour of the walls to the gradient of the outside ramp, all facilities in the Pacific Eye Institute are designed to make the building as accessible as possible. Special drop-off points are planned for vehicles and ambulances and there's to be a bus stop at the building's main entrance and good footpaths.

#### The future

Providing good health care in any country is neither easy nor cheap. Australia is working with partner countries and organisations to find creative and practical ways to bridge funding gaps and make health services available to the poorest. Better health gives people a base from which to break poverty cycles and will contribute to the achievement of the Millennium Development Goals.



With funding and support from Australia and other donors, countries in the region have made significant improvements in the health services they provide.

- In Cambodia, by mid 2009 at least one midwife was deployed in each health centre in the country. This is a significant improvement on 2008 when 79 health centres did not have a midwife.
- In Papua New Guinea, more than 900,000 children were immunised against measles and other childhood illnesses in 2009.
- In the Greater Mekong sub region, nearly 12,000 injecting drug users were reached in six months in 2009. More than 1.5 million needles and syringes and over 278,000 condoms were distributed. More than 10,300 successful referrals were also made to methadone treatment, HIV care and primary health-care services.
- In Solomon Islands, malaria cases halved from 199 per thousand people in 2003 to 82 per thousand in 2008. The number of cases in Vanuatu reduced by 80 per cent from 74 per thousand people in 2003 to 14 per thousand people in 2008.

The reach and impact of Australia's aid is increased by our contribution to the work of other donors, non-government organisations and multilateral and regional organisations such as the World Health Organization, UNAIDS and UNFPA, the Global Fund to Fight AIDS, Tuberculosis and Malaria and the GAVI Alliance.

In 2010–2011 Australia will spend an estimated \$555 million on international health programs. This is a 17 per cent increase over the previous year.

Front cover image: Sibange Goret and her baby Weetera (three months of age) in a makeshift shelter in the hills above Nusa Barooka village, whilst in Solomon Islands.

Photo: Rob Maccoll













These icons symbolise the Millennium Development Goals eight goals representing an agreement by world leaders to reduce poverty and enhance human development by 2015.

www.ausaid.gov.au/keyaid/mdg.cfm

the Principal Nursing Office at South Tarawa Hospital, Kiribati. Photo: Lorrie Graham

recipient Mrs Tarew Tong, in

Australian scholarship







Australian Government aid program: Health highlights



Dr John Szetu operating on a patient's eyes in Fiji. Photo: The Fred Hollows Eve Institute with the ustralian and New Zealand



Shefali speaks with a BRAC health worker during a visit to her home in a remote northern district of Bangladesh.

Photo by BRAC

We all know good health does not come about by chance. A myriad of factors contribute—access to a variety of food grown in good soil and clean air, safe water and sanitation services, educated people, good policies and governance and thriving economies. There are many more. When these are not present or are weak, people's health will suffer.

Australian aid supports all the Millennium Development Goals. Our approach to health is pragmatic, creative and tailored to meet the most pressing needs of communities. We work in close partnership with countries to deliver better health services to the poorest communities.

#### Maternal health

Each year ten to 15 million women suffer severe or long-lasting illnesses or disabilities caused by complications during pregnancy or childbirth. Most of these conditions are treatable if there is timely access to skilled care. This happened with Shefali Begum who lives in a remote northern district in Bangladesh. During her pregnancy she was fortunate to have the care of health workers working for a non-government organisation, BRAC, which receives support from the Australian aid program.

The baby's birth did not go as expected; serious complications set in and her life was in danger. Her family could not afford to take her to hospital and pay for the treatment. It took a promise by BRAC to pay her medical fees for her to finally receive specialised medical treatment. She recovered and continues to receive visits from a health worker to make sure she and her children are healthy. This outcome highlights the value of investing in the training of skilled midwives.

## Child health

Every few months a team of health workers walks for hours along the jungle tracks around Kokoda in Papua New Guinea visiting villages and setting up temporary health clinics under the trees. Nurses check children's health records, record weights and measurements, update immunisations, and follow up on discussions and advice from previous visits. They sometimes provide medicine which has been brought by a 'runner' who goes between the health team and Kokoda every day to make sure vaccinations are kept refrigerated as long as possible.

The nurses talk to the village about the need for children to eat a variety of foods to avoid developing conditions associated with malnourishment. Without the travelling health team, people would have to walk hours just to get basic health care. And without funding from the Australian aid program, the health team would not have the resources to make its trips into the jungle villages.

## **HIV AIDS**

Like anywhere, the people of Vanuatu love a good TV drama. When the drama also happens to deliver information about HIV and other important social issues, it becomes more than mere entertainment.

*Love Patrol* is a dramatic series produced by the Vanuatu theatre company Wan Smolbag. The company is funded by the Australian and New Zealand Governments and other international donors. Watching Love Patrol gives people the chance to talk about issues they would not necessarily feel comfortable about discussing otherwise. At the heart of the larger than life plots, is factual information, which in the case of HIV can literally save lives.

## Malaria

Filming of a scene for the

TV drama, Love Patrol.

Photo: Alison Moore,

Sam Lamaher, field

**Vector Borne Disease** 

Control Programme,

Photo: Elizabeth Iames

Vanuatu malaria testing.

Ministry of Health,

supervisor in the

Wan Smolbag

A small insectary houses hundreds of mosquitoes at the Australian Army Malaria Institute in Brisbane. Scientists spend their days poring through microscopes looking for clues to the genetics of malaria parasites and the mosquitoes that carry them.

Solomon Islands and Vanuatu in particular have some of the highest rates of malaria in the world. The Pacific Malaria Initiative, a program funded by the governments of the two countries, Australia and other international partners is trying to eliminate malaria by 2014. By sending in teams of health workers to take blood samples of the entire village populations, doing rapid blood tests, giving out bednets and providing education about malaria, infection rates are rapidly decreasing in many areas.



Community health workers set off on their daily run dispensing medicines and checking patients recently discharged from the hospital's TB ward in Vanuatu

Photo: Lorrie Graham



Pharmaceutical dispenser at Nauru Hospital, Majoree Agege.

Photo: Lorrie Graham

# **Emerging infectious diseases**

Since Avian Influenza surfaced in Asia in 2003, Australia has been working with partner governments to stop pandemics by developing preparedness plans, providing stockpiles of anti-viral medication and supporting simple practical activities which are highly effective.

In Cambodia, we have funded demonstration farms which use bio-security practices to raise poultry. Here, a typical farm has its chicken pens a particular distance from the house. New and sick poultry are segregated; farmers learn best pen hygiene practices and how to vaccinate birds. Pens are made from local material such as bamboo and palm and poultry are fed earthworms or water spinach. These measures help keep poultry and people healthy and reduce the risk of families falling into poverty or deeper poverty.

# **Tuberculosis (TB)**

Wearing pink t-shirts and mounted on motor bikes loaded with medications, a team of nurses and health workers regularly sets out around the small island nation of Kiribati to treat patients who have TB or are recovering from the disease.

Kiribati has the highest rate of tuberculosis per capita in the Pacific. TB thrives in its densely populated communities. Australian assistance has helped to recruit, train and provide motorcycles for these community health workers, as well as construct a TB ward at the old hospital site in Bikenibeu, and build Kiribati's first TB laboratory. These measures are working. The number of TB cases in Kiribati has been reduced from 745 in 2007 to 248 in 2009.





A medical team from Kokoda vaccinating a child in the village of Kanga, Papua New Guinea Photo: Roger Wheatley

