AMURT

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Ghana and Burkina Faso News February 2007

Dear Friends

Hope you are all well. Greetings from everyone in AMURT in Ghana and the staffs of the Seva Clinic and the Zongo Water project.

The Kekeli movement was launch a year ago. Candidates selected by the women in each village are trained to be village health promoters. So far 28 Kekeli women serving 28 villages.

Two young volunteers, Ingrid and Torun from Norway, are working with the Kekeli women during the February and March. The Kekeli women have been doing role play from the get go, but this time, we are trying to take the dramas to another level with the help of our volunteers who are just out studying drama at college. The women work in groups, according to the format set up by Olivia and Jennifer in October. The women work with four our five of their Kekeli sisters from the nearby villages. It's a great format as it helps to build the unity and sisterhood, and it's so much easier to stand up in front of an audience when you are not alone.

On February 2nd, all the Kekeli women met at Somekpe village. Torun and Ingrid presented a little drama about superstition for the women. This was followed by an animated discussion where all the women recounted stories about the ill effects of superstition in their communities. Superstition was selected as topic of the month for February. It is very common in the village, that deaths, illness, accidents or even snakebites are blamed on juju or black magic. Old women, particularly mother-in-laws, in every village are branded as witches. Teople often to go the juju man with their health problems, as they think it is caused by magical curses and can only be counteracted with magic.

The Kekeli women's message is that death, illness and snakes are natural, and they must put an end to blaming witches. They are teaching the population that they must go to the clinic when a family member falls sick, not to the juju man.



Mawusi, Olivia and Lucy doing a drama at Daffur, the topic was about blaming mother-in-law wrongly for causing a woman to not have a child.



Patience, the Kekeli women from Daffu summarizing at the end of the discussion.



Doris is the hunter, Holali the juju man, Juliana the mother and Selassie the clinic nurse in this drama at Adiekpe about a hunter bitten by a snake



Happy and Cafui in their drama at Adanu. The discussion following the drama was lively. And the community resolved to stop blaming old women for being witches.

The women in each group wrote the dramas themselves. A meeting of all the Kekeli women have been scheduled for March 4th, where they will discuss and decide on another topic to focus for March.

The use of drama in health education is very effective. The villagers much prefer to be entertained with a humorous drama, than just listen to a lecture. The Kekeli women also enjoy rehearsing and performing the dramas, they are gaining in confidence and inspiration.

We have decided to delay the training of the next batch of Kekeli women for the time being, and concentrate on consolidate the work with the first two groups. The Kekeli women are now becoming better known in the area, and we are all excited about the future of the program.

At the end of December, the Carrefour Africaina (African Crossroads) Magazine ran a two page spread highlighting AMURT's work in Deou, Burkina Faso.. The article describes the health situation for the women in the remote desert regions near the Malian border that makes up our project area. The article is positive and thorough and communicates well the accomplishments, as well as the challenges we have been facing since the program started back in February 2002.

The article is in the tabloid newspaper format, so I had to reduce it to be able to scan it in. If you open it in Windows Picture Viewer, or any other graphics or photo software, you should be able to zoom in quite easily to read the French. I am also attaching a rough English translation.

We are trying to get ready to apply for grants to continue work and expand the activities. The need is great, and, as the article states, no other NGO is working in that area. It's a huge challenge, but we can't let the population down. The way we work, by capacity building on the grassroots level, and working hand-in-hand with the Burkina Faso department of health, we hope to continue to see improvements in the healthcare situation for these neglected tribal villages in the desert.

This month we have embarked on a pilot project, to build a maternity house, or delivery room, in Gorolbaya village. The local people are making the structure from local materials, and AMURT will provide cement to strengthen the structure, make a floor, roof, windows and doors, and we will bring furniture and equipments. The house will be used for deliveries as well as office for the village health agent and the village midwife, and there will be a small hall for meetings and health promotion activities. The plan is to build such structures in each village as the local village midwife and village health agents are becoming established. It will contribute a lot to extend healthcare infrastructure of Burkina Faso to the remote areas. At the same time we are also seeking sponsor to provide donkey cart ambulances to each village. As the article states, where there are complications in connection with the delivery, it's very necessary to have means of transport to convey her to the nearest clinic.

Meanwhile, with help from AMURT UK, AMURTEL US and some private donors we are able to continue the work at a minimum level for the time being. We now have an English translation of the independant Evaluation of the program that was conducted in November. If any of you are interested to read it, let me know and I can send it to you. It's a big file.

Thanks for all your support, and I am always happy to hear from you all of you.

Brotherly yours,

Dada Daneshananda