

NEWSLETTER - JUNE 2006

Dear Members and friends

This is my first newsletter for *Standing Tall Australia*. I'm looking forward to sharing news of our activities over the last 6 months. I've taken over the task from Sheree, who is now working in Switzerland with the Geneva International Centre for Humanitarian Demining, but remains committed to the work of *Standing Tall*. Sheree continues to work with and for mine survivors and other people with disabilities to ensure that governments are aware of their responsibilities to address the rights and needs of people with disabilities.

Standing Tall Australia has one more director to assist with our work. We are very pleased to welcome Sally Campbell-Thorpe who is responsible for our research activities. Sally lives in Sydney with her husband and young son, Harry. Sally will introduce herself in more detail in the next newsletter.

On 5 February 2006, *Standing Tall Australia* began its first Medical Outreach visit to Cambodia. Our team numbered 6 volunteers who independently funded their trip and gave of their time and talents to provide primary health care to mine-affected communities in Cambodia. I was joined on the trip by Drs. Carolyn and Geoff Catton, general practitioners from Brisbane, Carmel Holmes, a physiotherapist from Sydney, and Drs. Robyn and Wayne Martin, a doctor and dentist from Burnie, Tasmania. We were later joined by Jenny Smith, from Sydney, whose tireless efforts, together with her young son Elliott, brightened the lives of several children with disabilities. Special thanks to all of you.

The visit also gave us the opportunity to meet some of the families that are benefiting from the Family Support Program.



Our host for the visit was Jesuit Services Cambodia (JS) and its Director, Sister Denise Coghlan, originally from Brisbane. JS works in many

mine-affected communities in some of the poorest areas of Cambodia. Denise and the JS staff assist people with a disability, and their families, who face extra challenges in their daily lives due to their disability.



We will share our experiences from the visit with you in the pages that follow.

And finally, we take this opportunity to remind you that your annual membership subscription (\$10) to *Standing Tall Australia* for 2006-2007 is now due. Thank you for your continued support.

If you have any questions or comments we would be pleased to receive them.

Merren Bailey - Director

Email: info@standingtallaustralia.org

SPECIAL THANK YOUs

Several members and friends have sent donations - totalling more than \$3,000 - since the last newsletter. Donations ranged from \$10 to \$1,250. Thanks to each of you.

Morris Surgical - donated 30 pairs of aluminium crutches and 40 walking sticks for Cambodia.

Singapore Airlines - transported crutches and toys to Phnom Penh free-of-charge.

Boehringer-Ingelheim - grant of \$500 to support unspecified projects - thanks also to company rep. Michelle Cameron for her support.

Quota, Dr Patricia Knight, Drs Carolyn and Geoff Catton, and patients of the Nundah Family Medical Practice - donations for Water Purifiers.

Cathy Jackson and Bill Cassimatis - fundraising and awareness-raising efforts which has resulted in more members, more donations and more sponsors for families.

If you would like to support the work of *Standing Tall Australia* or specific projects please contact us for more information.

MEDICAL/DENTAL OUTREACH IN CAMBODIA

During the first few days of the visit, the team worked at Banteay Prie, or Centre of the Dove, on the outskirts of Phnom Penh. It is a vocational training school for young people with disabilities from all over Cambodia. The term had just started with the arrival of 100 new students so we were asked to do medical, dental and physio checks.

This was a very busy time for the doctors and dentist. Word got around the district and soon others also wanted our attention. Carmel and I also visited a nearby school and assessed a few cerebral palsy children and set up exercise programs with the Cambodian physio and teacher.

Next we headed to the northwest town of Sisophon in Banteay Meanchey province, near the



Thai-Cambodia border, loaded up with medical supplies and crutches donated by Morris Surgical. Our host was a lovely lady, Sok Eng, a lay person who leads the JS work in the area.

We spent the next few days around the town of Poipet. We were based in the local catholic school and continued medical and dental work with the children and people from the district who heard of our presence. Carmel and I visited the surrounding villages to assess the people in their homes. Such a poverty stricken area; the conditions were heartbreaking. The area is still heavily affected by landmines with new casualties every day. One village we visited, our driver wouldn't let us walk down the road because of the mines in the area, so we were driven right to the front of the house. These poor people live each day with the threat of mines. Many have already lost limbs just going about their daily activities.



I'm sure northwest Cambodia has some of the most bone-jarring roads in the world! Sisophon to Poipet took 3 hours to do just 50 km!



From Sisophon we headed to Siem Reap along yet another dusty pot-holed road! Our host from JS was Tun Channareth (Reth), leader of the Metta Karuna team of rehabilitation workers. Reth is an Ambassador for the International Campaign to Ban Landmines - a more inspirational person you could never meet.

The Cattons & Martins were taken to outlying districts where they held clinics in local schools treating both school children and local villagers. Carmel and I continued our village work. We were able to assess and give advice to



the local rehab workers and give new treatment ideas for them to follow up.

Our final day in Siem Reap included a seminar at the JS Reflection Centre. Rehab and other workers came from Phnom Penh, Battambang, Sisophon & Kampong Thom for the education day. They were all very eager to learn more and had many questions about medical, dental and physio topics.



After the Cattons & Martins returned home, the final phase of our trip commenced. Jenny Smith arrived from Sydney along with 50 kilos of educational toys collected by her friends and church community in Sydney.

Carmel, Jenny and I travelled to the provincial town of Pursat about 4 hours north of Phnom Penh, to visit the local NGO, Disability Development Services Pursat (DDSP). *Standing Tall* has been supporting the work of DDSP for the past 18 months. DDSP, run with the support of volunteer advisor Steve Harknett, cares for children and adults with disabilities through their Community Based Rehabilitation program.

The toys were for DDSP's Disabled Children's Project. Toys are a rare commodity in Cambodia and were greatly appreciated by the staff and children. Carmel and I were able to work with the Cambodian physios and share treatment ideas, while Jenny was able to give advice to the project director and teachers. We had a wonderful time visiting the project and staff who work with such enthusiasm and caring to support these children and their families.

Our time in Cambodia took us through many emotions...compassion, sadness, helplessness, etc, but mostly inspiration as we met amazing people who suffered so much through the Pol Pot years and now have a major disability, but who remain positive and resilient in their daily lives.

I am truly inspired by their attitude to life and it was a pleasure to be able to share their experiences and assist in some small way to improve their daily life.

Merren Bailey

I HAD NO IDEA WHAT TO EXPECT.....

When asked to go to Cambodia by *Standing Tall* to ply my skills as physiotherapist I said yes without a moment's hesitation. I had no idea what to expect but was confident that I would be able to contribute.

In February 2006 I travelled to Phnom Penh and met up with the other members of the team.

Our first task was at Banteay Prieb which is a training centre for people with disabilities. This centre just outside Phnom Penh is run by Jesuit Services (JS) and aims to train its students with a skill that they can hopefully earn an income from (sewing, carving, weaving, etc). Our role as physiotherapists was to review any mobility



problems that the students had and provide intervention where appropriate. Our task was made much easier by having crutches (which had been donated

by Morris Surgical) for those who required them. The majority of people we encountered had amputations, polio or cerebral palsy. There were, however a number of people with conditions which we were unable to give a name to.

While in Phnom Penh we also visited a school run by JS for children with cerebral palsy. We were able to offer some advice regarding managing the children's physical problems but were hindered by lack of time.



From Phnom Penh we travelled to Sisophon where again under the direction of JS we visited villages and homes of people with disabilities. We were escorted by Sovann who is a local physiotherapist employed by JS. The most memorable event of the trip occurred during a visit to a small village, the name of which I don't think I ever knew. We were in the village centre and had seen a number of



children with the usual mix of very unusual conditions. We were preparing to leave but were intercepted by the head man of the village who informed us that one of the children we had seen had rolled from the platform of her home and had broken her leg. The only course of action was for us to take the child and her mother to the nearest hospital where after, and only after, the payment of

a sum of money by JS the child was admitted and later had surgery. This incident brought home the harsh reality of life in rural Cambodia. Without transport and money the child would have had no access to health care and would most probably not have survived.

From Sisophon we travelled to Siem Reap where again under guidance of JS we offered what



intervention we could. Our final task with JS was to conduct a training session with their rehab workers. Although these workers had no formal medical training they showed an amazing aptitude and

interest in managing the physical problems of their clients.

Our final work related activity was to deliver donated toys to a centre for children with disabilities run by DDSP in Pursat. Not only did these toys bring an enormous amount of pleasure to the children they will also be useful in helping the children develop a variety of motor skills.



Sadly our time in Cambodia came to end but hopefully there will be an opportunity to return next year.

Carmel Holmes

THE TIME WAS ALL TOO SHORT....

It has been a pleasure to be involved with the Jesuit Services in February 2006. Unfortunately the time spent in Cambodia was all too short. The hospitality of JS and the gratitude of the Cambodian people we treated made this a memorable event for us. Having been in Cambodia in 1980, it was satisfying to see the country has become a vital and vibrant country again not without its problems of course, as it re-emerges from the disasters of the past.

The baby boomer population was very evident. The down side of the visit was to see the results of poor oral hygiene, high sugar diet and general poor nutrition. Dental caries and periodontal disease are rampant. It was sad to be able to treat only a very small tip of a deep iceberg [if such a thing could exist in the heat of Cambodia] and to disappoint many who waited for treatment,



but we needed to move on.

We were only able to provide extractions and calculus removal and the odd surgical procedure like relieving a tongue-tie by dissecting the lingual frenum. Some attempts were made to provide temporary fillings but abandoned early in the visit when one realised the enormity of the carious lesions presented by the patients.



The teeth extracted were limited to ones that the patient complained about. There were many others in the same mouth deserving extraction but limited by time.

Although toothbrushes were distributed in the first days of the visit, I really believe it is not worth the exercise without some education of oral hygiene. A toothbrush can be a source of infection if not kept in a clean place etc. It is an expense that few would be able to afford to replace even if motivated. Use of local materials to make a chewing brush from wood as from the neem tree, is a better option.

I spoke to some local dentists who seemed to be under employed as they sat in their own waiting room waiting for customers. They appeared interested in helping in the villages especially if given some monetary support.



Just for the record, we saw over 200 patients and performed at least 300 extractions in the 6 clinics that were held in the various locations.

Wayne and Robyn Martin

EVERYWHERE THERE WERE BASIC NEEDS....

We've done it before. We have stepped out of a busy suburban general practice with all its modern drugs and diagnostic capabilities and stepped into a situation of need in another country where medical care is not so well developed.

So a short excursion to Cambodia in February with *Standing Tall* was eagerly anticipated. The groundwork locally was done by the dedicated and efficient team at Jesuit Services, our Cambodian hosts.



Our first stop was Banteay Prieb where the team assessed



many of the new students. Although they were all physically disabled in some way they were delightful young people; all being given the opportunity to learn a vocation that would provide financial security.

The students were generally without significant health problems. Not so with the local villagers. Some had serious chronic complaints that needed follow on medical investigation and treatment.

This seemed to be the pattern as we progressed on to visit Bishop Kike at the Arupe Centre in Battambang, the school in Poipet near Sisophon, and the school in Banteay Meanchey. The students had minor problems compared to some of the local villagers who were unable to access medical care.



The size of the tragedy brought on by landmines is hard to grasp. With an average of 3 new victims a day for an indefinite number of years into the future, the demands on medical care and rehabilitation services will grow.

Safe drinking water at the twist of a tap knob is the norm in our country, as is a roof over our heads and four walls to protect us from the elements. In Cambodia, neither is a surety.

Our fundraising beforehand enabled us to



purchase 80 water filters that would provide 80 families with safe drinking water. Thanks to all those who donated for that. The families thank you too! By the

end of May they had all been distributed. Funds were also available to build a new house for a family whose 3 sons all have a degenerative disease that leaves their limbs useless from gangrenous amputation, muscle wasting and joint dislocation. Still other families were sponsored so they would be able to feed themselves enough rice for a year.



Everywhere we turned there were people with basic needs, needs that are ongoing and needs that can often be supplied with a little help from many people.

The dedicated team is doing a superb job under the guidance of Sister Denise.

We look forward to being able to assist again in some small way. Maybe you would like to help next time?

Geoff and Carolyn Catton

THE REAL TOY STORY

It must be quite easy to know how to respond to the overwhelming needs of developing countries if you are a medico, engineer, agronomist, or dentist, but when your trade is public policy research it is not so easy to see how you best fit. That was my dilemma which I had never fully resolved until I learnt that Disability Development Services Pursat (DDSP) needed toys for their playgroups for kids with disabilities. As a mum of a young lad I figured collecting toys was one thing I could do. Shortly after Christmas 2005 I sent brightly coloured flyers to every family I knew with preschool aged children. I asked for wooden educational toys, puzzles and jigsaws that would enable the children to develop fine psycho-motor skills.



People's generosity was astounding. The response was overwhelming. Over January our living room gradually took on the appearance of a toy warehouse. Some friends, with no children, went and purchased school supplies such as crayons, chalk, and large sheets of paper. The word quickly spread and toys were coming from people I didn't even know so keen were they to help. Our young nine year old son took on the task of being "official" toy tester and checked that all were safe and in good condition. No junk was allowed.

The most heart-rending contribution came from a Singaporean-born mother whose young, profoundly disabled son had died 18 months ago. Up until this point she had been unable to part with his toys and equipment. Something about the project touched her: possibly its Asian connection and the needs of other disabled children. She courageously collected up many of her son's toys and specialized equipment and asked that we take it back to Asia. I did so with tears in my eyes. It was such a big step for her.



To their credit many parents took the opportunity to teach and reinforce to their children values such as sharing and caring for those with less. All the children had enjoyed a fabulous Christmas, receiving more toys than they knew what to do with. This was an excellent chance to remind them of their responsibility to others, even those their own age.

Singapore Airlines had graciously agreed to a 20 kilo excess baggage allowance for the Sydney based physiotherapist who was part of the team. This was a great idea until we realized we had well over that amount and were closer to 50 kilos. The only solution was for me to go to Cambodia with the team and take the remaining 30 kilos myself. I jumped at the chance!



Packing 50 kilos of blocks, puzzles and trucks is surprisingly tricky! We ended up with three enormous suitcases and a huge box containing amongst other things, a little tri-cycle. What a

relief to see everything roll onto the luggage conveyor belts at Phnom Penh airport!

It was such a delight to hand the "loot" over to Steve Harknett and his team at DDSP's children's program. What surprised me was the way the kids took to the toys. Even though they had never before seen the sort of material we gave them they immediately knew what to do with everything. It was like the proverbial duck to water. Their smiles and excitement were a wonderful thank you.



Within days of returning home people were giving me toys again. There has to be a next time!

Jenny Smith

SUPPORTING THE CHILDREN OF LANDMINE SURVIVORS IN NICARAGUA

We are pleased to be able to support the work of the Planting Hope Education Fund in Nicaragua. Following is an extract from their latest newsletter.



The Planting Hope Education Fund is currently supported by donations from North American citizens and Standing Tall Australia. "The program provides school uniforms, shoes, school materials, school bags, entry costs, counseling and mentoring support for parents and youth and opportunities for youth to participate in

community development activities," says Ada Isabel Diaz, the Nicaraguan Planting Hope Education Fund coordinator. The "goal of the Education Fund is to ensure that youth, who would otherwise not have an opportunity to study, complete primary and secondary school and increase their ability to find employment to support themselves and their families; this ability to support their families is particularly important for the children of landmine survivors."

In 2005, the Planting Hope Education Fund received financial support from Standing Tall Australia, an organization with the goal to promote and protect the rights of communities and individuals affected by conflict. The support from Standing Tall is directed towards the children of landmine survivors and other victims of war. The photograph



to the left is of Don Modesto, the father of a sponsored student. Don Modesto lost both his legs when he stepped on a landmine during the civil conflict in Nicaragua. While Don Modesto still works his farm harvesting corn and beans and his wife sells tortillas from their home - support from Standing Tall allows this family to send their 11 year old son, Jocson Israel Lopez Ruiz, to school. The Planting Hope Education Fund is supporting 12 children of landmine survivors in 2006.

Peter Sundberg

NEWS IN BRIEF

Release of new report

In Geneva, in May 2006, *Standing Tall Australia* and Handicap International released the report "Landmine Victim Assistance in 2005: Overview of the Situation in 24 States Parties." This is the 2nd annual report in a series to monitor progress in the implementation of the *Nairobi Action Plan* through to 2009 and presents information on States Parties to the Mine Ban Treaty reporting the responsibility for hundreds or thousands of landmine survivors - Afghanistan, Albania, Angola, Bosnia and Herzegovina, Burundi, Cambodia, Chad, Colombia, Democratic Republic of the Congo, Croatia, El Salvador, Eritrea, Ethiopia, Guinea-Bissau, Mozambique, Nicaragua, Perú, Senegal, Serbia and Montenegro, Sudan, Tajikistan, Thailand, Uganda and

LANDMINE VICTIM ASSISTANCE IN 2005:

OVERVIEW OF THE SITUATION IN 24 STATES PARTIES



Yemen. Special thanks to Sally Campbell-Thorpe and Loren Persi for all their hard work in producing the report. AusAID provided the funding for the production, printing and distribution. An online version is available at www.standingtallastralia.org - a limited number of printed copies are also available on request.

Assisting Mine Survivors in Afghanistan

Standing Tall provided US\$150 to the Afghan Disabled Union (ADU) in Kabul to make their office accessible to its members. The funds were used to build a ramp and a specially constructed toilet. ADU supports its members through advocacy and awareness-raising on the rights and needs of people with disabilities, and a small micro-credit program for income generating activities.



Update on Sponsorships/Grants in Cambodia

- Members and friends are now sponsoring 7 more families as part of the Cambodian Family Support program - US\$100 per family per annum - further details will be provided in the next newsletter.
- 2 Kralang families received their sponsorships in advance to allow them to buy land so they could plant rice and become self-sufficient by selling the rice, and providing their own needs.



- 80 ceramic water filters were given to families in mine-affected communities through the fund-raising activities of Quota, Dr Pat Knight, and the Nundah Family Medical Practice.

- Transport was provided for 3 sick children to obtain medical care at the children's hospital in Siem Reap.
- Pok Pun, introduced in the last newsletter, now has a roof on her house in time for the wet season, and the money to build a latrine.
- Loem Hoy, also introduced in the last newsletter, was given a grant to buy fruit trees to provide an income for her family.



- Standing Tall* also provided funds for the supply of all the medications needed for the visit in Cambodia.