SCHOOL FEE SUBSIDIES

After nine years, we enter the next phase of the secondary school fees subsidy and scholarship programme in the Maskelynes.

COMMUNITY HEALTH OUTREACHES

The health outreach programme in South Malekula expands to involve more villages and schools, incorporating additional activities in both clinical health and health promotion.

HEALTH PROMOTING SCHOOLS

Malampa becomes the second province in the country to endorse the Health Promoting Schools Programme.

AMBAE HEALTH

Two years on, Markson Tabi reflects on the achievements and challenges after the eruption, evacuation and return of villagers to Lolovoli, St Barnabas and Lolomanada.



THE BUTTERFLY TRUST IN VANUATU - 2019



Cover picture — Presenters at a community health event in Farun, South Malekula in July 2019. From left to right — Ines Alwyn (ENT nurse), Helen Mahit (nurse aid), Hellen Warele (eye care worker), Annie Bong (eye nurse) and Grennethy Tavunwo (Malampa Health Promotion Officer).



traditional customs and rituals are still widely practised.

Consequently, because this strong sense of cultural identity exists, it has been relatively straightforward for the Butterfly Trust (BT) to be increasingly guided by Ni-Van in the design and implementation of its programmes. Indeed, this has been a goal of the Trust since its early days working in Vanuatu.

A prime example of Ni-Van taking matters into their own hands is the School Fee Scholarship and Subsidy Scheme which BT established in the Maskelyne Islands in 2011.

The islanders have now taken over the scheme and are in the process of discussing among themselves the focus they want for it.

They intend to fund the scheme themselves, with the Trust offering to top it up in its initial years. So, the focus of the scheme may shift to scholarships for tertiary students, or infrastructure support for the local kindergartens, schools and boarding school scholarships for secondary school students who leave the island to study. Whatever the outcome of their discussions, the end result will be Ni-Van designed, Ni-Van operated, and Ni-Van controlled. (At a national level, the Vanuatu government has also promised to extend its school fees assistance to Year 13, and in some cases, Year 14 students.)

The Trust's health programmes are also being integrated into the local health infrastructure. The Trust is working closely with the Ministry of Health, from the national to the local level, to integrate BT's work on community health education into a national programme educating school pupils and teachers about good

hygiene practices, good nutrition and basic wound care.

The dental clinic at Lamap, which BT established a number of years ago, is also now in the second year of a planned, long-term, transition to the Ministry of Health.

The palliative care initiative continues to, slowly, work its way through the corridors of medical power in Port Vila.

At a more philosophical level, BT has also been engaging with local communities to discuss their visions for the future, the meaning of independence, whether or not those communities envisage an ongoing role for the Trust, and if so, what they think that role should be.

So, although it is easy to despair sometimes at the outsized impact foreign intervention has on local life in Vanuatu, we do see encouraging signs of a Ni-Van willingness to assume control of their country's future, to assert their unique identity, and to preserve their unique culture. While this occurs, BT is quite content to take a supporting role, to be called into action only if and when required by local communities, and to observe the process of cultural assertion unfolding.



Militarily powerful and materially wealthy countries are well known in the Pacific for advancing their own interests, often at the expense of the region's small island nations. Some countries are more subtle than others in the way they do this, but the end result is usually the same ie. the creation of some degree of financial, military, social or cultural dependence on the more powerful partner. There are, correspondingly, some benefits for the receiving country and the question is whether in any particular case the benefits outweigh the disadvantages. Vanuatu is immune to this geo-political reality.

Despite the foreign influence on its affairs, however, Vanuatu does manage to maintain a relatively healthy sense of its own identity. There is local debate, in some quarters, about what it actually means to be independent, and whether Vanuatu really achieved has independence since the British and French withdrew their colonial regimes in 1980. Local languages (there are approximately 150 of them) are, for the most part, still everyday speech in their respective areas, and



"There has been improvement and achievement after these years. I am a parent with three children sponsored by BT. The first boy is now on a government (tertiary) scholarship and two daughters, one who is on a course in USP (University of South Pacific) in the Port Vila campus. The second daughter is in Year 11 in Rensarie College. There are also others from the Maskelyne who have received government scholarships. Some have chosen to work in the private sector and more are employed in government departments."

There are four villages, including Avock, that make up the Maskelynes. From 2012 to 2019, through the benevolence of BT supporters, girls and boys from these villages received fee subsidies and scholarships to further their secondary education. Ten years ago, government school grants extended only to the end of primary school. Beyond that, parents, the vast majority of whom eke out a subsistence living from copra, kava, fishing and market gardening, would somehow find NZ\$1000 - 1500 annually per child so their sons and daughters could receive a secondary education. Many families struggled to fund the four years of secondary school, particularly when unexpected events occurred, for instance, a family member falling ill. Some students could lean on older siblings who may have secured jobs in the townships of Vila or Luganville. Many students, however, dropped out without completing school.

Many of you responded to BT's "Help Give a Village a Future" programme to enable more girls and boys from the Maskelynes to continue onto secondary school. Thank you for making a difference. It was not a perfect scheme in that BT could sustain a maximum of 33 – 40% of the total cost of fees at the most – the rest was up to each family. Sourcing the balance remained a formidable challenge, particularly as fees progressively increased at senior secondary levels. Funding tertiary students and vocational courses was also out of reach.

As the years progressed, income sources in the Maskelynes gradually diversified. More young men applied for the RSE seasonal worker programmes in New Zealand and Australia. Greater numbers of 'adventure seekers' came to experience the remote islands. The Maskelynes now have a small number of family-run tour operators, each offering canoe and dugong tours, cultural shows and rustic bungalow accommodation. Visitor numbers to the Maskelynes have noticeably increased over the last five years, directly and

Butterfly Trust subsidies helped these high fliers



Peter Kamsel

Peter is in the third year of a degree in Environmental Science at Fiji National University.



Minah William

Minah received a BT subsidy towards her nursing school fees. She is the nurse in charge at the Maskelynes' Dispensary.





Lindong Amet (left), Marienna Nombong (right) and Isobel Obediah (not pictured)

Lindong, Marienna and Isobel received Vanuatu government tertiary scholarships to study at the University of the South Pacific's (USP) campus in Port Vila.

Watick Nagof and Alan Peter have been accepted to the Police Training College in Port Vila.

indirectly benefitting the 'basket blong komuniti' (communal purse strings).

Sangalai School on Uliveo, the main island of the Maskelynes, has also developed into a junior secondary school, reducing the accommodation and travel costs for students who would otherwise have no option but to attend schools on the mainland. Another significant step is in the Ministry of Education's (MOET) recent announcement that it is committed to extending its grant scheme to include Years 13 and 14.

The next chapter

"Autonomy" and "self-determination" have been regular discussion topics with BT's support team in the Maskelynes. At the beginning of last year, the Maskelynes' committee and BT agreed to put a hold on scholarship applications in 2020 while an alternative, wholly community-driven strategy could be formulated.

In November 2019, the Paramount Chief, village chiefs, church elders and women's representatives from the four villages – Peskarus, Pellongk, Lutes and Avock – prepared a survey, with the help of BT. The aim of the survey is to find out exactly how, and if, this community wishes to manage its own education trust, how it will be funded, what its educational goals and priorities are, and how they wish to define education in the broader cultural context.

In late January 2020, the door-to-door survey was conducted. Later this year, the results will be publicly presented. Further community consultations and storian (discussions) are expected as the transition into local stewardship unfolds. Both primary and secondary school councils will be consulted.

BT will continue supporting this programme as it moves into the next phase. In the immediate future, this entails administrative support, project development advice, and mentoring. BT is not discounting further financial support in the future as it looks to local leadership for direction.



Community representatives from all four villages in the Maskelynes met in Pellongk to prepare the education survey.



"We want to thank BT long (for) the great opportunity to begin to change the islanders' mentality to start to put education as a priority. Thank you NZ (and other)



donors and fundraisers to support our children, blo givim sapot (for supporting) our children from this small island. In one way or another, without your help we cannot be serious in education and upgrade education in our province. We hope more of our children will work in government departments, maybe some will take on high leadership positions in the future in our country. Sipa hambat (thank you very much)."

Obed Kamsel Chairman of Maskelynes – BT Committee

Deepening the network of local partnerships in health

BT continues its association with the Maskelynes Dispensary, the four villages and local schools, to improve access to basic health services and health education for adults and children. This includes dental screenings and treatment, eye checks, ENT screenings and public health awareness on a variety of topics such as infectious disease prevention, nutrition, NCDs (non-communicable diseases) screenings and awareness, hygiene and sanitation. These activities are carried out in partnership with national and provincial health teams as well as visiting volunteers from overseas, in particular dental practitioners.

Over the last three years, these outreaches have become more



integrated and holistic, with growing input from local health workers and education officers. This is in line with BT's long term, sustainable development plans to strengthen local capacity incrementally. The ideal outcome in a few years' time is for rural and remote island outreaches to be organised locally through the provincial base, while visiting health practitioners and BT provide technical support as required.

In 2019, Maskelynes' nurse, Minah William, and nurse aid, Angela Kali, helped to coordinate patient visits to Lamap Health Centre during the annual South Malekula outreach. Patients requiring dental treatment, eye and ENT checks were screened, treated or referred on as necessary. Through a coordinated system linking the hierarchy of health facilities, from aid posts and dispensaries to provincial and main hospitals, it is hoped that these outreaches will continue to provide improved access to rural communities.

This year, two outreaches are being scheduled to take place in July and September 2020, one of which will involve a return to the Maskelynes, with patients being seen at the Maskelynes' Dispensary.

In 2019, Angela Kali also joined the outreach team visiting neighbouring communities in South Malekula, assisting with the Dental and Oral Health Education component. This was designed to coincide with a refresher training opportunity in oral health promotion, delivered by Port Vila based dental hygienist, Lillyrose Dan. Following practice runs at Aulua Central School, Kamai Primary and Sanesup Primary, Angela went across to Namaru Primary School on Avock to reinforce toothbrushing and oral hygiene skills.

Angela, nurse aid from the Maskeynes' Dispensary presenting lessons in oral hygiene and toothbrushing at Aulua Central School (above), Sanesup Primary School and Namaru Primary School (below).



Max Albert Founder of IKKANA Cancer Foundation

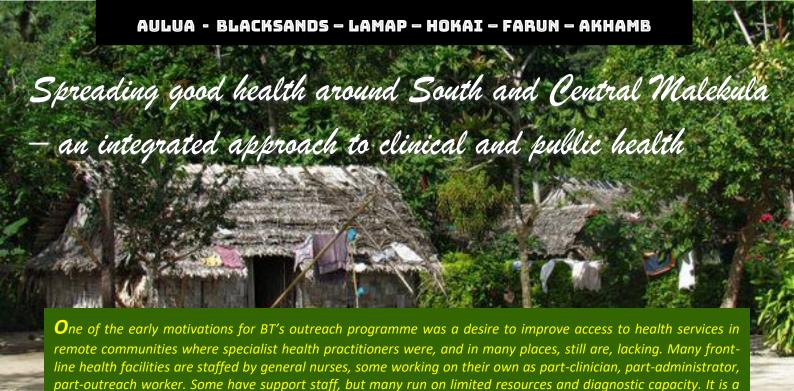


Ikkana, our newest local partner

In early January this year, **Max Albert**, from Northwest Malekula, the founder of Ikkana Cancer Foundation, spent four days in the Maskelynes talking to women and girls about the risks and prevention of cervical cancer, visiting each village in turn. This was part of a series of Malekula events in collaboration with BT's integrated health activities.

In the next section of this newsletter, Max shares the story of his motivation behind the Ikkana Foundation, the committee of which includes a senior obstetrician from Vila Central Hospital and locally registered nurses and midwives. Since 2017, Max's team has tirelessly coordinated awareness on Ambrym and North Malekula, partnering with Ministry of Health officers on-site. Introductory talks are followed up with cervical cancer screening, usually within three months.

Ikkana in the Maskelynes



tough role, at times overwhelming and demoralising. Understaffed facilities, relatively few opportunities to upskill, geographical and weather challenges, poor transport options and weaknesses in the referral system, are other

While there are demonstrable benefits, there are also disadvantages to outreach programmes where the presence of health specialists for relatively short, intense bursts, improves the access and quality of care for the short-term only. A long-term solution requires widespread commitment and collaboration between national, provincial and external partners, ideally within an existing health framework, with provision for the ongoing mobilisation of local specialists.

complications that must be overcome.

As external providers of health support, we have to guard against disempowering local, front-line health facilities and eroding community support and confidence in their own health system. The last ten years has seen a diverse range of international and local groups delivering health services to remote communities across the country. There is definitely strength in numbers, and efforts to improve coordination and communication for maximum reach are improving, thanks in large part to lessons learnt during the Tropical Cyclone Pam Emergency and Recovery operations in 2015.

BT has focused its health support on Malekula. Over the years, work has extended to different communities on the island. Repeat visits are conducted to maintain consistency. Increasingly, we are encouraging the local health centre base to take part in planning and strategy.

Aulua and Blacksands

Kindergarten to Year 6 students from Sanesup and Kamai Schools received follow-up dental education and treatment in 2019, continuing on from similar activities conducted the previous year. Oral health and hygiene instructions, including toothbrushing practice, were re-emphasised, class by class. This time, eye and ear checks were incorporated into the repertoire.

For the first time, students from Aulua Central School (Years 1-8), as well as three community kindergartens, received dental, eye and ENT screenings during a joint Ministry of Health (MOH)-BT facilitated outreach. The team was composed primarily of local health practitioners from Vila Central Hospital (VCH), Norsup Provincial Hospital, MOH's Integrated Dental/Eye/ENT Unit and the Maskelynes' Dispensary. A volunteer nurse from France joined the team, providing clinical assistance and administrative back-up.

VCH Eye Clinic Nurse, Annie Bong and ENT Nurse, Phillippe Essau presented basic eye and ear care advice and community screenings. As well as improving access to easily treatable illnesses, these outreaches can lead to early detection and referral of potentially serious conditions. From a sustainable development standpoint, strengthening the referral process and helping to improve the communication between rural health facilities and hospitals, as well as increasing the level of understanding of health matters at grassroots level, is vital.



CENTRE NUMBER

Following from successful assignments around Northwest Malekula, Max Albert, founder of Ikkana Cancer Foundation joined BT in Lamap and Aulua to promote awareness of cervical cancer in several village communities, targeting both women and men. In Aulua, Max's engaging style captivated audiences during a series of talks and questionand-answer sessions at Vartavo, Asherok, Burbar and Lanvitvit. He was supported by Jeremy, registered nurse from Lamap Health Centre. Ikkana is in the process of organising cervical cancer screening to include women in Aulua communities in 2020, part two of a three-stage process.

Lamap

Ikkana's reach extended to all five sectors in Lamap. The Women's Committee, led by Carmeline and Agnes Barius, mobilised participants to each presentation while BT provided the funds, resources and coordination. Subsequently, Lamap Health Centre staff, Max's clinical and support team, and the Women's Committee, jointly organised a week-long cervical cancer screening operation. Max returned to South Malekula in late December 2019 to follow through with the screening results as well as to present another round of awareness talks in the Maskelynes.

Also in Lamap, St Pierre Chanel Primary School (Kindergarten to Year 6) and College de Lamap (Years 7 - 10) were hubs of dental, eye and ENT activities in June. While dental screenings, treatment and oral health education have been a familiar component of similar visits in previous years, the inclusion of eye and ENT nurses for the first time has been a valuable addition to the programme. Dr Kalbule Willie, resident doctor at Lamap Health Centre (and aspiring eye specialist), provided back-up, due to last-minute staffing changes. Tooth extractions and fillings were carried out at the dental clinic at the health centre.

Max Albert is a singer by profession. Observing his mother's struggles (and eventual death) from breast cancer motivated Max to explore what he could do to help as many women as possible overcome cancer. Max became aware of some work in cervical cancer that began in Vanuatu around five years ago. With his skills in performance music, Max realized that his strength lay in his flair for public speaking. In 2017, with the assistance of health personnel, he began coordinating awareness sessions and screenings in North West Malekula, and North, North East and West Ambrym. Cultural taboos and misinformation are issues which he tackles during community awareness presentations. Max helps establish committees of Ikkana in each community he reaches. Women and men elect their committees and each member donates Vt1,000 per year to the self-funding body. The funds are used to cover the costs of subsequent screenings and available treatment for cervical abnormalities. Max funds the initial awareness and screenings from the proceeds of his musical performances. He works with Ministry of Health nurses and an obstetrician. Screenings and LLETZ treatment take place at Norsup Hospital on Malekula and also on Ambrym. Unfortunately, there is minimal treatment for cancer in Vanuatu and this programme is all about prevention.

Max says "We cannot wait on the government but have to do something ourselves first and then the government can step in as and where necessary which means working hand in hand to ensure all mothers in the country receive timely information about cancer, receive screening if necessary and get early treatment."



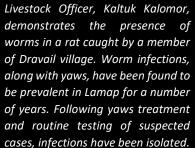


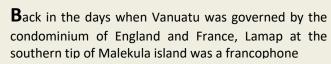
Dentist and Head of the Integrated Dental/Eye/ENT Unit, Dr Jenny Stephens (left), examines a child at Aulua Central School. Dental hygienist, Lilly Dan (right), has a flair for teaching. She combined both teaching and dentistry during oral health awareness at Aulua and Lamap schools and kindergartens. Lilly also supervised Malekula health workers, Pascal Wilson and Angela Kali, as they improved their skills.

The tripartite combination of dental, eye and ENT school screenings is a relatively recent development of the Health Promotion Unit of the MOH. This model is being adopted by the Health Promoting Schools Programme to highlight partnerships between health and education sectors, public health and clinical. Apart from targeting the young, it is hoped that, over time, positive health messages in schools will infiltrate and augment community health efforts as relationships between schools, parents and the community become better established in the rural communities.









administrative centre. French bureaucrats divided the area into five sectors, erecting a 'mini-hopital' on a slight rise, roughly in the middle of the centre, next to the district jail.

The 'kalabus' (bislama for jail) has long since been abandoned but the mini-hopital is now a health centre under the current system. Lamap Health Centre is the referral base for the region, with the nearest provincial hospital at least five hours by truck on an unsealed four-wheel drive track.

The health centre has been a long-standing partner, beginning its association with BT through visiting medical and dental volunteers, developing a basic, in-house dental clinic, and school and community health outreaches.

> of manpower, these community services. Transitioning

NTD Focal Point for Malampa province, Salome Kenneth*, presents the NTD/WASH hygiene activity to St Pierre Chanel Primary school teachers. This practical activity, targeting personal hygiene, has been designed by the NTD Unit for primary school children.

*Salome Kenneth has since been promoted to the position of Malampa Provincial Health Manager.







Maintaining essential but basic dental equipment within the health centre has improved access to pain relief, extractions and restorative care considerably, although there is a little way to go for these services to be self-sustaining. The challenges include a maintaining consistency of standards and results, logistical issues and expense. So far, there is the local will and commitment to maintain

them into complete local ownership will require an ongoing consultative process.

Apart from dental work, there has also been an ongoing association with the Neglected Tropical Diseases (NTD) unit. In 2019, the NTD unit and the Department of Livestock engaged all five sectors with live demonstrations of how animals can spread diseases to humans. Livestock officers gave lively presentations in each sector, which included animal dissection, to illustrate the presence of parasites. BT organised these activities to coincide with the other health events taking place at the same time.

Hokai, Farun and Akhamb

The previous dental outreach to this region of South Malekula took place in 2017, when a mixed team of New Zealand volunteers and local health practitioners was hosted by the villages and dispensary on Akhamb Island.

Vanruru Primary, Kalwai Primary, Luwoi Primary, South Malekula

Junior Secondary and associated kindergartens were targeted for dental, eye, and ENT screenings, and BMI checks, as part of the Health Promoting Schools (HPS) Programme. The daily toothbrushing programme implemented by the Head Teacher of Luwoi Primary since the previous visit has shown encouraging results so far. According to the dental therapists, there appears to be an observable decrease in caries in most primary classes. Under the HPS Programme, simple but essential activities around handwashing, toothbrushing and promoting local food are being encouraged.



In 2019, it was Hokai's turn. Testing the newly opened four-wheel drive track between Lamap and Hokai was a bit of an adventure for some in more ways than one. Previously the journey would have involved a long, sometimes arduous and dangerous, small boat ride.

An expanded clinical and health promotions team took part in this outreach. It included New Zealand and ni-Van dental practitioners, a French nurse, eye and ENT nurses, the Malampa Health Promotions Officer, nurse aids from Lamap Health Centre and Norsup Hospital, a Santo based eyeworker from PCV (Presbyterian Church Vanuatu), and a Japanese, long-term volunteer based with the MOET in Port Vila. Hokai Community Aid Post worker, Elder Jenery Matthews, provided local coordination and organised a base for dental treatment, eye and ENT screenings.

Activities included community and school awareness presentations on general hygiene and oral health, nutrition and NCDs, and student BMI checks. A rotation of dental, eye and ENT screenings was also conducted at several schools and kindergartens at Hokai, Farun and Akhamb. Adult eye and ENT screenings, and a series of community presentations on a range of health education topics, were organised for each community in turn.

Long-time partner and friend, Agnes Barius from Lamap (right), gave first-class logistics support to the team this year. Agnes runs the Lamap Oceanview Guesthouse, manages a local truck business, runs a shop, is a senior member of the Lamap Women's Committee, Secretary of the South Malekula Tourism Association, and a fine cook and role model. Agnes worked tirelessly in the engine room, oiling the cogs and wheels, dealing with breakdowns and inevitable misunderstandings in ways only those with an innate understanding of local life can.

Hokai community endowed the team with prime hospitality. Fine accommodation, a colourful array of local dishes, and regular boat transport to Farun and Akhamb, greatly enhanced the overall experience and improved the flow of activities daily.

With a scarcity of dental professionals in Vanuatu, access to basic dental services in the rural areas is often compromised. Ensuring optimum reach for community visits requires the assistance of experienced dental volunteers.

BT celebrates these volunteers who have worked hard to support local health workers as they bridge the gaps and meet the challenges. Special thanks to Port Vila based kiwi volunteer, **Cherie Thomas**, who helped with administration and logistics, and for hosting our visiting volunteers from New Zealand.



me to the Mongolian steppes and then I walked the foothills of the Himalayas. In Nepal, a humanitarian mission allowed me to live a few months in a village. I then travelled six months in Southeast Asia, trying to spend as much time as possible in the villages in order to live with the locals. I learned to find bamboo and ferns (basic food in Laos) and to work in the Cambodian rice fields. Being passionate about climbing, and with a working holiday visa in my pocket, I then worked and climbed in New Zealand for nine months. From there I sailed by yacht from Opua and arrived in Vanuatu. Thanks to my skipper, Frank Conway (a supporter of the Butterfly Trust), I met Dave and Lynn, who gave me the opportunity to of participate one their in programmes in the southeast of Malekula. It was a very rewarding experience which exceeded my expectations.

Working with locals is a great way to connect with them and learn more about their culture and way of life. In addition, I love my nursing work and I felt the need to be useful again. Having already done humanitarian work in Africa, I knew that it is not easy to achieve results in a short time, despite the best will in the world. Indeed, short-term projects are generally difficult to implement and are not always well-adapted to the field.

So I was very fortunate to meet Dave and Lynn. In addition, it was reassuring to know that the Butterfly Trust had been in Vanuatu for more than nine years. Dave and Lynn often question their many projects and look self-critically at their actions.

This, in my opinion, is essential to the smooth running of a charitable organisation over the long term. Dave and Lynn also really helped me to understand the Ni-Vanuatu culture and way of working so that I could work as effectively as possible in the short time I had available.

The goal of the programme on which I worked was to do screening and prevention of ENT conditions (ear, nose and throat), dental and ophthalmology in the remote villages of southeast Malekula. The team I worked with went to schools and clinics where adults and children were treated (dental extraction, otitis treatment, perforation and vision tests).



Other parts of the programme included a local charity that educated women about cervical cancer, and representatives of the Vanuatu Ministry of Agriculture who advised the Lamap community about the impact of various diseases on livestock. The programme ran for one month and involved a wide range of stakeholders.

It was essential to be well organised but this was not always easy to achieve. Indeed, in Vanuatu, the unforeseen is common and sometimes funny. For example, at one stage, for a number of days, planes could not land at the local Lamap airport because the grass on the airstrip had not been cut.

In this region travel is difficult, making access to care complicated. Serious health problems requiring hospitalisation, or even a specialised

consultation, generate significant costs. This is especially so in a place where families live a mostly subsistence lifestyle, relying on their fisheries and gardens for food, and where monetary income is scarce. Health dispensaries are precarious. A nurse working alone is often faced with difficult problems which can exceed his or her training.

We were eagerly awaited in the schools and wider communities where the welcomes were very warm, filled with speeches of thanks and gifts of flowers and meals. The team consisted almost exclusively of Ni-Vanuatu, specialist health workers. It was great to work with them as the atmosphere was always upbeat, even when it rained on all our equipment. It was really great to see the team performing in such a positive way despite all the unforeseen events we encountered. During the last ten days, four New Zealand dental health workers joined us to finish off the programme in Okai, Farun, Akhamb and Lamap.

I think it is important to value local skills. The primary objective of the programme was to make the villagers autonomous and independent from foreign humanitarian organisations. This can be difficult as it is necessary to hand over everything so that the programme can be repeated each year by the locals. I discovered that

the Butterfly Trust is truly making this happen, working in collaboration with key and motivated local agents, and in partnership with the Vanuatu Ministry of Health and Ministry of Education.

As an expatriate resident, on the island for two years, told me: 'what drags you here, drives you crazy after a while'. It is true that the easy, relaxed lifestyle of the Ni-Vanuatu can be an obstacle to implementing some projects aimed at reaching out to people who have difficulty in accessing healthcare. However, it is encouraging to see that some things are working and moving in the right direction.

Personally, all this experience has taught me a lot. Working with, and being immersed with the locals, allowed me to learn Bislama. By sharing their days I also learned a lot about their way of life. I helped them bring back produce from their gardens, catch fish from their canoes, cook on open fires, 'spel' (rest) and 'tok tok storian' (tell stories). What a lesson in life! It challenges our concepts of materialism and how we define happiness.

I became friends with some of the locals, including Hélène, a nurse aid, who later offered me the chance to help out at the Lamap Health Centre. So I stayed at Lamap for another month after the end of the Butterfly Trust programme. This allowed me to learn more about the organisation of the health centre, the most common pathologies, and the importance of the local health workers who know each family and their history. Every day had its share of discoveries, whether at the clinic or in life in general. I learned more about the local culture, the chiefly system, ceremonies, custom garden cultivation, cooking, and basket weaving. It was also the first time since the beginning of my trip that I was able to express myself in the local language. This made the interactions all the richer!

These magical moments of sharing will remain engraved in my memory and in my heart for ever.

The Butterfly Trust works in Vanuatu to improve the quality of health and education. We collaborate with local communities in different sectors so ni-Vanuatumen and women are empowered to shape their own futures.

Please DONATE and join in our efforts.

Bank details: Butterfly Trust Donations Account

Account number: 12-3233-0464934-50

OR donate through www.givealittle.co.nz/org/butterflytrust

Registered Charity CC38025



Nurturing relationships with national and provincial-level government departments, as well as other agencies, is a necessary part of our work. This can sometimes reduce the amount of time we have to spend on community engagement at grassroots level. In practical terms, there are more meetings and workshops to attend, more reports to compile, more in-depth organising, and more administrative work. By operating in an integrated fashion, however, we are better able to appreciate systemic and cultural nuances, refine our roles as enablers or catalysts, avoid duplication, and help strengthen communication between stakeholders. In other words, branching out creates meaningful connections and insights, and ultimately brings us back to where it all started - in the playground of the local kindergarten, or the maternity room of a dispensary, or in support of a terminally ill patient.

In both education and health, BT has begun working with

the provincial teams at Norsup in Central Malekula, particularly around the revival of the **Health Promoting Schools Programme** (HPS), teacher training and skills development, and the consolidation of clinical and public health projects in rural communities.

Throughout 2018 and 2019, BT partnered with School Improvement Officers at the Malampa Education

Office to reinstate the HPS programme, facilitated dialogue between the health and education sectors, and advocated with the MOET and MOH in Port Vila. This resulted in further consultations, an introductory workshop held in Norsup, health activities in five primary schools, and finally, the official re-launching of the HPS programme in October 2019. It is hoped that boosting the structural framework surrounding school health will result in improved standards and consistency of health education. BT is also working with the Malampa HPS committee on a plan to engage with schools and kindergartens in South Malekula so that health objectives

HEALTH PROMOTING SCHOOLS workshop for School Improvement Officers in Malampa Province and teachers from five primary schools at Norsup, Lakatoro, Uripiv, Tautu and Lingarak.

can be implemented within a more supportive environment in the future. This is another step towards local ownership.

The BT hopes that, in the coming years, ownership of all health outreach activities will be vested in the hands of the provincial health team.

The Health Promoting Schools (HPS) programme is not a new initiative, having been endorsed by both MOET and MOH in the early 2000s. The programme suffered some setbacks and did not develop fully. In recent years, there has been a surge of action, particularly in Shefa Province. BMI checks and nutrition are the main focus in the urban settlements, while in Malampa Province, a combination of hygiene and BMI activities are being prioritised.



Karen Simon and Kumi Kobayashi (left)

co-presenting at a workshop.



This year, there will be a review of the BT's medical volunteer support programme at Norsup Hospital with the new Malampa Provincial Health team and hospital clinicians. As the numbers of ni-Vanuatu doctors increase, the objectives of the project have also evolved. Increasingly, there have been requests for experience in certain specialisations, which may see the project develop to become more focused on in-service training. Support with management and administrative skills has also been raised previously and will be further explored.

We took an involuntary hiatus from a Training-of-Trainer 'Teaching Skills Development' workshop with School Improvement Officers after numerous changes to the schedule. There were a number of competing workshops involving the same participants. After the third postponement, it was decided to delay further sessions until 2020. This will allow for more opportunity to review participant preferences and priorities.

The **Palliative Care** project is rumbling away in the background. There were some developments in the third quarter of 2019, then a slowdown. We will resume and persevere in 2020.



Ambae community health set to continue in 2020-21

Ambae Island, together with the islands of Pentecost and Maewo, make up Penama Province. Ambae is the provincial seat. In July 2018, Manaro -Voui volcano erupted resulting in compulsory evacuation. This was a huge logistical feat involving sea transport, the provision of adequate shelter and temporary homes, and maintaining essential services for displaced families. Volcanic activity has since stabilised but with an inherent risk of future eruptions, recovery plans are poised to incorporate disaster mitigation and coping strategies.

As of June 2019, 62% of the population of Ambae has returned to the island following compulsory evacuations in the last quarter of 2018 after the eruption of Manaro – Voui. Some residents sought permanent refuge in second homes, primarily in the main hubs of Santo and Efate, and to a lesser extent on neighbouring islands of Maewo and Pentecost. Numbers of displaced Ambaeans returning from temporary shelter are expected to rise to approximately 80% of the pre-eruption population of 11 000. In December 2019, the government, through its Council of Ministers, finally authorised full resumption of essential services to the island, while simultaneously working at relocating its provincial headquarters to Pentecost.

In collaboration with the Health Promotion Unit in Penama Province, BT is supporting a long-term project in community health education to improve health literacy. Led by the provincial Health Promotions Officer (Markson Tabi), Village Health Workers (VHWs) and chiefs of Lolovoli, Lolomanada and St Barnabas villages, villagers have focused on improving sanitation facilities, understanding good nutrition, promoting healthy kakae (food), and reducing the rates of infectious diseases.



Markson Tabi.

Penama's Health Promotion Officer, reflects on his team's overall performance in 2019.

"Our vision is to have an integrated and decentralised way that promotes effective hygiene technique and health promotion in the three communities. Penama Provincial Health through the Health Promotion Unit aims to build capacity and knowledge of community leaders and health workers to oversee activities around routine hygiene skills and healthy eating.

When resources are limited, cost effective tools are needed. Butterfly Trust's assistance enabled community leaders to identify their own problems and plan. It helped the community to make choices for their lifestyle.

I take this opportunity to thank our frontline village health worker and community leaders for their feedback and for adopting the programme. I am confident that as time goes on, many members of the three communities will bless their lives with knowledge gained from the programme. Results show a lot of improvement in people making serious decisions about their health. Community members learnt that simple things can bring about physical changes in their lives.

For example, one of the key messages in the project is to teach the community to be resilient by shifting from imported, (processed) food to depending entirely on local products to reduce the rate of NCDs (noncommunicable diseases). NCD screening was implemented as part of the goodwill provided by the Butterfly Trust. Results showed a high prevalence of diabetes, high blood

pressure and obesity among the adult population. The community showed concern about the impact of NCDs in terms of premature deaths and increasing levels of disability. The communities have also realised that they have all the resources in their community and those resources need to be utilised in ways to benefit a healthy community.

As for the hygiene and sanitation component, all three communities have made significant progress in the building of toilets, hand washing stations and bathrooms. Every household in St Barnabas has now got its own VIP (Ventilated Improved Pit) toilet built to the standard recommended by the MOH.





Lolovoli community has built 13 toilets, 8 handwashing station and 10 bathrooms. Lolomanada was a very difficult community to address but soon reorganised itself after further training and encouragement from some community leaders. Following this intervention, Lolomanada made a significant achievement recently. One of the villages in this area, Lovonda, was selected by Penama Provincial Health to be a Model Healthy Community, the first in this province. The launching took place on 27 January 2020.

It is also a TOBACCO FREE COMMUNITY, following in-service training on the health risks of tobacco

and alcohol consumption. The community is now drafting its own guiding principles.

We will also continue to monitor the prevalence of infectious diseases such as worm infections, diarrhoea and skin infections like scabies and yaws. Relevant knowledge has been introduced into the Penama Village Health Workers (VHW) in-service training. Teachers in three primary schools have also been included.

With all the passion and commitment of the VHWs in the three communities with improving hygiene practices, Penama Provincial Health has promoted one VHW, recommending that she attends nursing school. Regarding capacity building, it might be best for the programme to help send both VHWs for some up-skills training to build human resource so one day they can carry on with the program independently.

Despite the big challenges and disruptions as a result of the mass evacuation and relocation, I am proud that we have implemented the programme. In the last few years, Penama Provincial Health has really struggled to ensure that health care is provided in both hospital and community health services against the background of very devastating climate change. Butterfly Trust's support has helped the programme go through and develop.

Penama Health requests that the programme continue in 2020."

In comparison to bush toilets, that are more exposed and constitute breeding grounds for flies and mosquitoes, VIP toilets allow for the waste to decompose in contained spaces, minimizing environmental effects and odour. The step up from bush toilets to VIP Toilets should reduce the passing of some communicable (infectious) diseases.

This year, Lovonda 'Model Healthy Community' wants to build more public VIP toilets and handwashing stations at the church, nakamal (meeting house) and sports ground. Community leaders also request additional practical training to be integrated with the construction so families can reinforce the skills needed to build their own facilities at home.

Funds are needed to purchase cement, wire, buckets, taps, and building consumables, and cover truck costs for transporting coral and sand.

DONATE towards improved health, hygiene and sanitation

Bank details: Butterfly Trust Donations Account

Account number: 12-3233-0464934-50 (reference Ambae)

OR through www.givealittle.co.nz/org/butterflytrust

We support the United Nations Sustainable Development Goals



THANK YOU to all our supporters for assisting in the improvement

of health and education in Vanuatu. Your donations and volunteer skills have made a meaningful contribution to sustainable development over the years.

Helping locals create lasting impact takes time.

We need your ongoing support.

If you can help, please do so by donating to the BUTTERFLY TRUST.

If you would like to volunteer, or know someone who does, please get in touch.

Finally, please help spread the word about our work.

Bank details: Butterfly Trust Donations Account

Account number: 12-3233-0464934-50

OR through www.givealittle.co.nz/org/butterflytrust

Butterfly Trust is a registered charity CC38025