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Bringing HOPE . . . . Changing Lives

## 11 May 2014

Thank you for your support of HOPE worldwide (Australia). Here is an update from a recent HOPE workshop and HOPE board meeting that took place on 3rd and 4th of May 2014:

- 1. Richard Parrott stepped down from the HOPE board as President and Graham Gumley was appointed by the Board to be the new President.
- 2. The Day of giving around ANZAC Day was a great success and raised a lot of funds for PNG- around \$17,500! Approx- Brisbane- \$2,000, Melbourne \$3,000, Sydney \$10,000, Goldcoast \$450, Perth \$2,000, New Zealand TBA. We are looking to rebuild a clinic in the Highlands and have nearly reached the our target (around \$30K). Thank everyone for their generosity!
- 3. We are planning a HOPE Volunteer Corps to Papua New Guinea from 30th Nov 2014. Two groups- one to Port Moresby (7 days) and a second more adventurous group to the Highlands (11-14 days). Details TBA. Interested individuals to contact Mark Timlin.
- 4. HOPE Youth Corps- possibly a half day service project at the New Zealand Teen retreat in Jan 2015- to be confirmed. Fiji possibly the year after.
- 5. Local programs- plan to start local service projects in our churches and appoint a 'HOPE Rep' in every church to facilitate this. HOPE will conduct a workshop at the next SPA conference this Sept in Melbourne.
- 6. HOPE AGM- likely to have this in Brisbane in Aug/Sept 2014.
- 7. HOPE PNG- Mark Timlin and John Hancel due to make a joint trip to PNG end June/early July to strengthen the HOPE/Church relationship and guide the future direction of programs 8. Below is the 2013 annual report from HOPE *worldwide* Papua New Guinea.

If you have any questions or require any more information, please email me or give me a call!

Kindest regards,

Mark Timlin

Country Director Mob: 0434168945





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# Annual Report: 2013

Dear friends of HOPE Worldwide (PNG),

After what was expected to be the closing chapter for the Christian nongovernment organization due to the financial constraints beyond our control, it is with gladness to announce that we are still here today, and continuing in earnest towards achieving our goals, or as our mission focus states, "to bring hope to the underprivileged and facilitate change in the lives of people of Papua New Guinea"

# In early 2013, HOPE www went through a very

challenging time. The organization had to let go most of its staff and programs due to lack of funding. But despite all that was happening, it had still been another successful difference-making year with a small committed team.

HOPE Worldwide (PNG) was founded in 1994. For an NGO like Hope ww to achieve its goals, it is important that it works in partnership with the communities, donors, respective charitable organizations and the PNG Government. We are affiliated with Hope Worldwide entities in Australia, USA, New Zealand and 70 other countries.

HOPE Worldwide (PNG) has now focused on Primary Health Care (PHC), HIV/AIDS and STI, Diabetes, TB, and the 9 Mile and Lawes Road Urban Clinics



#### FLASHBACK!

 HOPE Worldwide (PNG) School Library Program broke the "two million books distributed" mark in 2010. The program had wind down in January 2013

# Sydney Volunteer Corps Repaint 9 Mile Clinic

It was a successful Volunteer Corps Visit organized by HOPE Australia. A team of 15 volunteers led by Dr. Mark Timlin, Country Director of HOPE Worldwide (AUS) repainted two urban clinics managed by HOPE Worldwide (PNG). A TB Shelter was also built to isolate the TB patients from the general patients. A very successful and worthy cause for patients coming to the clinic every day. Now the patients in those clinics receive quality care and treatment in clean and new looking environment.



#### **HOW ARE YOU HELPING?**

Your funds will assist HOPE worldwide (PNG) to deliver the Health Program:

- The Nine Mile and Lawes Road Urban Clinics in Port Moresby (including lab testing facilities)
- The Bokolma Aid Post and Gumine Health Centre in Simbu
- The Helivim Bilong Yumi (Our help)"One Stop Shop" HIV/AIDS diagnostic, treatment and counselingCentres at the 9 Mile and Lawes Road clinics
- Awareness raising in schools about HIV/AIDS and health issue
- Monitoring clinics providing TB treatment in Port Moresby and Simbu
- Screening and awareness for diabetes; including support for clinics offering diabetes screening.

**Above:**HOPE Volunteer Corp 2013 team members (Kaitlin and Brooke with Veronica) gearing up to paint the Nine Mile Clinic

# Primary Health Care dedicated to task

The 9 Mile Urban Clinic continues its outstanding service to settlement communities on the rapidly-growing northeast fringe of the capital, Port Moresby. The clinic is run in partnership with the Department of Health. Despite challenges such as tribal fights in the neighborhood, problems with utilities such as water, growing demand on services, and limited space, the clinic provides an exemplary and compassionate service that is lauded by health experts and the community. Approximately 250-300 patients visit the clinic daily. Locals and many from other parts of the city and further afield access the primary health services (such as general medical consultations, immunizations, nutrition checks, HIV/STI testing, treatment and VCT, laboratory testing service for Malaria, antenatal care, and family planning). Research is done in partnership with the Universities of Queensland and New South Wales, and the PNG Institute of Medical Research. The clinic is also a major hub for tuberculosis control, and a teaching site for students from the University of Papua New Guinea.

In partnership with NCD Health and the Department of Health, HOPE worldwide (PNG) is now running another major Urban Clinic, Lawes Road Clinic in Port Moresby.

### NEWS!

 After a successful visit to the country, it is expected that near 30 volunteer corps will arrive to the country again later this year. This time they will be working to rebuild the Bokolma Aid Post and Gumine Health Centre in Simbu





## Global Fund 'Grant Agreement' for TB

Coastal PNG has one of the highest rates of Tuberculosis in the world. The disease can affect any age group, and is very frequently fatal without treatment, but can be completely cured if diagnosed early. However treatment is required for 6-9 months – a challenge for anyone once they feel better!

The efforts and resources dedicated to stemming the onslaught unfortunately have been too slow – TB is airborne!

This year the National Department of Health was appointed as the Principle Recipient of a grant from the Global Fund to Fight AIDS Tuberculosis and Malaria (the "Global Fund") to implement the program entitled "Expanding and Implementing the Stop TB Strategy in Papua New Guinea Phase II (the "Program")

HOPE ww PNG was engaged by NDOH as a Sub-recipient to implement a part of the program. With this assistance, we are now in partnership with the Government and the WHO, and have been working to improve diagnosis and treatment in the National Capital District. Our program has now been extended to Simbu Province.

BELOW: Staff and volunteers gearing up for TB Walkathon in Commemoration of World TB Day 2013



# GBV gets support from US Embassy

The GBV trainings have been successfully completed. Participants learnt so much about gender based violence issues, health and other related issues through those trainings. At the end of the training they were given Certificates of participation. This is to certify them that they have under gone two days GBV Peer Education Training at Lawes Road Clinic and they are now qualified do referrals and share information on GBV with others who are affected. Through those trainings we have achieved most of objectives.

(Turn to page 4 on Achievements)



## 6 Mile School

Surveys conducted by HOPE worldwide (PNG) have shown that, in poorer urban and rural areas, many children are not enrolled in school, due to various social factors and inability to pay school fees. These children grow up illiterate and often unemployable. This perpetuates the poverty cycle.

Our Six Mile School has for 15 years provided hope and a future for children in this poor Port Moresby settlement. The Preschool Class's environment makes learning fun and we help families place their children into formal school. For children aged 8-14 years, the "Kisim Save" (Gaining Knowledge) Class gives them a second chance to learn basic numeracy, literacy and the discipline of learning. Each year 20-30 students graduate to places in Grades 1-4 at local schools.

This year, the Education program was funded by an individual donor to have it running for an year only. HOPE ww has also taken a different approach this year in finding a rundown classroom or space in various schools around the city to renovate and have their students attend to those schools as well.

HOPE wwcontinues to seek support to continue the work of the Education program.

"Any child can be a pilot or a doctor one day, even a child living in a village or in the

settlement"

### **GBV - ACHIEVEMENTS**

- Students from respective schools have reported that they have taught other students in their school about what they have learnt from GBV training.
- HOPE www has now established or set up referral systems for those who are affected by violence to access sexual health services at Lawes Road and 9 Mile Clinic. The participants will now become point of referral for those who are affected by violence

One of the women participants who survived from being continuously beaten up by her husband got medical treatment from 9 Mile Clinic and is now taking legal actions against her husband.

Through GBV training HOPE ww has
eastablished stronger network and
area good working relationship
telationship partners to
work together to
promote gender
equality and

alence

## Helvim Bilong Yumi Project (HBYP)

HBYP is one of the projects implemented by HOPE Worldwide (PNG). It seeks to implement targeted HIV prevention interventions among 'most at risk populations' (MARPS): men who have sex with men (MSM); transgender (TG); male sex workers (MSW); female sex workers (FSWs) high-risk men (HRM) and high-risk women (HRW). The focus of HBYP is to provide a comprehensive package of services to these populations in line with the *PNG National HIV Strategy (NHS) 2010 - 2015*.

#### PROJECT OVERVIEW

- HBYP was launched in 2006. This year marks 8 years of service
- Over 40, 000 clients accessed sexual health clinical services within the last 6 years
- An average of 200-300 patients visit the clinic monthly (9 mile and Lawes Rd Clinics)
- Laboratory, clinical services, and data collection highly regarded by NDOH
- Community and hotspots outreach to (MARPS) Most At Risk Population as in (Female sex workers, male sex workers, men having sex with men, Transgender, High Risks Male and Female)

# SOME SERVICE HIGHLIGHTS AT THE CLINICS (9 MILE AND LAWES RD CLINICS)

- \* Within last 5 months 671 STI clients and 351 VCT clients who were from MARPS and general population accessed the clinic
- \* Drop in number of death rate, 50.5% to 6.2% from the time that the project started to the present. STI, VCT, and OI/ART services at 9 mile clinic are taken care of by NCD Health Service
- \* Fully equipped laboratories enable beneficiaries to know their result on the same day



#### **CURRENT STATUS**

- Funding is one of the major challenge since our partnership with FHI ceased in 2012
- HBYP is currently in its transitional period maintaining only Lawes Road Clinic.
- NCD Health has funded HBYP with K49,763.56 and National Aids Council with K144,782.76 for the 5 months. As approved by National Aids Council, unexpended funds to be used to continue services for another 3 months.
- HBYP is still maintaining its Ol/ART services with 345 Registered ART Client. Cumulative # of patients ever receiving
- ART up to the Reporting month is 226 of which 93 male and 133 female.
- Within the 5 months, almost 671 STI clients and 351 VCT clients who are from the MARPs and general population.

#### CHALLENGES

- Number of MARPs especially MSM and Trans Genders accessing the services have decreased due to no Peer Education and Referrals.
- Cessation of the Prevention program has really affected the flow of Most at Risk Population to the clinics.
- Monthly MARPs Trainings (FSW, KBW, MSM) have not been conducted due to shortage of trained staff.
- Majority of the experienced staff have left due to job insecurity.
- Remaining Staff work load has increased due to shortage of man power.
- Transport for pick up and drop off very sick ART clients is not possible.
- The project has operated without a Medical Officer since last year 2012.

#### **WAY FORWARD**

- Strive to improve the quality of services at the clinics
- Continued partnership and collaboration with NDoH, NACs and other NGOs/FBOs, PLHIV
- ✓ Strengthen the linkages & referrals mechanisms between health facilities and communities
- ✓ Continue to integrate CoPCT with the Health services in NCD.
- To have our clinical staff under the government payroll system.
- Main focus is to revive HBYP into its full component and operation to provide services.

