



Above: Children play together at the Day Care Centre in Nagorno-Karabakh

Hope and Healing

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- Updates from HART and our Partners

This Newsletter highlights the many amazing achievements of our HART partners, witnessed over the summer and beyond, as they bring hope, healing and happiness to their communities.

I highlight two examples by way of introduction.

We have recently returned from a visit to the Rehabilitation Centre in the still unrecognised land of Nagorno-Karabakh. I wish you could have been with us to see the inspirational concert in which patients performed brilliantly, including little children who danced with such pride and delight and older patients singing superbly. Such achievements would never have been possible in the previous Soviet era where people with disabilities were stigmatised, warehoused and doomed to die from pressure sores and infections.

In August, Burma was severely affected by torrential rains which wreaked havoc across many parts of the country, with floods causing massive displacement and destruction of homes, roads, crops and livelihoods. Our partner, Dr Sasa, carries out his transformational programme training Community Health Workers in Chin State – one of the worst afflicted areas. Chin

State is so cut off from the rest of Burma by rivers, mountains and thick jungle, that aid organisations from within Burma could not reach the flood victims. Sasa needed to obtain funds to purchase urgently needed food and medical supplies in India and to transport these across the border to his people in desperate need. HART appealed to Guernsey Overseas Aid Commission who generously responded with £15,000 for emergency funds and donations from HART supporters have enabled life-saving supplies to reach this part of Burma inaccessible to other aid organisations.

We thank all HART Supporters for helping us to help our valiant partners to bring hope and healing to thousands of people in some of the most remote, forgotten and needy parts of the world.

Caroline Cox

Shan Women's Action Network

SWAN is a community-based organisation dedicated to gender equality and justice. Staff co-ordinate a number of programmes relating to health, education and women's empowerment, as well as conducting advocacy and research.

In May this year we visited SWAN, who work across the Thailand-Burma border and inside Shan State. HART is the main donor for SWAN's Health Programme, which has three components: health education and service delivery among displaced people in Shan State; community health interventions along the Thailand-Burma border and emergency assistance for migrant women and children in crisis situations in northern Thailand.

Refugees from Shan State are not recognised by the Thai Government and therefore it is very difficult for them to access services, including healthcare. As well as providing practical and financial support, SWAN staff also assist Shan refugees with language translation and access to services. Here are the stories of just some of the patients whom SWAN is supporting:

Nawaporn Lungong, 3 years old

Nawaporn was born disabled from the waist down due to a broken spine and displaced hips. She has previously had an operation to insert splints into her legs to make her more comfortable. This operation cost 100,000 THB* (~£1900) and is being slowly paid for by her mother in instalments. Nawaporn had a large tumour on her back which has now been removed, this operation cost 9400 THB (~£170) to which SWAN contributed. Nawaporn was also born with both male and female sexual organs, which often become inflamed and painful.

There is a chance that she may be able to walk in the future with a further operation costing 9000 THB (~£161); this will be determined by a forthcoming X-ray. Without this operation, she will not even be able to wheel a basic wheelchair. She must visit the hospital at least every week which means that her mother can only work 2-3 days per week.

Nawaporn's father left the family before she was born, leaving her mother without support. The pair recently had to move accommodation as, on multiple occasions, men had attempted to break into the room to sexually abuse her mother.

Nawaporn's mother says: *"If SWAN did not exist, life would not be possible for me. I cannot do this by myself because I need to work to pay for rent and medical bills. I have to go to the hospital for long periods and then my wages are reduced. SWAN helps me so much."*



Support Required

Rent: 2,000 THB / month (~£37)

Care: 1,000 THB / month (~£18)

Hygiene Items: 2,000 THB / month (~£37)

Forthcoming Surgery: 9,000 THB (~£165) N.B. this surgery cannot be paid in instalments

Thitimoon Lungnume, 4 years old

Thitimoon was involved in a car accident which killed her father and left her with severe head injuries. She has undergone four surgeries since the accident. Her speech has regressed significantly and is now very stunted.

The accident has left her with a significantly weakened left hand side, although not full paralysis. This is being treated with physiotherapy, although she is reluctant to do painful and difficult exercises.

Obtaining 'migrant' health insurance is important, as it will allow Thitimoon to continue with treatments and will reduce the costs of the treatment fees. A health insurance certificate is also one of the documents that would allow Thitimoon to access an education in the future. Her mother also requires a work permit, as hers has expired and she no longer has a means of generating any income.



Support Required

Health insurance certificate: 15,000 THB (~£275)

Work permit for her mother: 4500 THB / year (~£82)

Money owed for surgeries: 123,486 THB (~£2264)

Rent: 2,000 THB / month (~£37)

Nang Raun, 45 years old

Nang Raun is HIV positive. In 2011, the virus began to affect her eyes, and now she is blind. She is unable to earn an income because of her medical condition and none of her three children are in a position to offer her any support.

Occasionally, her neighbours give her some food but more often than not she is without food or money.



Support Required

Rent: 2,000 THB / month (~£37)

Transport to the hospital, food expenses, eye cleansing medication and artificial tears as her eyes are constantly dry and painful.

*THB = Thai Baht

(SWAN) Patient Stories

Seang Hom, 1 year old



Seang Hom suffers from a disease which causes too much fluid on the brain. She has undergone surgery to insert a tube between her skin and her skull to allow fluid to drain into the kidney area and be excreted via urine. However, her head continues to grow at an abnormal rate and no lasting solution has been found. She suffers from fits and often has a high temperature.

Recently, SWAN has been able to obtain health insurance for Seang Hom, in order for her to continue her ongoing treatment at a reduced cost. SWAN also provides 2,000 THB (~£36) per month to help with expenses, but this is not adequate. Seang Hom's father returned to Burma and has not been seen since, so her mother receives little to no support from their family.

Support Required

SWAN provides 2,000 THB (~£36) per month to the mother and child. However this comes nowhere near to covering all of their expenses. Seang Hom's young mother must pay rent, medical fees, transportation costs to hospital and their living expenses plus additional expenses such as powdered milk for her child who cannot take breast milk. However, she is unable to earn an income as Seang Hom requires constant care.

Mu (Bow Lungmoon), 17 years old

Mu developed chronic Idiopathic Thrombocytopenic Purpura (ITP) at the age of 7 years old. She has severe anaemia and a low platelet count. She has to receive medicines every month and attend check-ups. SWAN has supported her medical expenses for the last 10 years.

Mu is the eldest of three children. They live in an unofficial camp for displaced Shan peoples in northern Thailand. Her father passed away and the three children live with their mother, who has become an alcoholic. The family do not have access to clean water or toilet facilities. The children cannot receive education beyond primary level because they do not have official ID in Thailand.

Support Required

Mu needs financial help to cover her living expenses and medical fees; this includes medical treatment costs, transportation costs (from her home to the hospital), and food costs.



Nang Tean, 55 years old

Nang Tean has excess fluid on her lungs, cirrhosis and a kidney disease. She is now paralysed from the waist down and she has to drag herself across the floor to move. As she has no source of income, she is unable to access medical treatment.



Her daughter is a domestic worker who lives in the home of her employer and therefore she is unable to provide any support to her mother. Nang Tean now lives with Nang Lean (below) and Nang Lean's elderly mother. They take care of each other as best they can, but are living under extremely difficult circumstances.

Support Required

Nang Tean needs help to cover her living expenses and medical fees including medical treatment costs, rent (2,000 THB [~£36] / month), transportation costs to and from the hospital, and food costs.

Nang Lean, 35 years old

Nang Lean has tuberculosis and is HIV positive. She is currently completely bedridden and unable to move. Her elderly mother takes care of her and Nang Tean, working as a housekeeper to earn a small source of income in addition to these responsibilities. The family is experiencing significant hardship due to high medical expenses.

Support Required

Nang Lean needs help to cover living expenses and medical fees, including medical treatment costs, rent (2,000 THB [~£36] / month), and food costs. Nang Lean also requires items such as adult diapers, as her elderly mother cannot lift her to take her to the toilet. These items are very expensive for the family.



If you feel able to sponsor one of these people in need, or SWAN's work in general, please contact the HART office or complete the donation form at the back of this newsletter. Thank you!

International Investment in Large-Scale Development Projects in Burma

By Jamie Osborn, HART Intern

Since Thein Sein took office as President of Burma in 2011, the country has been praised for introducing political and economic reforms. EU trade sanctions on Burma have been lifted, and the country itself has encouraged foreign direct investment (FDI). European, American and Australasian companies have begun investing in Burma, as well as Chinese and Thai corporations which have had longer-term involvement with the country. Many of these investments are into large-scale infrastructure developments or in the extractive industries – hydropower dams, roads, coal, jade and oil extraction, timber logging – and in the creation of high-investment “Special Economic Zones” (SEZs). These developments are often in areas belonging to ethnic national peoples who are vulnerable to abuse. The Burmese Government claims these developments are essential for Burma’s modernisation. But despite some political reforms, Government corruption and the continued involvement of the Burmese military in the Government, as well as irresponsible practices by many companies, have seen worrying human rights abuses linked to large-scale developments. Local villagers suffer not only loss of land and livelihood without adequate compensation, but also abuses by military troops guarding development sites. Protestors are at best ignored by officials, at worst subjected to torture or killed. Such abuses inflame tensions between ethnic groups and the Government and fuel the long-running conflicts between them and the Burmese Army.

Evidence of Human Rights Abuses

On HART’s visit to the Thailand-Burma borderlands in May 2015, HART staff were told by villagers how sometimes, when their land was taken by the Government to lease to investors, officials came with a large cheque as compensation. They took photographs handing over the money. As soon as the photographs were taken, the officials took the cheque back and drove away. The villagers were left with no compensation for the land and livelihoods they had lost.

Such developments often do not bring local people any benefit at all. One of the largest and most controversial developments currently in planning is the Mong Ton Hydropower project on the Salween River. Thousands of local people have been displaced and more will lose their homes to a floodplain that will be larger than Singapore. 90% of the power the dam produces will go to China and Thailand – the

rest will possibly go to military-owned factories and compounds, leaving local people in darkness.

People are often relocated into areas where they are unable to rebuild their lives. Conditions in relocation camps are dire, many reportedly worse than those in refugee camps, with high levels of malnutrition. In the Thilawa SEZ, average household income has dropped by 78.1% following relocation, and water in the relocation camps was infected with faeces.

There have been protests by villagers and others, but these have been ignored or crushed. In 2012, police used white phosphorus munitions against protestors at the Letpadaung copper mine, causing severe burns which Amnesty International has said amount to torture. In several cases, peaceful protestors have been shot and sometimes killed.

The developments come with increased military presence, as troops are sent to guard the investment sites. The soldiers often carry out abuses of local people with impunity, including exploiting villagers as forced labour, and rape. A woman living near the site of the Shweli Dam in Shan State has said *“I used to go alone to my fields before the soldiers came to stay here. But I don’t dare to go alone to the fields, the market, or to visit friends now as the soldiers often make inappropriate advances and sexually harass women.”*

Abuses and irresponsible behaviour by the Army and companies are being covered up or smoothed over. When dozens of villagers turned out to protest against the Mong Ton Dam at the first so-called public consultation earlier this year, the official report contained no mention of protests. Local people have since been given gifts which they see as bribes, while the company meant to be carrying out environmental and social impact assessments (ESIAs) for the project has cancelled all public consultations. Over 70 Burmese civil society organisations (CSOs) have called the ESIA process *“simply a sham, aimed to rubber-stamp the Mong Ton dam plans”*.

All of this is fuelling conflict as local people grow increasingly frustrated with the Government. The Global Witness pressure group has found links between the jade mining industry in Kachin State and fighting between the Army and ethnic Kachin soldiers. During HART’s visit to Burma in May, staff were told *“The peace process is going backwards. There is still fighting in Shan, Kokang region, Kachin and Rakhine States. The peace process is not moving forward.”*



Above: The Shweli Hydropower Dam 1, located in Mantat village, northern Shan State

“I used to go alone to my fields before the soldiers came to stay here. But I don’t dare to go alone to the fields, the market, or to visit friends now as the soldiers often make inappropriate advances and sexually harass women.”

Photographs provided by the Ta’ang Students and Youth Organization (TSYO).

Four Facts to Know About the Upcoming Elections in Burma



Left: Burma Army battalion sent to secure the Shweli Hydropower Dam 1

What can be done?

Burmese CSOs and international human rights groups have called for a moratorium on developments such as the Mon Ton project, at least while the Government's record on human rights remains so poor and while lack of transparency, corruption and conflict remain rife. However, with many viewing Burma as a market with huge potential and with many companies keen to access the country's resources, investment is likely to continue. In this scenario, it is essential that the Burmese Government improve its management of large-scale developments, end the impunity with which the Army is acting, and improve the transparency of investments.

Furthermore, investing companies must consult thoroughly and sincerely with local people before and during any investment. The British Government has said that it will not invest in areas where there are not yet ceasefires in place – and British companies should do the same. But unless the practices of the Burmese Government and Army and of many investors improve, investment could put ceasefires at risk by inflaming tensions. The way to avoid this is to ensure that local people's views and rights are taken into account and respected by all.

Over 6000

forced relocations at Tasang Dam site alone (International Rivers)

85%

of households did not receive compensation in the Dawei SEZ (Dawei Development Association)

39

army battalions are stationed around the Mong Ton dam site

122

community-based organisations protested against Salween dams in July 2015

1 **More than 90 parties with more than 6,000 candidates are competing in the elections scheduled for 8th November 2015.** For the first time since 1990, Aung San Suu Kyi's National League for Democracy (NLD) will compete in the general elections. The NLD will be the greatest opposition of the military-linked Union Solidarity and Development Party (USDP) who are currently in power. In the 2012 by-elections, the NLD won 43 out of 44 contested seats.

2 **25% of seats are guaranteed to the military.** This is an effective veto on constitutional reform for which a 75% majority is required. Earlier this year, amendments to the 2008 Constitution were rejected, blocking Aung San Suu Kyi from running for President and enabling the military to retain this veto.

3 **Three months are likely to pass between polling day and the inauguration of the new President.** There is increased risk of political instability during this period. Aung San Suu Kyi has said, **"A smooth and tranquil transition is almost more important than a free and fair election."** The general elections do not determine who will become President; this is later decided by the elected legislature.

4 **A number of groups are disenfranchised in the run up to this election.** The Rohingya were stripped of their right to vote earlier this year when their identification documents were revoked. Furthermore, the Union Election Commission has announced that **32 townships in five ethnic states will not be able to vote, as "they are in no position to host free and fair elections"**. This includes regions affected by conflict in Shan, Kachin and Karen and Karenni states. Local election officials and ethnic leaders in **Chin State forecasted that 270,000 people may not be able to vote** due to the damage caused by floods in July and August this year. Others simply do not trust the democratic system due to previous corruption and ongoing insecurity. A Shan IDP told us in May this year: **"People are worried about their daily survival so they cannot think about politics."**

That said, these elections have been internationally earmarked as a potential milestone in Burma's transition to democracy. A Nationwide Ceasefire Agreement is in discussion and it is hoped that these developments will lead to improvements for the ethnic national peoples of Burma who have suffered so much and continue to experience conflict, displacement and a lack of international attention.

PARTNER PROFILE:

Vardan Tadevosyan



Director and Founder of The Lady Cox Rehabilitation Centre in Nagorno-Karabakh

BIOGRAPHY IN BRIEF

Vardan was born in Yerevan in 1966. He began his career as a professional cyclist, representing Armenia in the Soviet Union Games.

Previous Employment

1985-87: Soviet Army Tank Commander (Sergeant).

1991-1999: International Post-Trauma Rehabilitation Centre of the Armenian Red Cross: *"The first rehabilitation program in a post-Soviet country was in Yerevan, because in 1988 an awful earthquake in Armenia killed more than 25000 people and more than 600 people got spinal cord injuries."*

1992-1999: Head educator and founder of the educational program for local rehabilitation therapists, who were distributed across many hospitals in Armenia. This initiative pioneered rehabilitation therapy in Armenia.

Education and Specialist Training

1983-1991: Attended the Armenian State Physical Culture and Sport University.

1994: Heidelberg University Hospital, Germany – Spinal Cord Injury rehabilitation.

1997: Malta – Geriatric rehabilitation.

1998: Pennsylvania Hospital University, USA – Stroke rehabilitation.

2003: Cardiff, UK – Rehabilitation for patients with amputations.

2009: Ljubljana Rehabilitation Centre, Slovenia – Vocational rehabilitation for disabilities.

2010: Switzerland – Rehabilitation for patients with mental health problems.

2012: Nominated and became a Tearfund 'Inspired Individual'.

An Interview with Vardan

Can you tell us about your current work at the Rehabilitation Centre?

I am Director of the Lady Cox Rehabilitation Centre, but really I am a team member. I am with my patients and my staff all the time. I am treating patients, doing management work and doing handyman work. I am very much involved in designing and building the equipment that we are using, as this is much cheaper than purchasing it from outside. I am happiest when I am training my staff and students at the Centre.

My real responsibility is to be with my patients, and part of my time I spend visiting patients in our home visit project. Families want to spend long time with me, talking about their difficulties because the Rehabilitation Centre is a big part of their lives. We make good decisions together, and I think that talking gives them some relief. In this way I am like a psychologist. What can make you happier than seeing them being relieved?

The professionals of my team are the best because some of them have been working with us for 15 years and they are planning to stay. They have one year of intensive education from me, and then I support them to have continuous education and to develop their skills. Now it is easier for me to train the students, because my staff are also trained to be educators.

Could you talk us through the treatments that the Centre provides for the patients?

We provide physical therapy, occupational therapy, hydrotherapy, speech therapy and psychology. We are also trying to develop and offer sport therapy, art therapy and music therapy. Our staff are becoming one big team of multi-disciplinary specialists. Patients attending the Rehabilitation Centre are able to more easily reintegrate with their community and live full and happy lives.

We have too many young people with disabilities at the Centre and we are trying to give them more than just treatment. We try to bring them out to the community; take them to the restaurant, movies and theatre performances; make excursions to historic places and visit churches.

Our patients are babies, children, adults and the elderly: anyone who has physical and mental disabilities. 90% of our patients are people who have physical disabilities and 5% have mental disabilities.

What motivates you to do your work?

I have a motto that my staff know, and sometimes are using themselves – *"if not me, who else will do this?"*

What are the things that you are most proud of about the Centre and the biggest accomplishments?

I think the biggest achievement for us is that we now have a running Rehabilitation Centre that is recognised by authorities, nations, professionals and our supporters. The Centre is becoming very popular and many hospitals and doctors are seeing the results



Above: Occupational Therapy

treatment, to learn new activities, experience a new way of life, prepare for new professions and reintegrate back into the community. I believe that we will see a lot of changes in my community because sometimes they still don't recognise people with disabilities. We will change the view of the community towards people with disabilities and families won't feel any shame that they have a relative with disabilities.

In the future I believe the Rehabilitation Centre will be a recognised centre for the treatment of people from neighbouring countries. I believe one day we will have a peace agreement with Azerbaijan, and what can be better when your neighbour country is recognising and sending their patients to your place to get treatment? What can be better than when you can help everyone, without thinking about their nationality, without thinking about their religion? I think this is the future and I am more than sure it will happen, it will come.

I think it will come because when I see what we have done in 15 years I know how much more we can achieve in the next 15 years!

How does HART support you?

HART support is really very essential, because our country is not recognised. International donors are interested in what we are doing but they are not able to help because of the political situation. The State is supportive and is paying for some of our work, but unfortunately what they can afford is very little for all the activities that we do.

So without HART's support I can't imagine how difficult it would be. The Centre probably couldn't survive and if we did somehow survive, the quality and the work would be very different.

With HART, this is teamwork – and I am happy to be in your team, and I am happy to have you in my team. We are like family. Thank you so much for this!

Do you have a message for friends and supporters here in the UK?

I would like to thank everyone who is praying for us and who is interested in what we are doing. You are reading the HART newsletter, seeing updates on our activities and visiting us. I can't say how much I appreciate your support to HART and to our Centre. Because of your support, more and more people with disabilities will get their hope and will be able to believe in a future.

Below: Vardan pictured with Caroline Cox and his Medal of Gratitude from the Minister of Health



“We will change the view of the community towards people with disabilities and families won't feel any shame that they have a relative with disabilities.”

of our work. Every year around 1000 people are getting benefit this work.

What do you feel are the biggest challenges that you face in your work?

Well there are many challenges, but I like challenges!

For me, my biggest challenge in my life was in 1999 when I came to Stepanakert to see how I was going to start this project. It was my biggest challenge when I saw the destroyed building and when I talked to the people and no-one had a clue what I was trying to do. But Lady Cox promised her help and support and let me come to my own decision, knowing that I was the only person able to do this job.

I really couldn't say 'No' because of the people: I knew they really needed the Centre. So I decided that 'Yes' I will begin this project, and I am really happy that I did. What can make a person happier than to be able to help your nation when it suffers?

In the beginning, my work would sometimes take me 17 hours per day: going home just to sleep and coming back early morning to start all the renovation and training. The prayers of our supporters give me a lot. Sometimes when I had days that felt I couldn't pass through a wall I found that I was suddenly able to and I believe that the prayers helped me! I am so lucky that people supported me in this dream.

Today's difficulties are different than those times. The waiting list for non-urgent cases is 6-8 months, which for me is far too long. People coming first time after a serious accident have to be treated as soon as possible and I am really trying to juggle the funds to prioritise the most urgent cases. Eight nurses have just completed a training programme that will enable them to work in the regional hospitals. I hope that this will do something to reduce the waiting list, but really we need a new Centre with a bigger capacity.

What are your hopes and priorities for the future?

In the future I believe we will have a really modern and decent Rehabilitation Centre that is accessible for everyone and has different departments – we won't treat babies and elderly people in one room. My staff will divide their responsibilities and become specialists in their chosen area of expertise.

I think we will have Rehabilitation Centre where everyone with any kind of disabilities will come to get



Above: Physiotherapy

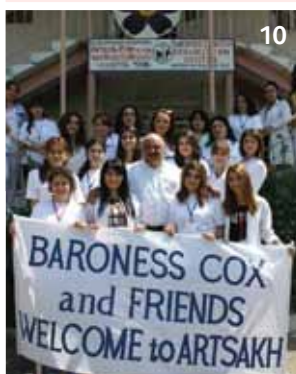


Left: Nagorno-Karabakh is an historically Armenian-populated enclave land-locked within Azerbaijan

'A Journey Through History' to Armenia and



"I have left with unforgettable memories and the desire to come back at the earliest opportunity. I learned from local people how it is possible to be so happy and content with so little. I saw the beauty in the simplicity of life. I saw values untouched, and unspoiled by money and wealth. I am completely taken by Artsakh and its people. I can see myself living there one day." **Vartouhie Barnes Vartabedian**



"What transpires is the spirit, resilience and beauty of these kind, warm, joyous, loving people – young, middle- aged or seniors. They were all so inspiring and in many ways, showing us constantly how to defend and cherish our taken-for-granted freedom, education and history. Despite a past of war and suffering, every person we met was eager to go on and express by all means possible their beauty, love and peace. What a visit!"
Guy and Slawa Gumuchian



Nagorno-Karabakh



16-25th August 2015



This summer, 35 visitors aged between 15 to 88 and from many walks of life, joined HART on a ten day 'Journey Through History' to Armenia and Nagorno-Karabakh (1). Upon entry to Nagorno-Karabakh, or Artsakh as it is locally known, first impressions were of immense admiration for the phenomenal hospitality of the people. During our first night in this disputed region we were treated to a delicious traditional barbecue (2) and, for many, the first introduction to the Armenian toasting custom!

As Nagorno-Karabakh is not officially recognised by any United Nations member states, visitors from around the world carried flags to show solidarity with the people living there (3). Four patients from the Lady Cox Rehabilitation Centre joined us for the entirety of the journey (4, 5), sharing their stories with us all and revealing the value of the Centre which prioritises integration and equality of those with disabilities.



Members of the group opting to walk the entire journey covered 140 kilometres (6) of the region's beautifully varied landscapes (7). At each village we came to, we were touched to find villagers assembled to welcome us with traditional dance (8) and the custom of sharing bread (9). A highlight for many was visiting the Rehabilitation Centre (10) where we joined with patients and staff for cultural performances and celebration (11). This included a particularly special performance by children with and without disabilities from the Day Care Centre of the making of Lavash bread (12). Following the performances, it was our privilege to witness the presentation of a Medal of Gratitude to Vardan from the Minister of Health for his extraordinary services to the region and to meet with eight newly trained nurses who were about to sit their final examinations (13).



While in Artsakh, the delegation also met the President of Nagorno-Karabakh (14) who discussed his hopes for the political future of the region. Back in Armenia, the group met His Holiness Karekin II, Catholicos of All Armenians, in the City of Echmiadsin – a great honour, as Christianity forms an integral part of Armenian identity (15).



This year marks the centenary of the 1915 Armenian Genocide. Commemoration of this great atrocity, which is as yet unrecognised by the British Government*, was therefore an important and poignant part this visit. The delegation visited the atmospheric Dzidzernagapert Genocide Memorial (16) and the Armenian Genocide Museum (17) which powerfully depicts the events leading to the massacre of between 800,000 and 1.5 million people in a genocide still denied by much of the International Community.



*28 countries have formally recognised the events as 'genocide', including Russia, Brazil, France, Germany, Canada and the Welsh Assembly.

News from HART

Uganda

Since 2005 when HART first became involved with the peoples of northern Uganda, at a time when the Lord's Resistance Army (LRA) was still very active, we have continued to provide support for children. We were involved in the founding of the PAORINHER Centre in 2007, first to care for orphans and vulnerable children left by the LRA's reign of terror; and for the past five years with the diagnosis and care of HIV-positive children.

The Centre now faces two specific challenges:

- It is seeking to increase its outreach to more distant areas, reaching children and families in all sixteen sub-counties of the region. It still remains the only centre in the north of Uganda focussing on paediatric care in HIV. At the heart of this outreach is the improvement of families' and communities' agricultural practice and viability, to ensure long-term nutritional support for children.
- Secondly, there is the need to discover new sources for funding. HART has provided funders for eight years. Now, it is hoped that funding can be obtained and increased both from within Uganda and from supporters within the UK. For this purpose, a supporters' organisation is being established in the UK with the support of HART. Please contact us if you are interested.

PAORINHER continues to be a Centre of which Uganda can be proud. The Centre is a frontrunner in the battle against the stigmatization of individuals and the handicapping of so many lives by HIV/AIDS.



Timor-Leste

In this country where over 50% of children are classified as malnourished, HART's partner HIAM-Health has established a residential centre to provide rehabilitation to malnourished children. Parents and care-givers, who stay with their children at the Centre, are trained to educate their own local communities in the growth of nourishing foods, while their child is treated. HIAM-Health assists in setting up family and community gardens which further disseminate knowledge of how to achieve a healthy diet. It is a strategy which is proving effective; both the national government and other organisations are recognising this.

This summer, HART received the very encouraging news that the Isle of Man Development Committee is making a further three-year grant to support the HIAM-Health Centre, to continue after the conclusion of the present three-year grant which is now in its final year. This grant will continue to provide nearly 50% of the running costs. HART and HIAM-Health wish to express our immense gratitude to the Isle of Man Development Committee and the people of the Isle of Man for their continuing support.

We are hoping that the national government in Dili, Timor-Leste, will become the other major donor.

During the last two years, the Centre has cared for 200 children and their carers per year. The increase in the Centre's reputation has led to other international organisations seeking to include it in their own health research.



Nigeria

Before turning to the programmes we support, we in HART must express our great sadness in reporting the death in a car accident of Sarah, the busy, ebullient and deeply caring wife of Bishop 'Zac' of Kano. Her work for women throughout the Diocese and her support for her husband in his hope to extend education and health care to the remote rural areas were especially inspirational. We miss her and we extend our profound sympathy to the Bishop and his family.

HART supports three different projects in northern Nigeria, an area troubled by widespread violence and killings, burnings and destruction. It is precisely in these kinds of areas, as in the Nuba Mountains and the Blue Nile in Sudan, that it is so impressive to see how local people and their leaders continue to promote education and health, and to create peace and reconciliation. The violence in northern Nigeria, and its causes, long

predate the existence of Boko Haram, which massively escalated the scale, creating a reign of terror.

Firstly, the Christian Institute in Jos has this year enrolled more students than ever before in its courses of health care, theology and pastoral care, communications and media, IT and music.

Secondly, the Anglican Bishop and Diocese of Bari continue to expand their school for girls and boys and have now started a fourth year. They seek funding to construct a new residential hostel for girls,



a library and laboratory equipment. The hospital continues to serve inhabitants of other faiths, the great majority of whom are Muslim. The hospital is now successfully registered for births to take place.

Thirdly, HART supports the reconciliation work in the Mayfield area of Jos, under the Reverend Hassan John. This programme brings together Muslim and Christian women, boys and girls to share work and recreational experiences as a basis for healing people and communities fractured by conflict.

HART travels in to areas where Boko Haram are active and has assisted in the provision of health care for people living in areas under constant threat of attack, for whom the State Government provides nothing.

and our Partners

Thank you from Dr Sasa

In August we launched an emergency fundraising appeal for our partner Dr Sasa, enabling him to deliver emergency food aid to those worst affected by severe flooding in Chin and Rakhine States in Burma. This appeal raised over £17,000 in two weeks contributing towards the purchase of 25,000kg of food aid! Particular thanks must go to Guernsey Overseas Aid Commission who responded to Dr Sasa and his team's appeal instantly with £15,000 and to HART supporters for your donations of over £2,000. Dr Sasa and his team are now working around the clock to ensure that this food is delivered to those living in remote areas.

To all of you whom donated so generously, Dr Sasa wishes to say:

"Thank you so much indeed for all this great love, great care, great relief and comfort that you are giving to our people and country in this time of devastation."



Above: Dr Sasa and his team transporting food aid by boat

Fire-walking for Change

Longstanding supporter, John Ewington, completed a barefoot fire-walk over red-hot embers raising £460 for HART! We are exceedingly grateful to John for his daring antics!



If you would like to take part in a sponsored challenge for HART please contact sam.hudson@hart-uk.org for more information.



Humanitarian Aid Relief Trust
PRIZE FOR HUMAN RIGHTS

ESSAY AND CREATIVE COMPETITION

for young people with a passion for global affairs

Prizes include a trip to Nagorno-Karabakh with HART, publication, work experience, tea in the House of Lords and more!

www.hart-uk.org/about-you/humanrightsprize



Closing date: 26th February 2016

Dates for your diary



Volunteers' Reception, 6.30pm

Fielden House, Westminster, London SW1P 3SH

Come along to find out more about HART, including the HART Prize for Human Rights, the HART Ambassadors' Scheme and other ways in which you can get involved!



Carol Concert, 7pm

St Cuthbert's Church, Earl's Court, London SW5 9EB

Join us for what promises to be an inspirational and very enjoyable evening of musical performance and celebration!

Humanitarian Aid Relief Trust



HART works to provide lasting change through aid and advocacy for those suffering oppression and persecution, who are often neglected by other organisations, or are largely out of sight of the world's media. Founded in 2003 by Baroness Cox, a human rights activist, HART makes every endeavour to be a 'Voice for the Voiceless' for those who may be unreached, unhelped and unheard.

HART relies on first-hand evidence of human rights violations as a basis for powerful twin-track programmes of international advocacy and aid. We believe that advocacy, combined with aid, is vital if we are to achieve sustainable community development, local ownership and empowerment for oppressed peoples.



YES!

I want to make a difference and be a 'Voice for the Voiceless'!

At HART we see all the time how a little goes a long way – both in the way our partners abroad use the funds we provide and the difference our volunteers can make. There are many ways to support the work we do.

If you would like to donate to our work, you can do so in a number of ways:

I would like to make a one off payment towards the work of HART. A cheque is enclosed for £.....

I pledge to help HART's partners and their grassroot organisations on a regular basis with a

monthly quarterly annual gift of £..... (please tick one)

Please send me a standing order mandate.

**Text HART00
£10 to 70070
to make a £10
donation!**

Title.....First Name.....Surname.....

Address

City.....County.....Postcode.....

E-mail address.....

Phone

giftaid it

I am a UK taxpayer. Please treat as Gift Aid all qualifying donations made:

Today In the past 4 years In the future (please tick all boxes you wish to apply)

I confirm I have paid or will pay an amount of Income Tax and/ or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equivalent to the amount of tax that all the charities and Community Amateur Sports Clubs that I donate to will reclaim on my gifts for that year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand that the charity will reclaim 25p of tax on every £1 that I gave on or after 6 April 2008 (28p) of tax on every £1 that I gave up to 5 April 2008).

**Please return to:
HART-UK, 3 Arnellan House, 146 Slough Lane, London, NW9 8XJ.
Tel: 020 8204 7336**

THANK YOU FOR YOUR SUPPORT

For more information about HART or to make an online donation, go to
www.hart-uk.org