

# BAWA Health Initiative News



A PUBLICATION OF THE BAWA HEALTH INITIATIVE

February 2011

Dear Friends of the Bawa Health Initiative,

I must admit that I am not a regular subscriber or avid reader of the professional journal, **Comparative Parasitology**.<sup>\*</sup> However, I have just completed reading with interest the two articles recently published by Dennis Richardson, Ph.D. (Co-Founder of the Bawa Health Initiative) and his co-authors. The detailed studies of the prevalence of waterborne parasites and geohelminth infections in the villages of Bawa and Nloh in rural Cameroon confirm the effectiveness of our public health work in those villages over the last three years. A physical health survey was conducted in the summer of 2007 to provide a base line and a follow-up health survey was completed by our BHI team this past summer. The health survey data has enabled BHI to scientifically demonstrate the success of our public health projects.

We now know that our campaign to provide the resources and training by village health committees in Bawa and Nloh to construct and install bio-sand water filters in each family compound has reduced the burden of water borne illness in children and families.

We now know that a program to provide the anti-helminth medication, albendazole, under the direction of our Chief Medical Officer, Dr. Pierre Tsekeng, has resulted in dramatic improvements in reducing the prevalence and impact of those infections.

It is enormously rewarding to see the scientific

confirmation of our initiatives in addressing these so-called "neglected tropical diseases". I want to thank our donors and partners for the continuing support that makes these accomplishments possible.

This summer, working in coordination with our Field Coordinator Sylvain Fouleack and leaders of our village health committees, our team began conversations with an NGO in Dschang (PIPAD MINGA) with a goal of introducing new sanitation technology in the villages and improving nutrition for children and families. You will be hearing more about this in the coming year.

I hope you will read the wonderful reflection "*Walking in Bawa*" (page 3) by BHI volunteer and Board member Jeanette Gross, R.N. and the reflections written by Maggie and Emma Richardson (page 2). Traveling to Bawa can be truly life changing at any age, but it is an unforgettable experience to see children your own age and younger who are chronically hungry. Yet, we also discover those things we share in common - music, dance, love of family - and hope for the future.

*Margaret Jay*  
President of BHI

<sup>\*</sup> Dennis Richardson, Ph.D. et. al., "*Prevalence of Waterborne Protozoan Parasites in Two Rural Villages in the West Province of Cameroon.*" **Comparative Parasitology**, 78 (1):180-184. 2011

Dennis Richardson, Ph.D. et. al., "*Geohelminth Infection in Rural Cameroonian Villages.*" **Comparative Parasitology**, 78 (1) : 161-179. 2011

## You can make a difference in the fight against malaria Support BHI's 2011 ITN (Insecticide Treated Nets) Campaign



2011 is looking like a good year... *for mosquitoes* ... and that is not good news for families in the villages of Bawa, Nloh, Ntah, and their neighbors in the West Province of Cameroon. Malaria is a serious, life threatening illness that affects everyone, but is most deadly for young children and pregnant women. The bed nets provided to families in 2006 and 2007 (over 600) now need to be replaced. The new bed

nets currently available will last longer (approximately 7 years) and do not need to be re-treated (the insecticide is incorporated into the fibers of the net material).

Earlier this month, we received an urgent appeal through our Field Coordinator in Cameroon, M. Sylvain Fouleack to move quickly to begin replacing the current nets. We need your help and support.

*With a gift of just \$10.00, you can provide a new insecticide treated net and save the life of a child.*

## Reflections on the Summer 2010 Experience from our Youngest Volunteers

### Maggie Richardson

*"After my work was done in the morning, when I wasn't sick, I'd help out around the mud-brick house. There was always food to prepare, and trying to prepare and eat it when there weren't hungry little children around to make me feel guilty when I did. I also cleaned a lot and fetched water from the little water hole about 1/4 a mile away. And then I carried the heavy bucket back up the hill with help from 1 of my sisters. The kids living there would put it on their heads then carry it up. Once I got back to the compound I would filter as much water as I could. As it was getting dark, I would head back up to the tent, either excited to play games for the rest of the night with my family, or exhausted, and was asleep on my cot by 8 o'clock."*



Maggie, Elsa, Nidele, baby Kristen at the work site

### Emma Richardson

*"My experience with the village children was unforgettable. On our first day in the village, they watched us pretty much every second. I noticed that they*

*were skinny and their clothes were torn, they probably don't eat that often. During the next few days they stayed at our compound, watching us eat and begging for some food. After a while only a few kids stayed at the compound. There was Elsa (shown in picture), a playful and active three-year-old, Nidele, a seven-year-old who watched over her little sisters, Kristen, a one-year-old baby named after my mom, and Roger (silent "r"), a thirteen-year-old boy who is a hard worker (and a good soccer player). All of them were part of Gilbert's family. One day when I was coming back from the water hole with them I started marching in a funny way to make them laugh. They did, but not because of me but because of little Elsa mimicking me. I changed the way I marched, and Elsa did too. We stopped for a moment, looked at each other, and then I started to dance. It turns out Elsa is a very good dancer."*



Brisien, Nidele, Elsa and Emma doing the chicken dance

**Upcoming Event**

### Bawa Benefit Concert

featuring the

**Connecticut Doctors' Orchestra \***

**Sunday March 27, 3 p.m.**

**Ethel Walker School Chapel**

230 Bushy Hill Road  
Simsbury, Connecticut

a reception will follow in the  
**Beaver Brook Living Room**

\*The **Connecticut Doctors' Orchestra (CDO)**, is a group of health care and medical science professionals who love and share music with the community. Its members are physicians, psychologists, nurses, biomedical scientists, and medical students making it one of the nation's few string orchestras whose musicians work in the health field. The mission of the CDO is to provide excellent musical experiences and fellowship for its members, to contribute culturally to the community, and to help publicize and facilitate contributions to medically related charities through our concerts.

*Concert donations will benefit the work of the Bawa Health Initiative*

## *“Walking in Bawa” ... Jeanette Gross, R.N.*



*“Before my first trip to Bawa, I tried to prepare for traveling to this sub-Saharan country and living there for six weeks. Tent, sleeping bag, anti-bug shirts and pants, toiletries— all went into my big back pack. But my most reassuring purchase was a pair of sturdy, light boots, guaranteed to handle any terrain and any ground conditions.*

*My first arrival in Cameroon was not quite according to our plans., as a group of 4 of us were to arrive together, led by Dennis Richardson who had been to Bawa before. Due to a travel agent mistake and a cancelled flight, I found out at 2 am, alone in Zurich, that not only was that leg of the trip to be on my own, but also the last leg of the trip would also be solo. So I arrived by myself in the airport at Yaounde’, Cameroon, with little sleep, negligible French, and no idea of what would happen next.*

*I was warmly greeted and my hosts took me right away to the house of one of the BHI Cameroon members. I thought I was pretty well prepared, even down to my boots! What I wasn’t prepared for was the packed clay, wet and slippery underfoot. And this was the capital, a large city, not even the countryside yet! Nor was I prepared for the hourly rainfalls and the gullies, the uneven pathways and the absence of clear walking paths.*

*My footsteps were uncertain as I tried to navigate this slippery ground, and I fell into a gully running with rainwater. My hosts immediately helped me up and helped me clean off the mud, but this was not the introduction to Cameroon that I had imagined!*

*My companions arrived a few days later and we made our way to Bawa, high up in the mountains. Finally, we arrived in the village and began to set up our tents, unpack our gear and meet the villagers.*

*Walking around Bawa, however, turned out to be a persistent problem. The slippery clay and wet mud was everywhere, and caked our boots from the first few minutes. We needed to walk from one compound to another, on narrow paths and rutted “roads” which barely supported any kind of vehicle. To make matters worse, there were steep uphill climbs through much of*

*our territory, and of course equally steep and slippery downhill. I counted on my trusty boots, but they couldn’t teach me how to walk in this environment so far from home.*

*Walking with the villagers finally paid off, though – not just in information about the villager’s health and health practices, but in something that affected me much more directly at the time. Keeping company with Louise, I finally learned how to walk!*

*Louise was my guide. An open, friendly person on the Village Health Committee, she had grown up in Bawa and raised five children there along with her husband. On a subsequent trip, she quietly came to help me with taking heights and weights and drawing blood for hemoglobin, and she was dressed in black. Her husband had died sometime between our trips, but we didn’t have enough common language to determine exactly when and what he had died from. At a village dance, when I asked through gesture if she would dance, she indicated her mourning clothes and shook her head – widows do not dance for a year after the death of their husbands.*

*But on that very first trip, Louise steadied me, walked alongside me, and by imitating her digging her heels into the ground, I finally learned how to walk in Bawa. Many times I slowed down to let her get ahead of me, and without her noticing, I literally walked in her footsteps. From that time on, I was a pro, getting around as quickly as any of the villagers who grew up knowing how to walk and run in that slippery, sticky mud.*

*I guess the moral of the story was that I can buy the best boots here, and take them wherever I want to. But to know how to walk in another country, I had to meet the people who live there, and get to know them, and I had to literally walk in their footsteps before I could walk alongside them. We had much to teach each other. Today, my boots sit in the hall closet, waiting for my next trip to Bawa. Although I cleaned them when I got home, there are traces of Bawa mud in the treads and I think I’ll leave them there.*



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**Our Mission:** The Bawa Health Initiative (BHI) is a non-profit 501c (3) organization founded in 2005 by Dennis Richardson, Ph.D. and Blaise Dondji, Ph.D. (a native of Bawa). Our mission is to improve the health of children and families in Bawa and surrounding villages in Cameroon, West Africa by addressing vital public health issues - safe water, malaria, HIV/AIDS, parasite infection treatment, health and hygiene education, recruitment and training of Village Health Committees (VHC) and socio-economic improvements - and by building, equipping, and staffing a **Primary Health Clinic** and **Health Education Resource Center**.

## Building a Healthy Future Together Health Clinic Construction Update



### Phases One and Two: Completed in 2010!

With the generous support of donors and partners, the Bawa Health Initiative completed the site preparation and construction of the foundation footings for the three buildings of the BHI Health Center Campus — a **Primary Health Clinic**, **Nurse's Residence** and a **Health Education and Resource Center** on land donated by the village.



### Phase Three: Let's Get Started Putting Up Walls!

Our next step is to begin and complete the construction of the walls and roof for the main clinic building. The Primary Health Clinic, when completed, will provide accessible maternal and child health services, general health care and will provide a facility for Cameroonian doctors and nurses as well as medical volunteers from abroad to offer medical services not currently provided in Bawa or the surrounding rural villages, such as dental and vision care.



Construction Estimate (February 2011)

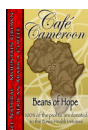
**Primary Health Clinic: \$50,580.** (walls and roof)

**Your help is needed ... your gift to BHI will make a difference!**

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## A Thank You... to Café Cameroon

In December, BHI received a check for \$2,500 from the Quinnipiac University Chapter of SIFE (Students in Free Enterprise). The SIFE students have formed a non-profit—Café Cameroon—and are working with Dean's Beans to market coffee and chocolate products. They have committed to donate **100% of the profits** to the Bawa Health Initiative to support public health projects and construction of the *Primary Health Center* in the village.



*Brew These Beans of Hope and Help Save Lives*

[www.cafecameroon.com](http://www.cafecameroon.com)



Check presented to BHI Co-Founder, Dennis Richardson, Ph.D. and BHI President Margaret Jay