



Health Education and Wellness Rotarian Action Group (HEWRAG)

Rotarians Working Together To Improve World Health

Volume 5, Issue 2 – May 2019

www.hewrag.org hewrag@gmail.com facebook.com/HEWRAG

Newsletter Editors and HEWRAG Co-Chairs: Jane Little and Sheila Hurst

Greetings!

As this Rotary year comes to an end, we are happy to report that 2018-2019 has again led to exciting and productive achievements for the Health Education and Wellness Rotarian Action Group. We send sincere appreciation to members, colleagues, and friends for their involvement, dedication, suggestions, and support. We look forward to 2019-2020 offering opportunities for even greater collaboration, accomplishment, and service.

**We extend a special invitation to join
HEWRAG’s activities and events at the 2019 Convention in Hamburg!**



	June	HEWRAG Event	Time/Place
Health Education and Wellness Rotarian Action Group in Hamburg Rotarians Working Together To Improve World Health Facebook.com/hewrag hewrag@gmail.com hewrag.org	Sat. thru Wed.	HEWRAG Booth 4543	House of Friendship
	Monday, 3	Annual Meeting	14:30 – 16:00 Osaka 2 & 3
	Tuesday, 4	Cervical Cancer Prevention Forum	12:30 – 14:00 Shanghai
	Tuesday, 4	TB Awareness and Prevention	14:30 – 15:30 Osaka 2 & 3
	Tuesday, 4	Autism Awareness and Empowerment	16:00 – 17:00 Osaka 2 & 3

May 2019

- Stop by HEWRAG's **Booth #4543** for membership materials, information about projects and programs, stimulating conversations, and new and creative ideas
- Hear about HEWRAG's recent activities, upcoming projects, and planned events at the **Annual General Meeting**: Monday, June 3, 14:30-16:00, Osaka 2 & 3
- Attend HEWRAG Special Sessions to meet experts and to learn about
 - **Cervical Cancer Prevention**: Tuesday, June 4, 12:30 – 14:00, Shanghai
 - **TB Awareness and Prevention**: Tuesday, June 4, 14:30 – 15:30, Osaka 2 & 3
 - **Autism Awareness and Empowerment**: Tuesday, June 4, 16:00 – 17:00, Osaka 2 & 3
- Discover **The Power of Fellowships and Rotarian Action Groups**: Wednesday, June 5, 14:30 – 16:00, Hall A1, Room A102

In that regard, members of Rotarian Action Groups have an opportunity to enhance the impact of Rotary's humanitarian work by helping District International Service Chairs (DISCs) to identify and encourage clubs to use local experts experienced in project planning/implementation, Rotary's grants, and areas of focus. These regional teams of experts are known as **District Resource Networks**. HEWRAG members are encouraged to contact their District International Service Chair to identify their expertise, skills, and affiliation with the Health Education and Wellness Rotarian Action Group. If you do not see a DISC listed in your district directory, you might contact your district governor and ask to be added to your District's Resource Network. With questions, please contact actiongroups@rotary.org.

We also offer additional suggestions for connecting with HEWRAG:

Would you like a HEWRAG program or exhibit about one or all of our areas of emphasis for your District Conference, Zone Institute, or another Rotary event? HEWRAG has created a team of speakers to discuss Health Fairs & Medical Missions, Oral Health & Nutrition, Cervical Cancer Prevention, Tuberculosis, and Autism.

Are you affiliated with a corporate entity? HEWRAG will be pleased to consider partnerships with corporate supporters relative to our areas of emphasis or to other areas related to public health.

We hope to see you at the Convention in Hamburg!

With warm regards,

Jane Little and Sheila Hurst

The Health Education and Wellness Rotarian Action Group operates in accordance with Rotary International policy but is not an agency of or controlled by Rotary International.



Health Education and Wellness
Rotarian Action Group

**HEWRAG
CERVICAL CANCER PREVENTION FORUM
TUESDAY, JUNE 4, 2019
12:30 TO 2:00 PM IN THE SHANGHAI ROOM**



PRESENTERS

Karl Diekman, Moderator	Ms. Meenu Anand	Dr. Richard Godfrey	Mr. Jayanta Chatterji	Ms. Susan Keese	Dr. Rajindar Singh
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Cervical Cancer Prevention is getting a firm footing in Rotary as evidenced by such activities as a presentation about a nationwide project in Sri Lanka by PRIP Ravi Ravindran at the International Assembly in San Diego and numerous global grant projects. We intend to do our part to continue to advance Rotarians' interest in Cervical Cancer Prevention using this Forum as a vehicle to educate and inform Rotarians about up to date prevention strategies. Learn from experts how to design and implement projects ranging from the simple to the complex. Walk through the process of designing, implementing, and evaluating impactful Cervical Cancer Prevention projects appropriate for the community you serve.



May 2019

HEWRAG SPECIAL SESSION ON TUBERCULOSIS AWARENESS AND PREVENTION

TUESDAY, JUNE 4, 2019
2:30 TO 3:30 OSAKA ROOM 2&3

Rotary HAMBURG GERMANY
INTERNATIONAL CONVENTION 1-5 JUNE 2019

stop TB

TB A GLOBAL CONCERN

IT'S TIME TO BRING **TB** OUT OF THE SHADOWS

CO-CHAIRS
SHEILA HURST PEG JANE LITTLE

HEWRAG SPECIAL SESSION ON TUBERCULOSIS
AWARENESS & PREVENTION

SAVE THE DATE
ROTARY CONVENTION

TUESDAY JUNE 4TH
2:30 PM TO 3:30 PM
OSAKA 2 & 3 ROOM

PRESENTERS

DR. PAULA I. FUJIWARA
SCIENTIFIC DIRECTOR
INTERNATIONAL UNION FOR
TUBERCULOSIS & LUNG DISEASES

PAST RI DIRECTOR Y.P. DAS
CHAIR ROTARY INDIA
NATIONAL TB COMMITTEE

The Health Education and Wellness Rotarian Action Group (HEWRAG) has chosen to add Tuberculosis as an area of emphasis. At the 2019 Hamburg Convention, HEWRAG will be conducting a special session to inform and sensitise Rotarians from all over the world that TB, which is preventable and curable, continues to be responsible for taking the life of an individual every three minutes around the globe. The World Health Organization has set a target of 2030 for a TB FREE WORLD.

Presenters Dr. Paula Fujiwara, Scientific Director for the International Union on Tuberculosis & Lung Disease, and **Yash Dal Pas**, Past Rotary International Director who serves as the chair of the Rotary India National TB Control & Awareness Committee and is a HEWRAG Director, will describe how Rotarians can dovetail their efforts for a TB FREE WORLD.



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May 2019

HEWRAG SPECIAL SESSION ON AUTISM AWARENESS AND EMPOWERMENT

TUESDAY, JUNE 4, 2019
4:00 TO 5:00 OSAKA ROOM 2&3

Rotary
Health Education and Wellness
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Sheila Hurst
Co-Chair

PDG Jane Little
Co-Chair

HEWRAG Special Session
Autism Awareness and Empowerment

PDG Miguel A. Martínez Pereyra
HEWRAG Director

SAVE THE DATE!
ROTARY CONVENTION

Tuesday June 4th
4.00 pm:5.00 pm
Osaka 2 & 3 Room

PANELISTS

Ricardo Saldaña Jorge Del Hoyo Luis Aguilar GD Horacio Mollo PDG Richard Clarke

Rotary
HAMBURG, GERMANY
1-5 JUNE 2019

An expert panel will discuss the importance of being involved in autism and describe how Rotary Clubs and HEWRAG can help. Suggestions include establishing an Autism Center in a country of each continent, extending professional attention to adults in addition to children and adolescents, and strengthening the delivery of material kits and the operations of the Service Center in Argentina. Information about Apadea material, the "Autistic Parent Association," and details of Rotary action there will be shared.

The World Health Organization has challenged member states to support individuals and families with autism spectrum disorders and other developmental disorders by supporting research and campaigns that raise public awareness and remove stigmatization, by increasing the capacity of health and social care systems, and by providing services. Rotarians can do much in a variety of ways to help their communities address these challenges and to help affected families and individuals. Let's get engaged.



Health Education and Wellness
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FEATURED ARTICLES

It's Time To Bring TB Out of the Shadows

Yash Pal Das

Rotary International Director 2011-2013

Rotary Club of Ambala, District 3080, India

Director, Health Education and Wellness Rotarian Action Group

Chair, Rotary India National TB Committee

Prevention of Cervical Cancer Through Creation of Awareness and HPV Vaccination of Adolescent Girls in Rural Bengal: A Rotary Initiative with Chittaranjan National Cancer Institute (CNCI)

Jayanta Chatterji

Rotary Club of Calcutta Metropolitan, District 3291, India

District Rotary Foundation Committee Chair (2016-19)

We have the vaccine, so now what?

John J. Donnelly, Ph.D.

President, Rotary Club of Orinda, District 5160, California, USA

Principal, Vaccinology Consulting LLC

Strengthening Of Palliative Care in South Africa

James Crowell, Chair International Service

Rotary Club of Rosebank, Johannesburg, District 9400, South Africa

Dr. Mpho Ratshikana-Moloto, Director of Centre of Excellence for Palliative Care.

GG1531461 Palliative Care programme "Bophelo" (Sesotho for "Here is Life")

The Kenya Dental Association, the Wrigley Company Foundation, and Kenya Smiles

HEWRAG at the 94th District 9212 Conference and Assembly in Mombasa, Kenya

A Rotarian Action Group is an autonomous group of Rotarians, family members, and Rotaractors who are experts in a particular field, such as health services, microcredit, or water and sanitation. Group members share their expertise by collaborating with Clubs and Districts on service projects. The goal of the Health Education and Wellness Rotarian Action Group is to promote good health and wellness through healthy lifestyle choices and disease prevention. This Rotarian Action Group operates in accordance with Rotary International policy but is not an agency of or controlled by Rotary International.



Rotary

Health Education and Wellness
Rotarian Action Group

It's Time To Bring TB Out of the Shadows

Yash Pal Das

Rotary International Director 2011-2013

Rotary Club of Ambala, District 3080, India

Director, Health Education and Wellness Rotarian Action Group

Chair, Rotary India National TB Committee

Despite the fact that Tuberculosis can be treated, prevented, and cured, it is afflicting 10 million individuals each year and killing 1.6 million. Unfortunately it has been the world's most neglected health crisis. **The time has come to bring TB out of the shadows.** The first ever United Nations High Level meeting on Tuberculosis in September 2018 brought about the much needed political commitment to address various issues on this long neglected disease.



A child being administered TB medicine under Directly Observed Treatment Centre in India

Tuberculosis kills more people than any other infectious disease; it disproportionately affects the poor and vulnerable; and drug-resistant strains threaten all of humanity. All of this means the case for prioritising tuberculosis elimination within Universal Health Care reforms is unchallengeable.

India along with Indonesia and Nigeria is amongst the top three countries in the world with the biggest gaps in TB Diagnosis and Treatment. India's effort of targeting to eliminate the disease by 2025 against the World Health Organisation's goal of 2030 has

received commendation by the WHO.

As has been seen in the effort to eliminate Polio, Governments cannot do it alone and need a strong public commitment and partnership with private entities. So will be the case with Tuberculosis. Amongst the several challenges, the biggest is that over 3.6 million people with TB go undetected and put others at great risk for infection.

Tuberculosis has been a poor cousin to other diseases, and it is about time to bring Tuberculosis out of the shadows and address the challenges head on. If we wish to achieve our goal of a TB FREE WORLD by 2030, we need to make the eradication of TB a people's movement. We need to involve the TB survivors in the movement to understand what they have been through and to dispel any stigma attached to the disease.



Awaiting TB Treatment in Swaziland

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People affected by tuberculosis are often among the most poor, marginalised, and stigmatised in their communities, and it is hard to escape the conclusion that the chronic underfunding and underappreciation of tuberculosis are reflections of their social and economic status.



Patients awaiting treatment in the Philippines

It is now time for Rotary clubs to create the awareness about the disease and sensitise their respective communities and encourage them to dovetail their efforts along with that of their respective Governments and local health agencies.

With comments and queries, please write to yashpaldas@yahoo.com

To learn more, join the HEWRAG Special Session on TB Awareness and Prevention coordinated by Yash Pal Das with Dr. Paula I. Fujiwara, Scientific Director, International

Union for Tuberculosis & Lung Diseases on Tuesday 4th June from 14:30 to 15:30 in OSAKA Room 2&3 at the 2019 Hamburg Convention. The Session slides will be online at hewrag.org after the Convention.

Prevention of Cervical Cancer Through Creation of Awareness and HPV Vaccination of Adolescent Girls in Rural Bengal: A Rotary Initiative with Chittaranjan National Cancer Institute (CNCI)

Jayanta Chatterji

Rotary Club of Calcutta Metropolitan, District 3291, India

District Rotary Foundation Committee Chair (2016-19)

India has the highest incidence of cervical cancer in the world with over a hundred thousand women being diagnosed with it every year of which over sixty thousand die annually. India also accounts for a third of cervical cancer related deaths in the world, and although Human Papillomavirus (HPV) Vaccine has been determined as an effective safeguard against cervical cancer, all sorts of speculations, most of them baseless, have stood in the way of its integration into the National Immunisation Programme.

This huge burden of mortality brings absolute devastation to the affected families. HPV vaccine worldwide has been shown to be an effective preventive intervention to bring down the incidence of HPV infection which, when persistent, leads to cervical cancer.

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Hence, by vaccinating the HPV-naive adolescent girls between the age group of 9-14 years with the newly approved two-dose vaccine regimen will definitely address the issue in bringing down the burden of this dreaded disease.



West Bengal, India

Based on the overwhelming evidences on the safety and efficacy of HPV vaccine and following the recommendations from the World Health Organization (WHO), Indian Association of Paediatricians (IAP) and Federation of Obstetric & Gynaecological Societies of India (FOGSI), the HPV vaccine was introduced in the states of New Delhi and Punjab in 2016 as pilot projects. In West Bengal, an initiative taken by the Department of Gynaecological Oncology, Chittaranjan National Cancer Institute (CNCI), 555 girls between 9-14 years have already received their first round of HPV vaccine.

By establishing the evidences from pilot projects, HPV vaccination may therefore represent an efficiency saving, making programmes more sustainable within the context of a comprehensive approach to cervical cancer prevention and control as developed by the WHO. Based on the study, effective public health surveillance can be built up by continuous, systematic collection, analysis, and interpretation of health-related data needed for the planning, implementation, and evaluation of vaccination practices. Collection, analysis, and interpretation of surveillance data is vital to guide vaccination policies and programs and to ensure that immunization targets are being reached. Such surveillance can also serve as an early warning system for any unexpected adverse events and long-term complications of new vaccines.



The Project Team at the Chittaranjan National Cancer Institute in Kolkata, India

It was with this pressing and identified need of the community that Rotary International District 3291 embarked upon a project under a Rotary Global Grant that will address the specific need to bring down the incidence of cervical cancer through awareness and prevention of cervical cancer through HPV vaccination on 1000 girls between the ages of 9 to 14 years in partnership with the Rotary Club of Salt Lake City in Utah, RI District 5420. Chittaranjan National Cancer Institute, a Government of India Undertaking, which has vast knowledge and experience in the field of cervical cancer, is the Cooperating organisation in the project. Cervarix, a bivalent vaccine which covers two strains of the virus, has been chosen as the HPV vaccine for this project under the advice of experts.

This project is also Rotary International's maiden venture on cervical cancer in Eastern India under a Global Grant.

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HPV vaccines to prevent cervical cancer and other HPV related cancers have been introduced in the National Immunization Programs in more than 80 countries of the world except India. The vaccines have been consistently found to have more than 90% efficacies against high grade pre-malignant conditions caused by the vaccine targeted HPV types (HPV 16 and 18) in the HPV naïve population with cross-protective efficacies against the non-targeted HPV types.

By vaccinating young girls, we can target the causative Human Papilloma Virus (HPV) of cancer cervix before it is infecting the host cell. This project aims to evaluate the knowledge, safety, acceptability, and coverage of HPV vaccine in rural parts of the West Bengal. The objective of this community based project is to evaluate the feasibility, acceptability, and safety of the two dose HPV vaccination in adolescent girls between 9-14 years.

After the launch of this service delivery project in the presence of the Regional Grant Officer, Rotary Grants Ms. Jennifer Berg of The Rotary Foundation and District Governor Mukul Sinha on 17th March, 2019, a total number of 514 girls between 9-14 years have received their first dose of vaccination till date. HPV vaccines have been administered in girls with excellent response from the community without any side effects. We are planning to recruit the rest of the 486 girls by the end of June to complete the first dose of HPV vaccination. The second dose of vaccination will commence after an interval of six months from the initial dose. The duration of this project is 12 months.



A Girl's Vaccination Camp



Orientation and Awareness Programme in Bagnan

The project has a key role in reaching out to the community where these young girls probably would not have been vaccinated against this preventable disease if it were not available to them at free of cost.

In the future, based on this project and its outcome, effective public health surveillance can be built up by continuous, systematic collection of health related data needed for planning, implementation, and evaluation of vaccine practices long term.

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The main object of this Rotary project is to fulfill the ultimate dream of eradicating this dreaded disease from the face of the earth by establishing the evidences from pilot projects, especially those from the rural parts of the country, and the subsequent dissemination of the collated results and evidences to the concerned authorities in the health sector of the government that will lead to introduction of HPV vaccine in the national immunisation schedule, making programmes more sustainable within the context of a comprehensive approach to cervical cancer prevention and control not only in India but in all countries with a heavy disease burden.



The Project Team at the Launch of GG1872337 at Padmerhat Rural Hospital



Several Project Team members with mothers of some of the beneficiaries

For more information or with questions, please write to jc.rotary@gmail.com

Jayanta Chatterji will be a presenter at the HEWRAG Cervical Cancer Prevention Forum, Tuesday, June 4, 2019, 12:30 to 14:00 in the Shanghai Room at the Rotary International Convention in Hamburg. The Forum slides will be online at hewrag.org after the Convention.

We have the vaccine, so now what?

John J. Donnelly, Ph.D.

President, Rotary Club of Orinda, District 5160, California, USA

Principal, Vaccinology Consulting LLC

The HPV vaccine is a powerful tool to protect women from cervical cancer. However, it can only work if people use it. So how much progress is being made toward the World Health Organization (WHO) goal of having cervical cancer elimination programs in every country by 2030? The HPV Vaccine is now included in national immunization programs in 86 countries including 74 high- and upper-middle income countries, and 12 lower-middle and low-income countries. That means that 97 countries have yet to introduce the HPV vaccine.

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Deployment of the vaccine is being made easier because the manufacturer's original 3 dose schedule has been reduced to 2 doses, and further reduction may be possible. Of 60 countries that collected coverage data after introduction, all achieved more than 50% coverage with two doses in the target age group, 9-13-year-old girls. Even more encouraging is the fact that 50/60 countries achieved 80% coverage or better, the target for national vaccination rates. Sadly, despite spending the highest amount on health care per capita of any country in the world, the USA continues to lag in HPV immunization. In the US, 68% of 14-year-old girls have received at least 1 dose, and only 53% have received the recommended number of doses.

THE HPV VACCINE IS A POWERFUL TOOL TO PROTECT WOMEN FROM CERVICAL CANCER. HOWEVER, IT CAN ONLY WORK IF PEOPLE USE IT.



The HPV vaccine is tremendously important, but immunization is not the only action that is needed. The WHO Guidelines for Prevention and Treatment of Cervical Cancer outline the steps to be taken to drive toward

eradication of cervical cancer worldwide:

- a. **Vaccinate** 9-13 year old girls against HPV.
- b. **Screen** women 30 years of age and older at least once every 10 years by HPV testing, or at least once every 5 years by visual inspection with Acetic Acid (VIA). Women who test positive for precancerous conditions should be treated with cryosurgery or electrocautery.
- c. **Communicate** the need for immunization and screening to a wide audience including adolescents, parents, educators, leaders, and people working at all levels of the health system, to reach women throughout their lives.

The work that Rotarians are doing to make VIA accessible in low resource countries worldwide is essential for the control of cervical cancer and must continue. However this is only one part of the triad of steps recommended by WHO. Continued support and advocacy for immunization and for awareness of cervical cancer prevention, both at home and abroad, are the critical next steps toward the elimination of cervical cancer.

For more information or with comments, please email John.donnely@hotmail.com

Editor's Note:

John J. Donnelly is the Principal of Vaccinology Consulting LLC, which advises companies and NGOs on the discovery and development of novel vaccines. Previously he served as President of Global Healing, an international NGO that provides training programs for physicians, nurses, and laboratory professionals to improve standards of medical care in developing countries. Before joining Global Healing, Dr. Donnelly worked for more than 25 years in vaccine research, development and manufacturing for PATH, Novartis Vaccines, Chiron, and Merck. He also serves as a consultant to the World Health Organization and the Global Alliance for Vaccines and Immunization on matters related to vaccines.



Health Education and Wellness
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Strengthening Of Palliative Care in South Africa

James Crowell, Chair International Service
Rotary Club of Rosebank, Johannesburg, District 9400, South Africa
Dr. Mpho Ratshikana-Moloto, Director of Centre of Excellence for Palliative Care.

GG1531461 Palliative Care programme “Bophelo” (Sesotho for “Here is Life”)
“We are not the dying, We are the living; help us to live until we die.”

An inspirational story of Rotary Clubs from District 9400 (South Africa) and District 1260 (UK) working together with Palliative Care leaders at Chris Hani Baragwanath Academic Hospital, (CHBAH) South Africa, to address the global issue of access to Palliative Care as a human right, as acknowledged by United Nations’ conventions, giving support to the decisions of the 67th World Health Assembly of May 2014, (WHA67.19) for governments to integrate Palliative Care as part of the continuum of care for all patients.



Rotarians visit Chris Hani Hospital: from left to right: Dr. Blanchard, Dr. Teckie, PP Frank Taylor, DG Annie Steijn, President John Symons, Rtn James Crowell, PDG Debbie Hodge

Spirituality is a key component in the practice of palliative care. The Bophelo programme enabled the Centre of Excellence for Palliative Care (CEPC) at CHBAH to advocate for spiritual care inclusion in South Africa’s National Policy Framework and Strategy for Palliative Care and to develop an effective model of public sector provision of palliative care.

The CHBAH Hospital in Soweto is the 3rd largest hospital globally, occupying around 173 acres (0.70 km²) serving a community of 1.3 million people of different ethnic/cultural groups.

The Renal Unit sees an average of 500 patients/month. A holistic interdisciplinary, patient-centric model of care was established to provide palliative care support for end stage renal failure patients who faced death. Patients received a joint consultation with a Professional Nurse, Social Auxiliary Worker, and Spiritual Counsellor. This model was beneficial to patients who gave their history only once to the team who referred to doctors for advice in multidisciplinary meetings, where individual patient issues were discussed.



Past District Governor Debbie Hodge, a specialist in bereavement counseling, provides spiritual care training

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The social interventions involved emotional support, counselling, and health education for patients and families. District 1260 Rotary Clubs donated palliative care syringe drivers. Thirty-three percent (33%) of the patients were HIV infected, where pain was the most common symptom affecting 40% of patients. An important objective was to reduce the need for hospitalization by treating patients with chronic end-stage renal failure in their homes, saving hospital costs. The majority of the team's consultations were in the community, using a vehicle donated by Rotary. A challenge encountered was the distance travelled between patients' homes and lengthy consultations averaging 70 minutes.



Donated vehicle with PP Frank Taylor and President Mukesh Patel, Hatfield Rotary Club



Group of 39 trained volunteers

Spiritual care training and the provision of spiritual but non-religion-specific support to patients and their families was an important component of the programme. The first activity was a five day training course for 39 volunteers lead by a specialist in bereavement counselling, Debbie Hodge, Past District Governor District 1260, who developed the training manuals with Dr. Charmaine Blanchard.

Spiritual care bridges the gap on managing "total pain" which encompasses physical, emotional, social, cultural, and spiritual aspects of pain. The spiritual component of the Bophelo project enabled CHBAH to have a team of trained volunteer spiritual counsellors to provide counselling in hospital wards. Spiritual care provision given to all 2,557 palliative care patients indicated the importance of the spiritual dimension in the palliative care of patients, regardless of culture, religious tradition, or spiritual belief.

South Africa joined a handful of countries by adopting a National Policy on Palliative Care. A historic day for Palliative Care in South Africa and for District 9400 / District 1260 Rotarians. Sustainability is at the heart of Rotary thinking. The Bophelo model of palliative care for public sector provision was adopted. Spiritual care is officially part of providing health care interventions in South Africa. National Spiritual and Chaplaincy guidelines are in the pipeline for further development with CEPC becoming the National Training Centre.

With comments or questions, please write to jcroswel@iafrica.com

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The Kenya Dental Association, the Wrigley Company Foundation, and Kenya Smiles

The Kenya Dental Association (KDA) is committed to public oral health, ethics, science, and professional advancement. Its officers and members were active leaders in the Kenya Smiles Global Grant Project. KDA has recently received a \$140,000 grant from the Wrigley Company Foundation to provide dental care, education, and treatment for 20,000 children aged 6 to 8 years in six of Kenya's 47 counties: Kajiado, Machakos, Meru, Muranga, Nairobi, and Nakuru. KDA representatives estimate that this is the first time that 90% of the children in the program have been seen by a dentist. KDA has completed its work in four counties and expects to finish by August 2018.

The basis of this program was the Kenya Smiles project funded by individual Rotarians and Rotary Clubs; Rotary Districts 9212, 5160, and 6150; and a grant from The Rotary Foundation. To help qualify for the Wrigley grant, KDA referenced its Kenya Smiles experiences to demonstrate its capacity to carry out a large-scale program. The program uses the curriculum and materials from the Kenya Smiles project and the Aseptico mobile operatories funded by the Kenya Smiles Global Grant.

The Wrigley program has two components. During the first week, a team of 18 dental professionals provide education about oral health and preventive care using the Kenya Smiles curriculum (both Swahili and English versions), its materials and props including the tooth model, magnetic Snack board game, and Folkmanis puppets. The team also screens, registers, and documents the oral health of each child. Each child also receives a toothbrush and toothpaste donated by Colgate. After receiving consent letters from parents or guardians, during the second week a team of 10 dentists and five assistants provide treatments for children including cleaning and applying fluoride. If a child has a damaged tooth, the team has options beyond extraction. Using the Aseptico mobile operatories, dentists can fill teeth and provide other dental services.

The Kenya Dental Association is committed to improving the oral health of children in Kenya. The long-term sustainable benefits of the partnership with Rotary and the Kenya Smiles project have enhanced their ability to support this goal.



KDA dentists use Aseptico mobile operatories from the Kenya Smiles Global Grant to care for children's oral health.



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HEWRAG at the 94th District 9212 Conference and Assembly in Mombasa, Kenya



The 94th District 9212 Conference and Assembly (DCA) in Mombasa, Kenya May 2–4 was a wonderfully festive event attended by more than 600 enthusiastic and engaged Rotarians from Kenya, Ethiopia, Eritrea, South Sudan, and other countries. This was a great occasion for Rotarians to celebrate the 2018-2019 year of District Governor Jeff Bamford, to learn and share information, and to install 2019-2020 District Governor Joe Otin.

94 DCA was enhanced by the East Africa Project Fair where Rotary clubs in Eastern Africa offered humanitarian projects for review and funding by international partners. Participating countries were Kenya, Uganda, Tanzania, Eritrea, Ethiopia, South Sudan, Rwanda, and Burundi. Opportunities for learning and fellowship were unlimited.



District Governor Jeff Bamford



District Conference Chair Janet Mathenge

The Heath Education and Wellness Rotary Action Group (HEWRAG), represented by PDG Karl Diekman, PDG Laura Day Young, and Co-Chair Sheila Hurst, was featured at the opening plenary session, at a breakout session, and on a cervical cancer prevention panel.



HEWRAG Director PDG Karl Diekman at the plenary session

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HEWRAG Director PDG Laura Day Young at the plenary session



HEWRAG Co-Chair Sheila Hurst at the plenary session



HEWRAG Breakout Session



Cervical Cancer Prevention Panel



Karl Diekman, Laura Day Young, Jeff Bamford, Purity Mwendwa, Sheila Hurst



A mbuni for the District Governor

District Governor Jeff Bamford is a Director of HEWRAG and was the country chair for Kenya Smiles. Jeff often used Folkmanis puppets in lessons and presentations, so at the Closing Banquet he received a large ostrich (“mbuni” in Swahili) puppet from Folkmanis.

Photos courtesy of Sanjiv Soni - Aqua Tronics - Photographer based in Nairobi, Kenya providing videography / cinematic clips / photography @sanjivsonipix



Health Education and Wellness
Rotarian Action Group

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Health Education and Wellness Rotarian Action Group Board of Directors

- Jane Little, Co-Chair, Past District Governor, District 5010 (Alaska, USA and Yukon, Canada)
- Sheila Hurst, Co-Chair, International Service Chair, District 5160 (California, USA)
- Rajendra K. Saboo, Rotary International President, 1991-92, District 3080 (India)
- Yash Pal Das, Past Rotary International Director, District 3080 (India)
- Karl Diekman, Past District Governor, District 5160 (California, USA)
- Laura Day Young, Past District Governor, District 5160 (California, USA)
- Miguel A. Martinez Pereyra, Past District Governor, District 4890 (Argentina)
- Jeffery C. Bamford, District Governor, District 9212 (Kenya)
- Will Files, World Health Fairs Founder, District 5010 (Alaska, USA and Yukon, Canada)
- Karen Kankkunen, District 9630 (Australia)
- Kathryn Ann Hester, Past President, Rotary Club of Logan, District 9630 (Australia)

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- Clifford L. Dochterman, Rotary International President, 1992-93, District 5160 (California, USA)
- Richard D. King, Rotary International President, 2001-2002, District 5170 (California, USA)
- Barry Rassin, Rotary International President, 2018-2019, District 7020 (New Providence, Bahamas)
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- Al Jubitz, Rotarian Action Group for Peace, District 5100 (Oregon, USA)
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- James H. Goddard, Rotary Club of Denver, District 5450 (Colorado, USA)
- Michael Mead, Past President, Rotary Club of Balgowlah, District 9285 (Australia)
- Bruce Mills, Past President, Rotary Club of Logan, District 9630 (Australia)
- Dr. Rita Kalra, Past President, Rotary Club of Midtown Chandigarh, District 3080, (India)
- Dr. Sanjay Kalra, Rotary Club of Midtown Chandigarh, District 3080, (India)
- Chinelo Ude Akpeh, Rotary Club of Onitsha East, District 9142 (Nigeria)



Health Education and Wellness
Rotarian Action Group

May 2019



**The goal of the
Health Education and Wellness Rotarian Action Group
is to promote good health and wellness
through healthy lifestyle choices and disease prevention.**

The emphasis is on building awareness, promoting education, and providing information to help achieve and maintain good health and to utilize effective prevention in an integrated way.

One of the first 10 Rotarian Action Groups formed was World Health Fairs Rotarian Action Group (WHFRAG) which was reorganized, expanded, and renamed in 2014 as the Health Education and Wellness Rotarian Action Group (HEWRAG).

You are encouraged to share this Newsletter with your friends and family, other Rotarians, Rotaractors, Interactors, colleagues, business associates, and those you think might find it interesting and/or beneficial. All issues are available online at hewrag.org/publications.

Comments and suggestions about HEWRAG and this Newsletter are welcome. With questions or for more information, please write to hewrag@gmail.com.

Readers are invited to submit an article about Health Education and/or Wellness projects and programs for consideration in a future issue. General guidelines:

- an article of up to 400 words (500 words maximum) and
- 2 or 3 high-resolution .jpg images (each a minimum of 1 MB to a maximum of 3 MB) with captions.

The next issue of this Newsletter will be published in September 2019.

To submit an article about Health Education and/or Wellness for consideration in the September issue, please write to hewrag@gmail.com by August 10, 2019.

To request adding someone to the mailing list, please send contact information including Rotary affiliation and e-mail address to hewrag@gmail.com.

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