



Health Education and Wellness Rotarian Action Group (HEWRAG)

Rotarians Working Together To Improve World Health

Volume 2, Issue 1 – February 2016

www.hewrag.org hewrag@gmail.com

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

Greetings!

It has been one year since we established this newsletter as a means of informing Rotarians around the world about the activities and resources available through HEWRAG. The newsletter has also helped to strengthen HEWRAG's ability to serve, because each article tells a story about a learning opportunity that expands our capabilities.

In the upcoming 100th Anniversary Year of The Rotary Foundation, the Rotary world will learn that Rotary is serious about making its projects more meaningful and longer lasting. HEWRAG has been working hard during the past year to meet this challenge by carefully defining its portfolio of services and by developing tools and strategies to improve the quality of projects.

Today, our areas of emphasis are built around Health Fairs and Medical Missions, Oral Health and Nutrition, and Cervical Cancer Prevention. If you have a project or event in one of these areas, we hope you will look to us as a well-informed and experienced source of support and information. Naturally, we are interested in expanding our portfolio of services, so we stand prepared to address issues related to Health Education and Wellness.

Please use the contact information in this newsletter to let us know how we can help you to achieve your goals and to identify the resources you require.

Upcoming Events:

February 19 to 20, 2016. Rotary International Presidential Conference on Disease Prevention and Treatment, Cannes, France. HEWRAG will be represented at this Presidential Conference. For information, please visit www.rotary-conference-cannes2016.org.

February 2016

March 23 to 31, 2016. Fact-finding trip to China in order to plan the 2017 China Medical Mission. HEWRAG will be participating. More information will be provided in the May HEWRAG Newsletter.

April 1 to 3, 2016. District 5160 Conference, Woodland, CA, USA.

HEWRAG will host an exhibit in the House of Friendship featuring HEWRAG's activities and Areas of Emphasis.

April 14 to 16, 2016. District 9212 Conference, Addis Ababa, Ethiopia.

HEWRAG will present the story of the Kenya Smiles Global Grant Project and host an exhibit table featuring HEWRAG's activities and Areas of Emphasis. The presentation will describe how a simple idea of helping children have better oral health became an Oral Health and Nutrition project that continues to serve thousands of children and families throughout Kenya.

May 28 to June 1, 2016: Rotary International Convention in Seoul, South Korea.

This major event will offer numerous opportunities to greet current members of HEWRAG, to welcome new members in various formal and informal conversations and settings, to form collaborations, and to discover opportunities for partnership activities.

HEWRAG Activities at the 2016 Rotary International Convention



**Breakout Session: Monday, May 31, 2016.
13:30 to 15:00.**

"Sustainable Health Education Projects and Community Health Fairs... successful examples from around the world"

**Annual Meeting: Monday, May 31, 2016.
16:30 to 18:00.**

Information Booth in the House of Friendship: Please let us know if you would

like to help in the Booth and/or be involved in other ways.

More specifics will be included in the May 2016 newsletter. We hope to see you at these and other upcoming events and in Seoul!

HEWRAG is currently developing its 3-year calendar, from 2016 to 2019, and slots are available for presentations and displays at District Conferences and other Rotary events and activities. Please write to hewrag@gmail.com for information about how to book HEWRAG for your event.

With Warm Regards,

Co-Chairs Jane Little and Sheila Hurst



Health Education and Wellness
Rotarian Action Group

February 2016

Featured Articles

Disease Prevention and Treatment... Prevention is Better than Cure

Lawrence Okwor, District 9125 Governor 2011-2012
Assistant Regional Rotary Foundation Coordinator, 2012-2013 and 2013-2014
Reach Out To Africa Region 4 Chair and Secretary 2014-2015 to date

Myanmar Medical Mission

Steve Yoshida, District 5010 Governor 1994-95
We Rotary eClub of District 5000

Kenya Smiles: Rotary Foundation Grant And Rotarian Action Groups

Laura L. Day
Rotary Club of Anderson, CA, USA
District 5160 Governor 2012-13, Membership Chair District 5160
Paul Harris Society Chair District 5160, Leadership Academy Chair District 5160

Rotary Ambala Cancer & General Hospital

Yash Pal Das
Rotary International Director 2011-2013
Rotary Club of Ambala, India, District 3080

SPECIAL SECTION: HEWRAG AND CERVICAL CANCER PREVENTION

Health Education and Wellness Rotarian Action Group and Cervical Cancer Prevention – An Area of Emphasis

Global Cervical Cancer Control

Ambassador Sally Cowal
Senior Vice President, Global Health, American Cancer Society

The Potential of Rotary Global Grant Projects

Karl Diekman
Rotary Club of Woodland, CA, USA
Health Education and Wellness Rotarian Action Group
District 5160 Rotary Foundation Chair, District 5160 Governor 2010-2011

“Lady Ganga: Nilza's Story”

Frederic Lumiere
Director/Producer, LADY GANGA

Women Deliver 2016 Conference: Sessions on Cervical Cancer

Jill Sheffield, President and Founder, Women Deliver



Rotary

Health Education and Wellness
Rotarian Action Group

February 2016

Disease Prevention and Treatment... Prevention is Better than Cure

Lawrence Okwor, District 9125 Governor 2011-2012

Assistant Regional Rotary Foundation Coordinator, 2012-2013 and 2013-2014

Reach Out To Africa Region 4 Chair and Secretary 2014-2015 to date



Past District Governor Lawrence Okwor

My sincere appreciation to the leadership of HEWRAG for what I consider a rare privilege to contribute an article on a very important topic. The old and popular adage that 'HEALTH is WEALTH' still holds true in our contemporary world. It is only the healthy that can cater and meet with the needs of his/her dependents. I take this position knowing perfectly well that hundreds of thousands (or probably millions) die regularly from preventable diseases and/or illnesses that need not leave a hole in the pockets of anyone before they could be treated.

A detailed study of disease prevention and treatment easily exposes the backwardness in the field of Medicine in most 3rd world nations. Certainly illnesses that are readily classified as simple cases in the western world due to availability of basic technologies could be a major killer disease in Africa and some parts of Asia.

Disease prevention is a general term for any maneuver intended to minimise the incidence or effects of disease. Disease prevention covers measures not only to prevent the occurrence of disease such as risk factor reduction, but also to arrest its progress and reduce its consequences once established.

There are basically 3 disease prevention types.

1. Primary prevention aims to prevent disease or injury before it ever occurs. This is done by preventing exposures to hazards that causes disease or injury. It prevents onset of disease, e.g., smoking cessation to prevent lung cancer.

2. Secondary prevention aims to reduce the impact of a disease or injury that has already occurred. It involves early detection of disease and reaction aiming to halt progression, e.g., detection of coronary heart disease after a first heart attack.

(continued on the next page)



Rotary

Health Education and Wellness
Rotarian Action Group

February 2016

3. Tertiary prevention aims to soften the impact of an ongoing illness or injury that has lasting effects. It minimises disability from incurable diseases.

Rotary Clubs and Districts should embark on health promotions in the schools, religious gatherings, and public places. Health promotion and disease prevention programs often address social determinants of health which influence modifiable risk behaviors. Social determinants of health are economic, social, cultural, and political conditions in which people are born, grow, and live that affects health status.

Modifiable risk behaviors include, for example

1. Tobacco use
2. Poor eating habits (dieting) and
3. Lack of physical activity (exercising) that contributes to the development of chronic diseases.

The concluding message to the audience should be “**prevention is better than cure.**”

With comments, please write to lawrenceokwor@yahoo.com



Successful Third Annual Myanmar Medical/Dental Mission

Steve Yoshida, District 5010 Governor 1994-95
We Rotary eClub of District 5000

After the November elections in Myanmar, the Medical/Dental Mission was cleared to conduct activities from December 30, 2015 through January 7, 2016. Dr. Eddie Lim from Honolulu, Hawaii, led a team of 40 doctors, dentists, health workers, and Rotarians from the United States, the United Kingdom, Nepal, China, Canada, Hong Kong, and Myanmar. *(continued on the next page)*



The Team for the 3rd Annual Myanmar Medical/ Dental Mission



Health Education and Wellness
Rotarian Action Group

February 2016

Once the Team was in Ngapali, approximately 20 local Burmese volunteers joined the Mission to assist the doctors and health workers.



The Burmese local volunteers

More than 3,000 patients were seen, and they received much needed medical and dental treatment and health information. Ophthalmologist Dr. Simjee from California provided eye exams and treatment. Hundreds of eyeglasses were donated by Kelly and Lt. Colonel Vernon Wheeler of Hawaii. The Anchorage, Alaska Fire Department donated Cardiopulmonary Resuscitation (CPR) kits to the Mission, and Dr. Eddie Lim from Hawaii, Dr. Mie Mie Khine from Ohio, and Dr. Eye Mg Han from Myanmar taught the CPR classes to more than 40 Police, Fire, and Red Cross workers.



While waiting for appointments with doctors and dentists, patients read banners with health information written in Burmese.

The Prosthetic Hands Project was held in Yangon on January 7, 2016 with more than 300 prosthetic hands fitted due to birth defects and industrial accidents. The hands were donated by Ellen Meadows of the Prosthetic Hand Foundation. Since more people are on the waiting list, more hands will be fitted at the 4th Annual Myanmar Medical Mission in 2017. *(continued on the next page)*



Health Education and Wellness
Rotarian Action Group

February 2016



The Anchorage, Alaska Fire Department provided CPR kits for training 40 Police, Firefighters, and Red Cross workers in Myanmar.



Lt. Col. Vernon Wheeler from Hawaii fitted a LN-4 prosthetic hand on a Burmese man.



Edwin Ngoi from Singapore, currently living in China, came to the Myanmar Mission and requested HEWRAG's assistance in planning for a Medical Mission in China. Frank Yih, Rotary Special Representative for China's provisional Rotary Clubs, is the contact in China for this Medical Mission. Frank attended the International Assembly training for District Governors-elect in San Diego in January, and Jane Little, Co-Chair of HEWRAG, was able to meet with him. He named her as the Project Leader, and they made plans for a fact-finding trip from March 23 to 31, 2016 in Chengdu, China.

There will be more information in the HEWRAG May Newsletter regarding the 2017 Medical Missions to Myanmar, China, and Vietnam.

February 2016

Kenya Smiles: Rotary Foundation Grant and Rotarian Action Groups

Laura L. Day

Rotary Club of Anderson, CA, USA

District 5160 Governor 2012-13, Membership Chair District 5160

Paul Harris Society Chair District 5160, Leadership Academy Chair District 5160

We launched in 2011 the Rotary Foundation Global Grant Kenya Smiles. And for those who supported it and funded it, including The Rotary Foundation, the good news is the project continues to make a difference today by improving the oral health and nutritional education of children, and not just in Kenya. To date, about 16,500 people have directly benefitted.

How did this happen? Six years ago The Rotary Foundation realized its vision of a new and improved grant model. What better way to embrace the change than to be a part of it? Thus, was born a project involving all 71 Clubs in District 5160 (Northern Central California, USA), District 6150 (Central and Northeast Arkansas, USA), District 9212 (Kenya, Ethiopia, Eritrea, and South Sudan), and the Rotary Club of Karen-Nairobi.

We were fortunate that *The Rotarian Magazine* in August 2013 and February 2014 as well as breakout sessions at Rotary International Conventions in Sydney, São Paulo, and now Seoul recognized the project for its sustainability, how it brought about awareness, provided information, and promoted education. This helped boost support and interest in the project, thus contributing to its continued success.



Kenya dentists and dental students provided exams and treatment for children using grant-sponsored equipment and supplies.

Kenya Smiles featured one of Rotary's first Vocational Training Teams. A team of dental professionals, some of the best from Kenya, came to Northern California to learn and collaborate with members of the dental profession. And a US team went to Kenya to collaborate, teach, train, and educate.

A big part of the project was getting the oral health and nutritional education to the children in some of

the poorest parts of the country. We took backpacks filled with dental care supplies to thousands of beautiful children in many parts Kenya. *(continued on the next page)*



Health Education and Wellness
Rotarian Action Group

February 2016



Vocational Training Team members, Kenya Rotarians, Rotaractors, and partners delivered oral health lessons and presented backpacks filled with dental supplies, information, and “magic cups” to thousands of children in Kenya.

Our Team also taught local dental students and provided nutritional education for mothers and caregivers. For example, Kenya Smiles’ purchase of a community oven allowed for learning new skills, and now local mothers post an “Open For business” sign at the Nutrition for Life Bakery in Nairobi. In rural villages, hundreds of women know how to grow healthy crops and cook on their own energy-efficient “jiko” stoves.



Women in Mukuru kwa Njenga Slum in Nairobi opened the Nutrition for Life Bakery after completing a grant-funded training program and receiving an energy-efficient oven and baking supplies provided by the Global Grant.

(continued on the next page)



Health Education and Wellness
Rotarian Action Group

February 2016

So what happens when the grant dollars are spent and a successful project might seem to have come to an end?

Well, a sustainable project does not end. And our timing was good because Rotary embraced the concept of Rotarian Action Groups, and Kenya Smiles found a friend in the well-established World Health Fairs Rotarian Action Group (WHFRAG). Kenya Smiles and WHFRAG merged to create the Health Education and Wellness Rotarian Action Group (HEWRAG). Its goal is to educate and to help bring good health and wellness to people everywhere, not just Kenya.



The Kenya Smiles Project has improved the oral health and nutrition of thousands of children and adults throughout Kenya.

Briefly, what is a RAG? These are communities of Rotarians and other interested parties who provide resources, conduct projects, fundraise, and provide connections and collaborations. All of it allowing Rotarians to do more in the areas that interest them. Because, as we learned from Kenya Smiles, finding the solutions to big problems does not come easy.

With questions, please write to lauradayrotary@gmail.com



Rotary Ambala Cancer & General Hospital

Yash Pal Das

Rotary International Director 2011-2013

Rotary Club of Ambala, India, District 3080

In a developing nation and particularly in a small town, health care has always been a challenge, especially when it comes to detecting and treating diseases like cancer.

The Rotary Club of Ambala, India, following the Rotary Motto of "Service Above Self," in 2003 embarked upon a project to provide palliative care to terminally ill cancer patients without any cost to them. Through this project the club was able to mitigate the agony and pain of several individuals including their families. Gradually the Palliative Care Team began to hold health camps particularly for women for early detection of cancer. Several such camps were held over a two-year period reaching out to more than 3000 women. *(continued on the next page)*



Health Education and Wellness
Rotarian Action Group

February 2016

It was in the centennial year of Rotary (2005) that the Club decided to take up a project that would fulfill the needs of the community and provide a lasting impact. The idea of providing a Cancer Detection and General Hospital was the general consensus of the members of the Club. The members had no idea as to what cost it would involve but were determined in their cause to do good in the community.

Each and every member of the Club was approached to contribute for the hospital. It took several months to accomplish the task of raising money and seeking commitments for three years. The response was overwhelming, and soon the construction began in phases. Several challenges were encountered and overcome, and finally the hospital took shape and became operational in January 2010.



Members of Ambala Rotary at work during the hospital construction

The total donations received as of 2014 are US\$2 million. This came mostly from members of the Rotary Club Ambala and also from some who were not Rotarians. Some of the equipment like the mammography machine and cardiac catheterization laboratory was installed with the aid of a global grant by The Rotary Foundation. There were other districts that partnered in the global grant. *(continued on the next page)*



Rotary Ambala Cancer & General Hospital



Health Education and Wellness
Rotarian Action Group

February 2016

Today the Hospital is providing high quality healthcare at low cost to every economic section of the society. The Hospital serves the 300,000 strong community in Ambala and about 50,000 strong community surrounding Ambala.

It is a 100-bedded hospital with the following facilities:

- General Medicine
- General surgery
- Orthopaedics
- Ear, Nose, and Throat
- Radiology
- Physiotherapy
- Critical Care
- Urology & Kidney
- Oncology
- Neurosurgery
- Dermatology
- Interventional Cardiology



The Hospital's cardiac catheterization laboratory

The Hospital has an Out Patient Daily (OPD) of 250 to 300 patients. It is totally managed and operated by the Rotarians of the Ambala Club.



Patients wait in the spacious reception area at the hospital.

Truly the Hospital is a blessing and a gift to the community of Ambala and its surrounding area.

For further information or with questions, please write to the author at yashpaldas@yahoo.com.



Health Education and Wellness
Rotarian Action Group

February 2016

SPECIAL SECTION: HEWRAG AND CERVICAL CANCER PREVENTION

Health Education and Wellness Rotarian Action Group and Cervical Cancer Prevention

In the summer of 2015, HEWRAG leadership was approached by General Secretary John Hewko and asked to meet with the American Cancer Society (ACS) to determine the feasibility of HEWRAG and ACS working together on the global problem of Cervical Cancer.

What is the problem?

The global burden of cervical cancer is high and inequitable, especially in developing countries (defined low- or low-middle income by the World Bank).

- ▶▶ An estimated 528,000 women get cervical cancer each year, and 266,000 die. 85% of these women are in developing countries.
- ▶▶ By 2030, the number of cervical cancer cases globally will be more than double the number of deaths from pregnancy-related complications.
- ▶▶ The global cost of cervical cancer was \$2.7 billion per year in 2010. This will rise to \$4.7 billion by 2030.

Why take action?

Cervical Cancer is a preventable cancer!

What we are doing:

HEWRAG is active in a global alliance of partners that came together in late 2015 to launch the Cervical Cancer Action (CCA) initiative, a five-year effort, “Taking Cervical Cancer Prevention to Scale: Protecting All Women and Girls.” Along with our partners, we are developing resources to tackle the causes of the disease.



We are engaged in a continuous improvement approach to gather information and resources to help Rotarians and Rotary Clubs have the tools and assistance necessary to improve awareness and to treat the causes of the disease in their communities. Today we can help guide Rotarians and others develop an understanding of how to identify the degree of the problem in their local community and assist them in designing and implementing projects.



Health Education and Wellness
Rotarian Action Group

February 2016

Global Cervical Cancer Control

Ambassador Sally Cowal

Senior Vice President, Global Health, American Cancer Society

We are at a critical point in the global fight against cervical cancer. It's a disease that disproportionately affects the world's most vulnerable women. It kills many in the prime of their lives, devastating families and their financial futures. Of the estimated 266,000 cervical cancer deaths each year, about 85 percent occur in the developing world. India alone accounts for 25 percent of those deaths. Unless we take action, the World Health Organization (WHO) estimates the total number of cervical cancer deaths will rise to 443,000 globally, more than double the anticipated number of deaths from pregnancy-related complications and maternal mortality.

The good news is that, compared to other cancers, cervical cancer is easy and relatively inexpensive to prevent. New prevention options could reduce developing-country cervical cancer deaths to the very low levels currently observed in many industrialized countries. The human papillomavirus, or HPV, is the primary cause of cervical cancer, and vaccines against HPV can protect young adolescents against future infection with the virus. Additionally, new technologies for screening and preventive treatment have been proven to be very effective. This is crucial for the many millions of women who have already been infected and who are at high risk of cervical cancer. Comprehensive implementation of these tools will save hundreds of thousands of lives.

There's no doubt cervical cancer prevention is a smart investment. In fact, the WHO calls cervical cancer screening and preventive treatment a "best buy" in public health. Programs in Africa, Asia, and Latin America have shown that vaccination and screening work in low-resource settings and have the potential for significant and lasting impact, but few have been able to take their programs to scale due to lack of resources. A recent costing study commissioned by the American Cancer Society and performed by the Harvard School of Public Health estimates that \$3.65 billion will be necessary over the next decade to scale up vaccination of girls and screening programs that reach 30-49 year-old women at least once in their lifetimes and treat cervical lesions before they progress to cancer.

In order to scale up prevention, we need additional international and national investments – and your help. **There are three steps you can take to make a big impact:**

1. **Inform national decision-makers about cervical cancer**, especially in countries without national screening and preventive treatment or HPV vaccination. Decision-makers need information to make informed choices about cervical cancer control and to design effective and efficient prevention and control programs. *(continued on the next page)*



Health Education and Wellness
Rotarian Action Group

February 2016

2. **Urge them to allocate resources** for scaling up screening/treatment and introducing HPV vaccine. They may want to explore new financing options, such as through the Global Fund.
3. **Inspire communities to demand prevention services.** Help everyone understand that there is hope for beating cervical cancer. If prevention is available, help families learn how and where to access the services. Consider using social media to spread the word.

Reducing the burden of cervical cancer in developing countries is a matter of equity and human rights. Together, we can ensure that girls and women have access to the vaccination, screening, and preventive treatment that could save their lives.

For more information, please visit www.global.cancer.org and <http://www.cervicalcanceraction.org/initiative/index.php>

With questions, please write to ann.mcmikel@cancer.org.



Cervical Cancer
ACTION

American
Cancer
Society

AVAC
Global Advocacy for HIV Prevention

CANCER
RESEARCH
UK



Grounds
for health

IPPF

PATH



The Potential of Rotary Global Grant Projects

Karl Diekman

Rotary Club of Woodland

Health Education and Wellness Rotarian Action Group

District 5160 Rotary Foundation Chair, District 5160 Governor 2010-11

While we can't identify our patient, I have chosen the name Maria because it is a common name for a woman in Nicaragua, and I want you to feel you know her.

In 2014 when we began developing the Cervical Cancer Prevention Project for Nicaragua, none of the project proponents expected to meet Maria. To the good fortune of many people, we did meet her one morning at the Mantica Clinic in Leon, Nicaragua. *(continued on the next page)*



Health Education and Wellness
Rotarian Action Group

February 2016

We were mid-week in a week-long Vocational Training Team (VTT) project training local clinicians how to examine for and treat the lesions caused by human papillomavirus (HPV) that can lead to cervical cancer. Essentially, we were operating a clinic within a clinic, and patients had been recruited for the specific purpose of receiving cervical examinations.

The Cervical Cancer Prevention Vocational Training Team arriving for a day of work in Leon, NI



Project Director Carol Cruickshank meeting with clinic patients.

On this morning about 80 women were waiting for us when we arrived at the clinic. Maria was among that group of women.

Maria had come to the clinic along with seven other women from her remote village to be examined. Our methodology encouraged patients who had not previously been tested for the human immunodeficiency virus (HIV) to receive that test as a component of the examination process.

Being the good patient that she turned out to be, Maria agreed to be tested for HIV. She was found to be HIV positive. Next she went for her Visual Inspection with Acetic Acid (VIA) cervical examination, and a low-grade precancerous lesion was discovered and subsequently successfully removed. Before Maria's clinic visit was completed, she was seen by a local psychologist and a nurse and scheduled for follow-up the next morning to begin HIV treatment.

What happened then was unexpected and invaluable. Maria went to her seven fellow villagers and shared her experience and outcomes. With her encouragement, six of the seven women who accompanied her received HIV tests, and all seven received cervical examinations.

(continued on the next page)



Health Education and Wellness
Rotarian Action Group

February 2016

The Cervical Cancer Prevention Project is a Rotary Foundation Global Grant project of the Rotary Club of Woodland, California, USA; the Rotary Club of Leon, Nicaragua; Rotary District 5160; and Preventing Cervical Cancer (PINCC).



Project volunteer Jan Lecklikner doing that part of every day's work that involved sterilizing instruments and restocking supplies.

This project received additional financial support from the Rotary Clubs of Danville, Davis, and Woodland all in District 5160, California, USA, and the nearly 50 volunteer physicians, nurses, teachers, students, and others who were part of the VTT.



Dr. Art Levit, Medical Director teaching a class to clinicians on the day without electricity in Tortuguero, Nicaragua.



Nicaragua, Central America

Thanks to the interventions of this project, Maria received treatment for her cancer-causing lesion and her HIV infection, and barring any unforeseen circumstances, she will lead a normal life.

Certainly, Maria's story will travel through her village and beyond, and many more women will be examined thanks to Maria and the now-trained and certified clinicians in the Mantica Clinic.

For additional information, please contact Past District Governor Karl Diekman at kddiekman@aol.com.



Health Education and Wellness
Rotarian Action Group

February 2016

"Lady Ganga: Nilza's Story"

Frederic Lumiere

Director/Producer, LADY GANGA



Lady Ganga traces the final phase of life for an American woman, Michele Baldwin, who suffers from cervical cancer but decides to harness her remaining energy to go to India and standup paddle 1,000 kilometers down the Ganga River, breaking a world record and as a way of raising awareness of the need for cervical cancer screening and vaccination, a final act of courage that has proved to be extraordinarily effective, prompting at one point in the Himalayas alone 1,700 screenings and 102 surgeries in four days.

"Lady Ganga: Nilza's Story" is a free film to be used as a tool for all around the world to educate and inspire women to protect themselves and their families from HPV related cancers. Visit Ladyganga.org where translated versions of the film in many languages will be added frequently and can be downloaded at no cost in various formats for many uses such as television, cinemas, tablets, smart phones, etc.

Editor's Note: "Lady Ganga: Nilza's Story" can be an excellent program for Rotary meetings, District Conferences, training assemblies, community conversations, Rotaract gatherings, project planning discussions, grant-writing workshops, and other events.



Rotary

Health Education and Wellness
Rotarian Action Group

February 2016

Women Deliver 2016 Conference: Sessions on Cervical Cancer

Jill Sheffield, President and Founder, Women Deliver



The Women Deliver 2016 Conference —taking place in Copenhagen, Denmark from 16-19 May 2016 — will be the largest gathering on girls' and women's health and rights in the last decade. The focus will be on how to implement the United Nations Sustainable Development Goals as they relate to girls and women, covering a wide array of issues, including non-communicable diseases (NCDs).

In line with its NCD efforts, Women Deliver signed on to the Cervical Cancer Action initiative in 2015, publicly committing to

facilitate conversations about cervical cancer and related topics. That commitment will be carried through the 2016 Conference.

High-level sessions are dedicated to the issues surrounding cervical cancer and will be promoting the cervical cancer's inclusion in the global women's health agenda, especially the reproductive, maternal, and adolescent health agenda.

Today we have the opportunity to eradicate cervical cancer, and the Conference is an important moment to rally people from around the globe. To learn more about the Women Deliver 2016 Conference, please visit www.wd2016.org



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.



Health Education and Wellness
Rotarian Action Group



Health Education and Wellness Rotarian Action Group Board of Directors

- Jane Little, Co-Chair, Past District Governor, District 5010 (Alaska, USA)
- Sheila Hurst, Co-Chair, Past Assistant District Governor, District 5160 (California, USA)
- Dr. M.K. Panduranga Setty, Past Rotary International Director, District 3190 (India)
- Steve Yoshida, Past District Governor, District 5000 (Hawaii, USA)
- Karl Diekman, Past District Governor, District 5160 (California, USA)
- Laura Day, Past District Governor, District 5160 (California, USA)
- Josephina Alvarez, Past District Governor, District 4200 (Mexico)
- Jeffery C. Bamford, Past Assistant District Governor, District 9212 (Kenya)
- Will Files, Grants Chair, District 5010 (Alaska, USA)
- Dr. James Green, District 5110 (Oregon, USA)

Health Education and Wellness Rotarian Action Group Advisory Board

- Clifford L. Dochterman, Rotary International President, 1992-93, District 5160 (California, USA)
- Richard D. King, Rotary International President, 2001-2002, District 5170 (California, USA)
- Yash Pal Das, Past Rotary International Director, District 3080 (India)
- Grant Wilkins, Past Rotary International Director, District 5450 (Colorado, USA)
- Phil Silvers, Past Rotary International Director, District 5500 (Arizona, USA)
- Carolyn Jones, Past Trustee, The Rotary Foundation, District 5010 (Alaska, USA and Yukon, Canada)
- Miguel A. Martinez Pereyra, Past District Governor, District 4890, (Argentina)
- Bill Gray, Past District Governor, District 7040 (Canada)
- Bob Warner, Jr., Past District Governor, District 6150 (Arkansas)
- Nadezhda Papp, Past District Governor, District 2220 (Russia)
- Morrison Heth, Past District Governor, District 5450 (Colorado, USA)
- Al Jubitz, Founding Chair, Rotarian Action Group for Peace, District 5100 (Oregon, USA)
- Josie Norfolk, Past President, Rotary Club of Melkbos, District 9350 (South Africa)
- James H. Goddard, Past President, Rotary Club of Denver, District 5450 (Colorado, USA)
- Michael Mead, Past President, Rotary Club of Balgowlah, District 9285 (Australia)

February 2016

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

Special appreciation for the HEWRAG Graphic Design is extended to

Pat Sagan * Creative Business Solutions * patricia.sagan@sbcglobal.net

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

Please share this Newsletter with your friends and family, other Rotarians, Rotactors, Interactors, colleagues, business associates, and those you think might find it interesting or beneficial.

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

The next issue of this Newsletter will be published in May 2016.

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 and 2 or 3 high-resolution .jpg images (each a minimum of 1 MB) with captions.

To submit an article about Health Education and/or Wellness for consideration in the May issue, please write to hewrag@gmail.com by or before April 1, 2016.

www.rotary.org

www.rotary.org/actiongroups

www.rotary.org/fellowships

www.hewrag.org

www.kenyasmls.org

www.9healthfair.org



Health Education and Wellness
Rotarian Action Group