



**May/June 2017**

## Water Projects

SMA N1 Wanokaka (Praikoiki-Wanokaka):

Progress maintained a steady pace through May and culminated with the final socialization and handover of the SMA N1 water project on the 13<sup>th</sup> of June. Simon (Head of Water Project Operations) and Kenny attended the socialization with Cosmos as he presented the final elements and usage of the project. The system works entirely on a gravity fed operation supplying an additional 500 people with access to potable water as well as the High School. The High School along with the staff and school committee have agreed to under take the responsibility of maintaining the well and water project (under technical assistance from the Foundation Water Project Team).



Bali-Loku/Hobajangi:

The final arrangements for the water project at Bali-Loku has been slower than anticipated as there have been unforeseen setbacks in the final stages of implementing the water project. Reports from the communities benefitting from the project reported pipe blockage at the main water source at Lahona preventing the water from reaching the outlying water stations. The project field team is working on replacing the pipes and releasing the blockage. To ensure the success of the project we will re-establish communications between Bali-Loku and Lahona Villages.

Ringurara-Weeratta:

The Water Project team has conducted two socializations for the community beneficiaries of the new water well and water stations. The objective of the socializations is to build community understanding of the implementation of the system and what their role and responsibility will be during the implementation of the system. Before construction of the well commences, there will be a traditional ceremonial blessing performed by the area Rato (priest) Official construction will start from the 1<sup>st</sup> of July and is currently planned to take two month's time to complete.



Weikabono:



The installation of pipes from Watu Ngodu to Kampung Kadoku and Weihola has been completed water from Waikabono well can now flow through to both villages as of the 29<sup>th</sup> June. Regular distribution of water to both villages is still in the trial process as socialization of the community responsibility for supporting the electricity to power the submersible pump is on going. Another meeting is planned with the beneficiaries of the water project for the establishment of a community water committee.

## Nutrition Programs

### School Lunch:



From May we had our opening ceremony with a blessing ritual performed by the area rato, where Danielle Boutros and Ethan Topper cut the opening ribbon on behalf of all the supporters from the fundraiser in San Francisco in October 2016 joined us. We started our distribution as of 8<sup>th</sup> May to 10 schools (Alang, Palamoko, Rajaka, Matenyira A and B, Kadoku, Hobawawi, Pededewatu, Larawatu, Anakaka, and Pantai Rua comprised of over 2500 school children age 7 to 12 years old. We will work with the first 5 schools for the next year and rotate through the previous 5 so as to continue to reach out and help as many children through the surrounding area. Over the course of May and through 17<sup>th</sup> June we will use this opportunity to trial the distribution process to ensure the team and vehicle movement is executed in an efficient and timely fashion. On the 17<sup>th</sup> June, all schools will close for the school year with plans to restart the new school year on the 17<sup>th</sup> July when they will welcome in the new batch of young children going to school for their first time.

### Education:



The Health and Hygiene education program wrapped up for the school year on the 10<sup>th</sup> of June, just before the children went into their exam week. In the weeks before our teachers went through their hand washing practical exercise with the students in each school covered in the education program. The 8 point health and hygiene curriculum covers wellness, illness, infections, diarrhea, malaria, trash, dental hygiene, and body hygiene, and is taught to students in 4<sup>th</sup> and 5<sup>th</sup> grade. At the end of the school year in June, before the national exams, each student takes a recap exam to reinforce the lessons taught over the year.

In conjunction with the School Lunch Team and our Teachers, and through the wonderful support from the Binstadt Family who raised funds in their school by selling Sumba bracelets, we helped them to purchase and distribute sneakers to the children at Larawatu School.



### Malnutrition:

While the Primary Schools were closed during June, we took this opportunity to share with the guests at Nihiwatu a different opportunity to engage with the foundation by taking them out to our Malnutrition sites each week. During this time the school lunch kitchen team helped to prepare high protein meals at each of the sites for the children in the program and their parents/brothers and sisters, giving us the opportunity to teach the parents and children about more expanded nutritional diets. The Malnutrition Project will expand to Tailelu Village in early July and will add 40 new children to the project.

## Health Programs



In May/June we treated a total number of 2,895 patients at our clinics. Below are listed the number of cases treated at each of our 4 clinics during the past 2 months. The busiest clinic was again Hobawawi (1,182) followed by Lamboya Clinic with 841 patients treated. The total number of malaria patients seems to have stabilized at around 60 patients per month with a total 115 for the two months. The rainy season has this year continued for much longer than usual and we do not expect the numbers to drop much more before August/September.

We are now in the process of upgrading our clinic facilities and most of the new equipment and clinic furniture has arrived. Our clinics must be clean and have all the required medical equipment to perform their work. The new equipment includes: nebulizers, glucose and uric acid testing equipment, sterilizing equipment plus filing cabinets and tables. The main repairs of the clinics are in progress and plan to complete all by the end of mid-August, including paint work.

| Clinic                  | Lamboya | Hobawawi | Rajaka | Rua | May/June total |
|-------------------------|---------|----------|--------|-----|----------------|
| <b>Total Patients</b>   | 841     | 1,182    | 595    | 277 | <b>2,895</b>   |
| <b>Malaria patients</b> | 49      | 58       | 3      | 5   | <b>115</b>     |

### General Malaria Control Program:

During the past two months we have continued our malaria intervention efforts on the Watukarere area. Below are the results in number of patients screened and percentages malaria cases found in these locations. As seen below we only found 6 p. falciparum and 6 P. vivax malaria cases among 668 people tested. That is some of the lowest found in such a large population ever for the entire 13 years duration of the malaria control program. We are very happy to see so little malaria is left in that area and we aim to reach the same target for all of our core area. There is still a great need for mosquito nets in the villages hence a need to continue expanding this program. Net-needs surveys and distributions will be done before the next rainy season anticipated in November 2017.



| Mass blood surveys during the month of May |            |               |          |             |                |
|--|------------|---------------|----------|-------------|----------------|
| Village                                    | Pop.       | P. falciparum | P. vivax | P. malariae | Total malaria  |
| Ngudu Ngapa                                | 140        | 0             | 1        | 0           | 1              |
| Tamma                                      | 163        | 0             | 0        | 0           | 0              |
| Kere Kunta                                 | 147        | 0             | 0        | 0           | 0              |
| Luwa Kadu                                  | 32         | 1             | 3        | 0           | 4              |
| Weeli & Nalo                               | 121        | 2             | 2        | 0           | 4              |
| Kerehoba                                   | 48         | 3             | 0        | 0           | 3              |
| Praijing                                   | 17         | 0             | 0        | 0           | 0              |
| <b>Total tested</b>                        | <b>668</b> | <b>6</b>      | <b>6</b> | <b>0</b>    | <b>12 (2%)</b> |

### Mosquito Net Distribution:

We continue the mosquito net distribution program in the Watukarere area and are now at dusun 4. In May and June we distributed a total of 247 family size nets in the villages listed in the adjacent table. Two areas received nets and a total of 112 families received nets during the past month. All of the villages so far tested for malaria have received mosquito nets.

| Village      | Mosquito nets |
|--------------|---------------|
| Ngudu Ngapa  | 57            |
| Tamma        | 41            |
| Kere Kunda   | 63            |
| Luwakadu     | 16            |
| Nalo & Weeli | 54            |
| Lete Kamugla | 4             |
| Kerehoba     | 12            |
| <b>Total</b> | <b>247</b>    |

Net purchase: We are nearly out of mosquito net stock why we have ordered 3,000 family size nets from India. The nets are Deltamethrin impregnated Dawa 2.0 nets and are again family size nets. These nets are polyester nets instead of the stronger polyethylene nets we used to buy from Permanent. Sadly this company no longer exists why we have to buy from Dawa. The nets will be imported via Singapore over the coming two months

### Malaria Training Center:

The months of May and June were very productive for the malaria centers future development and for the many students who graduated. The MOU we signed with the province government meant we got invited to a regional conference for malaria eradication in East Nusa Tenggara and we further worked on finalizing the joint certification program with the provincial government. We also did a joint training program on elephantitis control to further expand out training role for mosquito borne diseases.

### East Sumba MTC Graduates:

21 students from East Sumba graduated in malaria microscopy at the center in the past two months. 12 of these students are past graduates who needed WHO recertification. The students did quite poorly in their pre-exams, illustrating the importance of the retraining and certification. The students were very happy about the training and all returned to their government clinics with new vigor in diagnosis and treatment of malaria in East Sumba. East Sumba has another 45 students lined up for training at the MTC over the coming 6 months. A new group of students from Sumba Barat Daya started the 4 weeks program in mid May.



### Training - Lymphatic Filariasis (Elephantitis) Diagnosis and Control:

The MTC conducted a join training session with the province Health Laboratory and the Central Sumba Health office. This training was focused on the terrible disease Elephantitis that create grotesque limbs, if not treated for a decade or so. This disease is spread by mosquitoes in some areas in Sumba and up to 10% of the population is infected in some hot spots. Fortunately the disease is very hard to transmit and an effective island wide intervention program has been in place for the past year. Still we need to have the diagnostic skills present at all the health centers why this training in night blood sampling and parasite identification is essential. The diagnosis is made by microscopy of blood taken from patients after 9 pm.



### Establishment of Tuberculosis training:



Sumba has a high occurrence of Tuberculosis in all age groups. In November 2016 we signed an MOU with the Province Health Office to develop a field and laboratory based training program for Tuberculosis diagnosis and control for East Nusa Tenggara. We have since then been working with a team of Australian medical Doctors on PowerPoint presentations, microscope slides and other training tools needed for the development of a Tuberculosis training program. A lot of man-hours have

gone into developing microscope slides and 7 different presentations on the epidemiology, disease patterns, diagnosis, prevention and treatment of Tuberculosis. The preparations culminated in a workshop in June where all of the Australian team members came to Sumba and we field tested the program and presentations and made plans for further development of the much needed training program. We visited government clinics and saw how urgently the program is needed and gained essential knowledge on how to fine tune the various project components and planning of field components. We hope to have the first program test run ready by November 2017. Still a lot of work ahead and most importantly we need to develop a lot more high quality TB microscope slides.



### Sumba Eye Program:



During the past 2 months we did the joint annual eye screening with the Australian eye doctors and optometrists. Nefry and Sanny as usual joined the screening program and we set up screening session in Central Sumba and Sumba Barat Daya as well as at our clinics at Hobawawi and Lamboya. The screening sessions were again a huge success and the team screened a total of 817 patients in just 5 days. In particular the screening in Central Sumba was a success and around 60 of the cataract patients were identified here.

During the 2 months Nefry and Sany screened a further 63 patients at our clinics at Hobawawi, Lamboya and Rajaka and identified 5 cases for operation. The books are now full of patients that need operations and the team of eye drs will be back again in Sumba in August to perform all these operations free of charge and in collaboration with eye Drs from the University of Hasannudin in Makassar.

### Mama 2 Mama Program:



Our midwife Ayu is now much more active in screening pregnant women at our clinics and she is joining the government midwives and help screen the prenatal women they follow. Ayu Screened 16 women at Hobawawi clinic, 8 in Lamboya, 9 at Rajaka, 5 at Rua, 5 at Nihiwatu, 4 at Ubu Maleha, 3 in Ringurara, 3 at Watukarere and 4 at Teilelu village. Some of these screening sessions were done with the local midwife for the given area. Our primary aim is to prevent or predict complications and refer to the local hospital when needed plus provide prenatal vitamins and mosquito nets to further help the pregnant women have healthy babies.

In June Ayu and Maa and Ati went to Ubud, Bali for ultrasound training at the Bumi Sehat midwife clinic. The program was lead by the Australian Doctor Dr. Sue Westerway and lasted 1 week and is focused on proper use of the equipment as well as identification of early signs of complications. Again the primary aim is to train our nurses and midwives to spot early problems in pregnancy so maternal and infant mortality can be prevented.



### **Social Media**

Facebook and Instagram:

As of the end of June we have now over 2,050 people following us on Instagram and more people who are reposting and tagging our account and an additional 2,216 people liking our Facebook Page. Facebook still shows a slow pace and Instagram continues its steady climb.

Website Updates:

In June we engaged with Citrus an LA based web-design company who is currently working on an entirely new build for the main Sumba Foundation website. We will look to launch the website in the coming months with a fresh look, new layout and additional updates.

**How you can help:**

We are engaged in one new water project initiated in Weerata-Ringurara (July), and preparing for two new water projects in Bali Loku (Gravity System for SD and SMP schools – Sept) and Weluri Kalla (October), these four projects will cover accessible, potable water distribution for an estimated 3,000 people and include providing water to primary schools, junior high schools, villages and clinics in the respective areas. The total cost for these projects has been calculated at \$50,000 and will change the lives of those benefiting from the projects forever.

We will be running out of mosquito nets within the next 4 months why we will place an order for new nets. We have identified Dawa net 2.0 as the best net type for the coming purchase. We will be looking for much appreciated funding support for another 3,000 nets to cover the coming 12 months period. Each net costs 10\$ to purchase.

If you are interested in more information or would like to make a contribution to help us bring these projects to fruition please [contact us](#) or visit our [website donation page](#).

We are also delighted to share with you a special offer. We have a stock of our Red Sumba Book that do not have the paper cover to match and would like to offer them to all of you. All the books are brand new and in excellent condition. We only ask that you pay the shipping and handling fees (5\$ for shipping within the USA and 50\$ for shipping the book to international destinations). If you would like to make a donation on top of the shipping cost you may do so. Please contact [Kenny@sumbafoundation.org](mailto:Kenny@sumbafoundation.org) for more details.

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# The Sumba Foundation

[www.sumbafoundation.org](http://www.sumbafoundation.org)



## Our Mission

The Sumba Foundation is deeply committed to lessening the consequences of poverty on the island of Sumba. Our aim is to provide humanitarian aid by fostering village-based projects that impact health (including access and malaria control), education, water, and income-generation, while preserving and respecting the fragile culture and traditions of the Sumbanese people.

A large part of the financial support for the foundation comes from guests of the Nihiwatu Resort. With their involvement, we can create small miracles every day.

Contributions to this report provided by: Rainy Octora (Head of Nutrition Projects), Cosmos Biaya (Social and Community Relations), Dr. Claus Bogh (Director of Health Programs) and Kenny Knickerbocker (General Manager)

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