SCOTLAND BACKS ‘FRIEND’ MALAWI

Scotland’s political leader, Jack McConnell has pledged to support Malawi’s education system and “stick with” the country like a friend. Caroline Somanje reports

Scotland’s First Minister will tell the people of Malawi he hopes they will receive the lion’s share of his new International Development budget during his visit to the “warm heart of Africa” in late May.

His government has pledged £3 million for aid projects with an emphasis on Sub-Saharan Africa.

In an exclusive interview with Africawoman in his office at the Scottish Parliament in Edinburgh, McConnell made clear he would like Scottish based NGOs to work on projects in Malawi.

And he talked about his Fresh Talent Initiative – attracting foreign workers to combat population decline and skills shortages in Scotland – which has worried some African journalists, who are concerned that the UK is already recruiting too many Malawi workers.

“We are conscious not to drain the professionals from African countries and people in Scotland will do what they can to support Malawi in building longer term partnerships for as long as Malawi thinks it helpful. We chose Malawi as a relatively small country to which we shall stick and make our pledge consistent. Scotland will help with training.

“We have expertise in medical training that is admired in the development world,” said McConnell. He said he was not going to Malawi with a view that he had all the answers but to listen and offer help where he could.

Scotland’s interest in Malawi dates to the time of the Scottish missionary, David Livingstone who is revered in the country as an icon who fought the slave trade in what used to be known as Nyasaland.

In 2000, Glasgow’s Strathclyde University (where Livingstone was a student) launched the Malawi Millennium Project with Bell College in Hamilton and the University of Malawi. It has helped train teachers and nurses, built and equipped a maternity clinic, provided civil engineering and environmental health expertise as well as aid.

Africawoman co-ordinator Florence Machio from Kenya asked if...
Aluminium cans in Glasgow are being recycled to provide reconditioned bikes for Africa. There’s even a specially designed water bike to help girls forced to carry water for miles. But will the bikes stay in their hands once delivered? Jo Macfarlane from Glasgow’s on the re-cycling challenge

Scots cans bring bikes to Ghana

JIM O’DONNELL: Glaswegian mechanic turned fundraiser and Africa water-bike designer. PHOTO: CHRIS JAMES

edinburgh 2july 2005

MAKEPOVERTYHISTORY

As the leaders of the world’s richest countries gather in Scotland for the G8 summit, join tens of thousands of others in Edinburgh on Saturday 2 July to demand trade justice, debt cancellation, and more and better aid for the world’s poorest countries.


For more information on how to take part visit www.makepovertystory.org.uk

Scotland backs Malawi

FROM PAGE 1

Mr McConnell would appear at Gleneagles wearing the African braided kilt — which was taken to Africa for braiding by James Gillespie’s School, Edinburgh – that she presented to him in the Scottish Parliament.

She told him, “We hear you have been un-lucky with kilts. This special African kilt and sporrans will bring you luck, remind you of Africa and give you the courage to tell G8 leaders to Make Poverty History.”

McConnell — who heads a devolved parliament within the United Kingdom which has no direct control over International Develop-
ment policy and little power to end the mas-
vie brain drain that is plunging Malawi into economic instability, promised to wear the brightly red tartan kilt.

http://www.scotland.gov.uk

Details of Malawi Millennium Project at: www.strath.ac.uk/projects/malawi
Scots businesswoman Ann Gloag ran a bus operation in Malawi, set up hospitals there and in Kenya and donated cash. But her patience with delays, problems and corruption ran out – now she’s donated millions to Mercy Ships. Can this fully equipped floating hospital work when onshore clinics have often failed? Beth Pearson reports.

**Scots woman donates £4m to fund ship-based surgeries**

With Mercy Ships, the figures speak for themselves. The American-based charity has helped more than 5.5 million sick people in its 26-year history. That’s more than the population of Scotland.

It has provided $21m of medical equipment and medicines and visited 53 of the poorest countries in the world. Its hospital ships moor alongside the poorest cities in the world to offer operations for people who wouldn’t get treated by their own governments.

The charity’s goal is to treat a million people a year.

Scotswoman Ann Gloag is one of the charity’s biggest supporters, donating £4m of her fortune from the Stagecoach bus company to buy the third in the Mercy Ships fleet, African Mercy, which is currently being refitted in Newcastle and will help treat 50,000 people every year in Africa.

Highly skilled surgeons from across the globe perform thousands of operations to remove tumours and cataracts, straighten crossed eyes, repair cleft lips and palates, correct fistulas and provide wide range of orthopaedic procedures,” says Gloag. “Mobile medical and dental teams establish field clinics in nearby communities to offer vaccination programmes, dental care and minor operations. Mercy Ships provides these services free of charge.”

**SHIP IS TOWN AFLOAT**

And yet, the charity attracts questions. Is it right to create a floating mini-state without formal responsibility to the governments whose citizens it treats? Or is the efficient, western style operation the only reason Mercy Ships succeeds?

Does religious conviction play a part in the recruitment of volunteers or is the free work performed by world class surgeons sufficient testimony to the spirit behind the project? In 2000, Gloag volunteered onboard the Anastasis while it was moored off Cotonou, Benin. The second richest woman in Britain – the first is the Queen – shared dormitory bunks with the other volunteers and ate the same food.

“All ships are crewed by volunteers, from the Captain to the surgeons to the deck hands,” she says.” Each volunteer pays monthly crew fees for the duration of their time on board, as well as their own airfares. This allows Mercy Ships to make sure the donations to the charity go directly to those in need.

“Approximately, 25% of the volunteers are medical. The other 75% range from engineers, to construction workers, to cleaners, to cooks, to accountants and much more. The ships have schools for the children of volunteers and there can be as many as 20 families on the Anastasis at one time.”

If you think of the ships as small towns, with the needs of small towns, this gives you an idea of what the different people do.” Gloag’s metaphor of the ships as self-contained towns is apt.

“When patients board the ship, they are confronted with a little piece of the Western world. This has benefits. The efficiency generates the impressive treatment statistics and avoids local problems that might jeopardise crew safety and delay or obstruct treatment.

But is there a missed opportunity to improve local, onshore, state health systems? An anthropologist with experience in West Africa worked in Sierra Leone when the Anastasis visited. He accepts Mercy Ships does enormously important work but believes there is a “band-aid” approach that isn’t sustainable.

“It’s said that such medication and procedures are deliverable only from such ships and their irregular arrival times rather than through skills and sustainable development,” he says.

Judy Polkinhorn, the UK chairwoman of Mercy Ships has an answer. “We work very hard to build partnerships with local medical organisations or doctors to try and improve long-term sustainability of projects,” she says.

“Mercy Ships also has land-based projects which entirely focus on long-term sustainability, such as the VVP (vesico-vaginal fistulae) clinic in Freetown.”

Before the ship’s last visit there, rebels destroyed many of the projects that Mercy Ships established 10 years ago and the crew of the Anastasis had to re-establish them as well as developing new ones. Obviously money spent onshore is less secure than money spent on the ships.

Polkinhorn adds: “With the completion of The Africa Mercy, we will double our capacity to both treat and train in Africa and this will help enormously in the effort to help build long-term healthcare services.”

Mercy Ships has a Christian ethos – some have referred to the ships as “floating Sunday schools” – but the extent of evangelism onboard is not clear. Mercy Ships say “many volunteers are Christians or of other religions, but their first priority is providing humanitarian service. Volunteers do not preach to patients.”

One woman who volunteered with the Anastasis for eight months in 1999 says daily life of the ship revolves around Christian lifestyle and is an important part of what happens.

www.mercyships.org

**Ships beat mainland problems**

By Fiona McWherter

ANN GLOAG first became involved in Africa when her bus company Stagecoach expanded there. “The big problem was that many officials were corrupt and often you were expected to bribe people to do business. We point blank refused to do this and instead funded medical projects.”

“We funded a burns unit in a hospital in Malawi for a number of years and, in Nairobi, I became involved in funding an orphanage after discovering that babies were being left on our buses.

“Often the mothers were very young and believed their children would be better off in an orphanage.”

“I wanted to make sure that where the babies were taken was somewhere well funded and homely with education on offer.”

“I still fund the orphanage in Kenya, which has been transformed over the years. We have built a school and encourage the children to set up small businesses which they really enjoy.”

Ms Gloag’s cash also funded improvements at the Queen Elizabeth Hospital and St Ann’s Hospital in Malawi, Thomas Bernhardo House in Kenya and the Velmia Leprosy Mission in Bidda, India.

But she often found the supply of money and tools was not enough.

“When I heard about Mercy Ships and the work of the people on the ships, I knew right away they had found a solution to the challenges medical projects can face in Africa.”

ANN GLOAG: Nurse, granny and Scottish bus tycoon on a Mercy Ship shift in Benin.
Europe must lead on Africa

Scottish First Minister is going to Africa in May – and world leaders are coming to Scotland to talk about Africa in July. Will anything we can say now, affect those talks? It seems some powerful people have already made up their minds.

The US President and his hawkish head of the World Bank Paul Wolfowitz have already given Gordon Brown ideas for doubling aid to Africa a thumbs down. Their corruption and greed, she says, is being used as a great excuse for unfair trading rules. The Common Agricultural Policy deprives Africa of basic resources in hospitals. Not just by the areas where HIV and malaria are so well off when some people are starving.

Although we are a very well off country we still have sick people who live on the streets in the larger cities. I live on an island called Sanday. Sanday is renowned for its high population of birds. Only 530 people live here, many of them have come here so that we don’t have an ageing population. I am also curious to what you do in your free time. Do you go or how do you travel? Are there traditional games you play? I found out that throughout Africa there is a football craze – do you play football? We have many after school clubs. Many are sports, dance and musical clubs. Do you play instruments? Do you play traditional African songs or dances? Here we have a recorder club and a fiddle club. Also out with school people play a variety of instruments from flutes and clarinets (which I play) to bagpipes and electric guitars! Sanday is a very musical place. We also hold ‘Dances’ where a majority of the island get together and dance and sing along to traditional music.

Our Proposals:

- In Malawi – We would like to come and stay in your houses and live in exactly the same way as you do every day of your life. We feel that if we did this it would make us more aware of the people in our world around us and the way that they live.
- In Scotland – We would each invite a pupil to come to clubs?
- In Scotland – We would each invite a pupil to come to Orkney Islands have won the Scottish Schools Africa Challenge. The prize – a trip to Malawi with the First Minister in May. The reason – letters to the African children they hope to meet – like this one from Michelle Dearness (left)

Five pupils from Sunday school in the remote Orkney Islands have won the Scottish Schools Africa Challenge. The prize – a trip to Malawi with the First Minister in May. The reason – letters to the African children they hope to meet – like this one from Michelle Dearness (left)

Dear Friend,

I have been trying to find out about your way of life so that I can compare it with my own. We hear a lot about Africa from the television, but it’s difficult to know what it is really like. We usually hear about disasters but not the developments which are being made all the time.

The United Nations Millennium Goal number 1 is to eradicate poverty throughout the world. I really hope that they succeed. We feel guilty when we see so many people living in poverty. Although we are a very well off country we still have sick people who live on the streets in the larger cities. I live on an island called Sanday. Only 530 people live here, many of them have come into the island.

So how do we compare?

- We live on an island which is very different to mainland Scotland. Sanday has a few gardens and people who walk and cycle places. On our island we travel by car, walk or bike. We then travel to mainland Orkney by boat or plane.

- We would each invite a pupil to come and stay in your houses and live in exactly the same way as you do every day of your life. We feel that if we did this it would make us more aware of the people in our world around us and the way that they live.

- In Scotland – We would each invite a pupil to come to

Michelle Dearness (Age 11)
Malawi: Nation on the brink

Famine, poverty and the west’s indifference are killing children in their thousands. But Scots can help, urges Margaret Ewing MSP in this eye-witness account, from Glasgow’s ‘Herald’ newspaper.

The silent tsunami. This was the phrase whispered in my ear by one of the many volunteers working here in sub-Saharan Africa. As our CPA (Commonwealth Parliamentary Association) Scotland Branch travelled hundreds of miles through Gauteng, the Eastern Cape Province and Malawi, these words rang more and more true – a tragedy on a massive scale is waiting to happen here.

In this area, opened up by Scottish explorers and missionaries, 315 million people live on less than 50 pence each a day; 184 million suffer from malnutrition, the average life expectancy is 41 and one in six children dies before the age of five.

I came prepared to see poverty, but the scale was overwhelming. I think my lowest point was when I visited the strangely named Bottom Hospital in the capital Lilongwe. The name stems from the fact that in 1937 the British built this hospital - one site for the Malawians and another for the Asians. Later a different hospital was built for the whites higher up the road and it became known as Top Hospital.

We are greeted by De Tarek Mequid. He, one other consultant and three midwives are responsible for 11,000 deliveries per year. Infant mortality is over one in ten and is rising.

Imagine a high dependency unit where 19 beds are crammed into one ward, scarcely three inches apart, with two additional mattresses on the floor. There is only one incubator which works intermittently. If it is in use when another tiny mite is born, there is no option but to give the baby back to its mother to be allowed to die in her arms.

When we visited, they were running out of sterile gloves. Only three pairs were left for the whole staff at both centres is second to none. All this takes place in temperatures of close to 37 degrees celsius, over 98 degrees Fahrenheit, which even the Malawians admit is unseasonably hot.

The rainy season, which lasts from November to May, ended abruptly in February. Although the countryside looks wonderfully green, with avocado trees, mango groves and endless fields of tea, it hides the harsh reality.

The truth is that the endless miles of maize, the staple food are withering and dying. Even the occasional thunderstorms and heavy rain can no longer save the crop. As one of our drivers said, pointing to yet more crops lost: “That means hunger and famine”.

In this republic with all its beauty and its friendly people, I find a chill running up my sweat-soaked spine.

This truly is a silent tsunami. In Malawi, almost half the population is under 14-years-old, with only 2.8% over 65. It has been devastated by HIV/Aids, with the official prevalence rate at 14.4% – but figures vary according to whichever person you spoke to last.

Youngsters – usually teenage girls – are the orphans left struggling to support their younger siblings. Some are forced into prostitution to try to find money.

We visited a school where there are 9,200 pupils – the headteacher has earned a reputation for good results. They have just 12 computers.

The youngsters want to learn and they are disciplined and receptive. This encourages their equally enthusiastic teachers - the determination to succeed permeates all ages their equally enthusiastic teachers - the determination to succeed permeates all the schools we visit.

In our hotel one of the workers is called Jimmy and asks if he can join me as I chill out with a guava juice. He tells me his brother once went to Scotland where he saw white men cleaning the streets and collecting rubbish. Was this true, he asked in all seriousness. Um, yes.

This visit has been a kaleidoscope of sensations. We’ve seen the good work being undertaken and the progress made, and we’ve seen the sad side where little hope exists. Above all, the impression I leave with is that simple actions could make a huge difference. This is not about throwing money in every direction nor is it about imposing western values at the expense of cultures which are different from ours.

We cannot wait until disaster happens. Scotland takes its international responsibilities seriously. We are part of the prosperous world, and have a duty to support the global movement to tackle poverty and ill health in the world’s poorest countries. The Scottish Executive’s International Development policy will develop partnerships to help the exchange of skills and experience between Scotland and developing countries. Malawi, which has long enjoyed links with Scotland, will be the early focus for our work.

Margaret Ewing is Scottish Nationalist Member of The Scottish Parliament for Moray in North East Scotland www.scottish.parliament.uk/msp/members/Pages/margaret_ewing.aspx

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THE cost of one Scottish school would build 770 Malawi schools – this one has 9500 pupils.
African women face a 1 in 13 chance of dying in pregnancy and childbirth. Almost all of these deaths are preventable. One midwife in Malawi is a minor miracle. And a Scottish University is planning to help her.

The unique midwife ...

IT'S five am and a newborn baby is being placed in the arms of its mother for the very first time. It has been a long labour for the mother and midwife, who delivered in a pitch darkness, had to cut the baby's umbilical cord with a razor blade, and tie it with a strip torn from a curtain. Like the thirty other babies that will be delivered in the next month by one of the most famous Traditional Birth Attendants or TBAs in southern Africa — Nayele Jekete.

Nayele lives in Mbewa, a village 30km from Lilongwe, Malawi. Born over 60 years ago, she has delivered so many babies she has lost count.

"I examine up to 70 pregnant women in a month and help deliver between four to eight babies a day," says Jekete. She has such a good reputation that patients come in from Zambia and Mozambique and her typical day starts at 6:30 AM with a quick bath, followed by breakfast before she starts work.

In a country where AIDS affects one in ten of the population, her job puts her in a position of extremely high risk. Siti Kachingwe, Dean of the Kamuzu College of Nursing, says, "Nayele knows she must sterilise her equipment and wear gloves when she is working, but if she has no gloves to wear that day, she delivers the babies anyway."

Behind her workplace/home, it's hard to miss the dirty well shared with animals where Jekete draws water. Every day girls scrape a layer of scum from the surface to get to the fresher liquid below and Jekete boils the water over an open fire before using it.

Her "labour ward" is a two-roomed dilapidated house. The "theatre" holds a wooden bed and thin mattress. Most patients and newborn babies sleep on reed mats.

Jekete's health failed last year when she developed sight problems in her left eye and had problems focusing. But she has received treatment and has recovered.

Her reaction was to train members of her own family to take over. Jekete's grandson assists with registering patients and prescribing drugs and her niece is being trained so the girl can take over when the midwife dies.

Jekete is not rich — she is a widow and four of her six children have died — but she has generated enough money to pay school fees for her extended family members who include nephews, nieces and grandchildren. Jekete charges K250 (75 pence) for delivering a baby.

Jekete's health failed last year and she has no gloves to wear that day, she delivers the babies anyway."

Nayele has only lost one patient in childbirth since January of this year, and this was due to difficulties calling an ambulance in time. That situation will change thanks to the Malawi Millennium Project at Strathclyde University in Scotland.

In recognition of her amazing lifetime's achievement in maternal health they are going to supply Nayele with a mobile phone and charger, and install a new water pump and a solar powered generator to provide electricity.

Jekete turns the money she makes into something positive. She has saved enough to send her niece all the way to Strathclyde University in Scotland as a student.

"If a woman wants to space her pregnancies by two years, I give her two drops of the juice from the herbs to swallow. If she wants to stop giving birth, I give her ten drops for 10 days and that makes her sterile," said Jekete.

Foretelling the sex of unborn children is a skill Jekete claims to possess. She applies herbs on a pregnant woman's womb and says she can see the foetus using a mirror to tell whether it is male or female. "It's not magic. I can tell the sex of the baby because its legs are often apart when in the stomach."

But though some of her practices are unconventional, Nayele recognises when she must send expectant mothers to hospital. Disabled women; the ones needing caesareans; those who have been in labour for more than 24 hours; and those with more than three children are either blessed or cursed, depending on how you look at it. Blessed because they can give birth in the relative comfort of a hospital, or cursed because the journey is far, ambulances are few and the telephone to call them, 2km away.

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Jekete’s reaction? “If I have these facilities more women will live, and I will die happy.”

Football turned their donkeys into superstars

Scottish and Gambian men share an obsession — football. Now it’s being put to good use — to help donkeys stay fit and increase yields in the export peanut crop.

The Gambia Horse and Donkey Trust has found a novel method to encourage caring for farm animals — by making the animals mascots for farm football teams.

The project gives the animals names of famous football players and gives the farmers kits to match.

By improving the prestige of the donkey handlers the project improves the health of their animals, Gambians grow more crops and can use money for their family. In one village, Becks and Rooney are two asses working alongside Sir Alex Ferguson the horse, ploughing and carting crops to market.

Emeritus professor of Glas-gow’s Vet school Max Murray has studied the project’s impact in the country. "The increase in yields is hugely significant. In the first year on Rooney’s farm there was a 500% increase. The naming of animals has been inspirational to the people, with competition to make their horses and donkeys the best and now they want to be the best too.”

Since girls are most often the last to be educated and the first to substitute their labour for a sick donkey, the football project is helping women — even if the worldwide football obsession generally isn’t!

Heather Armstrong of the Gambia Horse and Donkey Trust said, "The welfare of the horses and donkeys has greatly improved. A farmer was telling me this morning that with the money he made from his horse last year, he’s been able to buy two bulls this year."
Is Africa paying to train nurses for Britain?

Africa has lost 20,000 professional people a year since 1990. It's the top story in Africa at the same time African poverty is set to become the top story at the G8. How ironic. Because it's the rich G8 nations who are taking African professionals away.

Report by Sandra Nyaira, in London

Everyone knows the brain drain from Africa is happening. But is there a fair and effective way to stop it? The government in Zimbabwe thinks it has found one. "Programmes are running without any brain resources in universities, polytechnics and colleges will have to work in the civil service for some time before they can be allowed to join the private sector or legally work in other countries," the state-controlled Sunday Mail reported.

Workers in the health sector, lawyers, engineers and technicians are likely to be affected. No wonder - so many doctors have left Zimbabwe in recent years one doctor must now do the work of seven, according to the local Daily Mirror, and Zimbabwe has had to hire doctors from Cuba and the Democratic Republic of Congo (DRC).

In South Africa, government officials will use the carrot not the stick. Local hospitals are considering a scheme to pay half the student debts of doctors and other health workers in exchange for an undertaking they will work at the hospital for a number of years.

According to Dr Percy Mahlati, deputy director-general of health, between 100 and 150 doctors and 400 to 500 nurses leave South Africa to work in developed countries every year - many to repay their student debts.

Western leaders are fond of quoting Nelson Mandela on many issues - but tend not to repeat his call on the West to stop this brain drain immediately.

Industrialised countries want two types of immigrant labour - those willing to do poorly paid, dirty and dangerous jobs their own nationals scorn, and highly specialised professionals, such as software-specialists, engineers, doctors and nurses. The US has 120,000 fewer nurses than it needs and faces a shortage of 800,000 by 2020. Without a change in policy at home, rich nations will continue their massive recruitment drives without shame.

But are laws to ban African recruitment the right answer? Dr Kwadwo Mensah, from Ghana, argues in Africa Focus that attempts to control mobility are ineffective and questionable in terms of human rights. "The objective of policy should be equity in health care as soon as possible. The migration of health service professionals is an aspect of rapid international integration and commercialisation of health service labour markets."

These processes are cumulative, self-reinforcing, and hard to reverse; policy must work with, not against their grain. Coercive measures to prevent departure, work poorly; worse, they can intensify pressures to leave. Conversely, decent working and living conditions, and policies that value skill and service financing and governance needs to improve in countries that are losing staff.

Countries like the UK have come up with "ethical recruitment" codes, but they are implicitly discriminatory along the lines of "race", affecting mainly African and Caribbeans, hence predominantly black, staff. In any case, private agencies can and do continue to recruit from high training African countries. But leaving for a better life in the rich west is not a guarantee of happiness.

Fortune Tadya, a 32-year old Zimbabwean, is one such professional regretting the day she ever set sight on the UK. Armed with a bachelor's degree in Business studies and five years of experience after working for one of the most prestigious banks in Zimbabwe, she set out in 2000 to join the great trek to the first world.

She gained a scholarship to study for an MSc in Business Studies at a London university. But after graduating she has lost count of the number of interviews she has attended in search of a job that matches her qualifications. Now she has lost hope and joined the thousands before her doing the most menial, dangerous and unwanted jobs in the UK.

Fortune works full-time in a fast food shop and at night does care work in hospitals and old people's homes.

Most of those leaving Africa are hard-working women. They send back to Africa regularly to fund the education of children, and building houses in the hope that one day they will go back home. Whether the menfolk who receive the cash always use it wisely is another matter. In the UK, child benefit is paid to mothers only - and there is a good reason for that. The worry that men back home could be squandering hard earned cash is another burden for the African women working in the UK.
George Reid is best known in Scotland as the Presiding Officer who finally got the Scottish Parliament building finished. But as the man behind the film from Ethiopia that inspired Live Aid and Band Aid, coping with the problems of an over-budget parliament building and a group of rowdy politicians must seem like a walk in the park. Rachel Lamb interviewed him.

The man behind Sir Bob

When the Scots politician George Reid lost his seat in 1979, he went back to his old job as a journalist and made a series of BBC documentaries on refugees displaced by war. On the strength of these films, he was headhunted by the Red Cross and for the next 14 years, his job would take him to war zones and disaster areas across the world. As director of public affairs for the Red Cross, he dug survivors from the rubble of the Armenian earthquake, bore witness to the atrocities of ethnic cleansing in Eastern Europe and worked at the front line of famine relief operations in sub-Saharan Africa.

His team arrived in Ethiopia in 1984, at the height of the disaster and were shocked by what they found. "About five million people were going to die unless we got food to them and it had been left too late by the African authorities, particularly in Ethiopia, so a lot of people were dying," he sighs. In Desé, 150km north of Addis Ababa they set up the first feeding station with supplies to feed 6,000. By the end of the second week 200,000 starving people had arrived, many of them travelling distances of four or five hundred miles on foot. Unable to cope with the staggering numbers, Red Cross workers had to decide who lived. Twenty years on, many still struggle to come to terms with the decisions they were forced to make.

"If people are famished you feed them six to seven times. You decide who's going to live and who's not. You build a wall and you have one side of the wall where people are doing nothing but eating and the other side of the wall where people are quite clearly starving to death. This is not easy."

Frustrated by failed attempts to negotiate with Ethiopia's corrupt leader, whose soldiers were stealing food meant for the starving, Reid turned to the skills he had learned as a journalist and politician. Using Michael Buerk's images and his BBC film crew, he focused the eyes of the world upon what Buerk was famously told to do, "the closest place to hell on earth."

"A lot of the coverage was pretty horrific," says Reid. "What I was doing was showing a contrast – starving child sitting in a Red Cross camp screaming, and six weeks later fat happy child. We were trying to get money raised so we could put food into mouths. You've got to say to the donor, we can turn this situation around and your dollar, your pound brings quick results."

Desired effect

Buerk's images had the desired effect. Shocked by the footage of war-torn, swollen-stomached children and skeletal mothers, swarming with flies, Bob Geldof and Midge Ure joined forces to determine their bit to feed the world. Band Aid was born and the money started pouring in.

George admires men like Geldof and Ure who use their status to speak up and engage in the political process. "They've stuck the Tsunami in Asia, people responded extraordinarily. But that might mean it's not an easy year for Africa."

Many African countries, he tells me, are going through a triple transition: from war to peace; from one party state to multi-party democracy; and from planned economy to so-called free market. "It's no wonder they are struggling to cope, particularly in areas of Eastern and Southern Africa where up to 30 percent of the population are HIV positive."

Poor infrastructure

The infrastructure in large parts of Africa is poor. When Reid was working there it was worse. Pitted dirt roads, searing heat, aging vehicles and a lack of repair workshops to deal with breakdowns made travelling the enormous distances required difficult and often dangerous. A second-rate communications network did not help. Working with the Red Cross has made Reid an admirer of women. "If there is to be any sustainable development in Africa, women will do it, not men."

"If you have a famine operation and you give the food to a man he'll eat the bloody stuff. If you have a woman in charge, particularly with giving out seeds, she'll share it and she'll keep some for the next year. They're the great sustainers of life."

Often, Reid found that for plans to be effective, they had to be worked around cultural taboos.

"In Ethiopia a large part of the disease problem was caused by people and animals using the same water, so cows shit in the water which people washed in and drank," he says. "The solution was a pump separating water for animals from water for people."

"In terms of child death rates, the results were utterly staggering and these things cost about $100 each to make. But because the village had done it a different way for a hundred years you couldn't just go in and open a pump, you had to get them to buy into it and that was a long and difficult decision — but once its agreed it is agreed."

"I sometimes wish that in this building (Scottish Parliament), we could do what we did in Africa when it comes to problem solving, all sit under a tree for three days until we've cracked it."

www.scottish.parliament.uk/msp/membersPages/george_reid
SAFIYA HUSAINI was not stored to death for having a child out of wedlock. But her sentence wasn’t overturned because the local Nigerian court heeded the campaigns of women’s groups – the alleged adultery was committed before Sharia law was instituted in Sokoto, the area where she lives. It was a matter of technicality, not principle.

When Glorie Etim, an experienced lawyer, removed her scarf to work like this she is keener than ever to get back to Nigeria to join other female lawyers like Hauwa Ibrahim, whom she regards usefully for the acquittal of Amina Lawal, sentenced to death for having a child out of wedlock. But her sentence wasn’t overturned because the local Nigerian court heeded the campaigns of women’s groups – the alleged adultery was committed before Sharia law was instituted in Sokoto, the area where she lives. It was a matter of technicality, not principle.

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It’s a make or break year for polio

It’s make or break year for doctors trying to end polio in Africa. But one Scottish sculptor has found such strength and artistic flair among polio victims, she calls them the “Wonder Welders.”

Natalie Marchant reports

When Heather Cumming went to Tanzania to teach eight polio victims to weld, she probably had a better idea of what to expect than most other Scots.

After all, the Perthshire artist and sculptor had grown up with her grandmother Margaret Leighton, 88, who has had a twist-her grandmother Margaret and sculptor had grown up with

Community care, not orphanages, says doctor

By Laura Harrison

Dr Josephine Munthali’s Child Support Project in the Dedza area of Malawi was a direct result of her PhD, in Edinburgh. Her work looked at girls’ education because although the government were providing free primary schooling, many girls were dropping out.

“I wanted to know why. I found out it often had to do with caring for other children in their orphan families.”

The approach of Josephine’s project was to let Aids orphans remain in their villages where they were brought up. “We don’t encourage orphanages at all,” she explains, “the thing with orphanages is that they create divisions in the family. They take one child and leave the rest.” Josephine’s sister, Anne Munthali, who supervises the project in Malawi, says children in orphanages live in dormitories and are often denied access to their siblings. The orphans involved in this project are fostered by families and are supported with schooling, clothing and food.

The great granddaughter of David Livingstone, Diana Harryhausen, is one of the project’s biggest supporters. Ms Harryhausen first got involved with work in Malawi in the 1980’s when she decided some relics she inherited from her great grandfather should be returned to their homeland. “They were lovely people and I got to know a lot of them and a lot about them.”

The main benefit of this personal approach is that the children are given support and protection at a difficult time of their lives. Anne Munthali said that it is important because they are “provided with love, spiritual and other needs.” Without this they are vulnerable to sexual abuse from men who take advantage of orphans. Up to 100 homes have taken in children so far but Josephine is aware of the social problems and burdens. “These people already have children that they are not able to feed, we cannot say that we will just provide a bag of maize for the orphan, so you have to feed the rest of the children as well.” By recognising this conflict, four community feeding centres have been set up by the charity, which provide breakfast for children under the age of five. It is hoped this will expand so primary school children get a meal a day so they can concentrate at school. And there is a lot to concentrate on. Many Malawi people see the HIV/AIDS epidemic as a case of immorality but Josephine believes that local culture and traditional practices are also to blame.

She spoke about one area were girls from the age of eight were encouraged to have sex with men prior to marriage. “The Child Support Project – with 5 trustees in Scotland and 4 in Malawi – believes education of girls and women is the key to such fear. Scottish women recently donated 13 sewing machines so 300 women in Dedza can acquire sewing skills.”
Dorothy Logie: Life's work after life's loss

Sandy Logie was a doctor in the Borders of Scotland who took early retirement in 1991 at the age of 52. The following year he traveled to Katete in Eastern Zambia to work at the St Francis hospital in eastern Zambia. It was there, while helping a nurse control a woman who was thrashing violently, that Sandy was accidentally injected with a needle carrying her blood. The following day the woman died and when Sandy returned to the UK he was diagnosed as HIV positive.

Dorothy remembers, “It was a worry for us; Sandy had been ill in Africa with a high fever. We were worried when we found out and because no one really knew much about it, we were scared about what the public reaction would be. It was 1993 and there were no drugs available to treat the HIV virus, so Sandy had nothing except tender care and attentive medical support for the first three years. He became ill quickly and picked up other illnesses over the years. He did start taking anti-viral drugs by an expert committee in the UK, who said that he could continue working as a physician in Scotland but not carry out any surgical procedures. Sandy continued to work in Scotland and Africa before the family made the decision to announce his illness in 1996.

“We called the press conference and took a panel of experts with us to answer all the questions that would be asked about Sandy’s health,” said Dorothy. “We wanted to dispel all the stigma that surrounded HIV at that time. Some of the press said nasty things but it general it was ok.”

After the news of Sandy’s illness broke, Borders NHS set up help lines and organised for his patients to speak to someone if they were worried, but there were hardly any calls and those who did phone asked how Sandy was and expressed their concern.

Dorothy added, “That’s the nature of the Scottish and Borders people I think though. For the most part they are sensible and understood the situation.”

Dorothy was regularly tested for HIV and says it was through practicing safe sex that she did not put herself at risk of catching the disease. Sandy and Dorothy returned to St Francis hospital in 1999, a small delight for the man who had planned to spend his later years working in Africa.

“It was very strange to be there,” said Dorothy. “I was frightened in case Sandy caught TB or some other disease, but he was so keen to work he went straight off to the wards when we arrived. He was so distressed when he became infected with HIV because he couldn’t go to work in Africa in a long term capacity.”

The illness slowly took hold of Sandy over the coming years and he died in February 2001. The Sandy Logie clinic now cares for 900 patients and has 60 community-based workers paid by grants from SBAAG (the charity formed by Dorothy after Sandy’s death). Dorothy also backs the Lothian Zambia partnership – the idea of Brian Cavanagh, chairman of NHS Lothian, the Edinburgh health board. During the 1980s his area was the first in Scotland to see a big rise in HIV cases, mostly drug users and African people.

Dorothy Logie all this work keeps her husband’s memory alive. “I hear people saying ‘Sandy Logie’ all the time. At first I think they’re talking about my husband but then realise they’re talking about the clinic. For me, hearing his name in a foreign language is such a tribute. I know he will always be remembered.”

Dorothy’s manfesto for HIV+ change

- Better funded and organised health services so diseases don’t get neglected.
- Proper pay for doctors and nurses in Africa so they stay there.
- End discrimination and treat AIDS like any other disease.
- Give girls free education so they feel confident to stick up for their rights.
- Care for HIV orphans.
- Develop a vaccine for AIDS.
- Severe sentences for rapists.
Africawoman verdict on Scots, kilts, Gleneagles – and men

By Susan Naa Sekyere, Ghana

Africawoman journalists had a good time in Scotland although we came not knowing what to expect of Scotland and her people. And we came with a dilemma. We had an agenda. It was to make the point that if the G8 is meeting in Scotland in June, it has no business discussing Africa if Africa is not represented. Every one of the seven Africawoman from Kenya, Zimbabwe, Ghana and Malawi made it to their business to drive home that single point at every opportunity.

That could have made us come across as self righteous bores. So apart from being overwhelmed by the warm welcome of the Scots, we were pleasantly surprised this strong point we drummed home we were pleasantly surprised this warm welcome of the Scots, apart from being overwhelmed by universal. We were smiled at in every one of the seven Africawoman would like to thank everyone who made the Scottish visit stimulating, important and fun: Jack McConnell, Susan Dalgety, Rachel Gwyon, Christina Kelly, Caroline Grace, Susan Pilrami and Sandra boldly going where G8 First Wives may fear to tread – the Ladies Loo at Gleneagles!

If only the immigration officials at Heathrow could have been so accommodating. They questioned us for hours asking why the Scottish First Minister would want to speak to us, even though we had official letters of invitation. "I only the immigration officials at Heathrow could have been so accommodating. They questioned us for hours asking why the Scottish First Minister would want to speak to us, even though we had official letters of invitation."

in Gleneagles – but we completely failed to pull any Scottish men because they are so shy and would rather talk to women through the bottom of their beer glasses than a contrast to men at home! Gleneagles Hotel – where the G8 will be held – is a five star hotel and golfing mecca. It was beautiful but hard to get into. Our government guide was told it would not be possible for us to see the state rooms where the world leaders will sit. So we had to be content with a trip to the ladies to see where Cherie Blair and the other First Ladies will sit!

Emboldened by posing with a killed piper, our speed-loving Zimbabwean, Sandra Nyaira, accosted a young man waiting for a friend in an expensive looking open-top sports car. She asked this good looking stranger if she could have her picture taken sitting in the front seat of his car.

In fact, this bold behaviour was really caused by one generous act by the visit organisers. Sandra is effectively exiled in London due to a change of government makes it possible for her to return home. She is almost penniless, but was picked up from her home to come to Heathrow airport for her Scottish trip in a huge, black Mercedes Benz. That act has now made her think she can get into any expensive car!

Anyway, before the young Scot could protest Sandra was in the front seat smiling and waving like Grace Kelly!

If only the immigration officials at Heathrow could have been so accommodating. They questioned us for hours asking why the Scottish First Minister would want to speak to us, even though we had official letters of invitation.

in Scotland it is Spring. Beautiful flowers adorn the parks, which are green and clean. The air is fresh and not air polluted as cities back home. And the streets of Edinburgh and Glasgow were not as congested with people or cars as London, Nairobi or Accra. There were also not as many black people and few Africans. Perhaps that explains the big welcome.

Africawoman journalists had to shop. We had to shop because – we love it! And at least to find sweets for relatives back home. As the Ghana proverb says “beautiful goods are those brought home from a journey”.

After roaming for a while, the Africawoman delegation ended up in ASDA Wal-Mart, a huge 24-hour superstore on the edge of town. It’s a UK-run store, owned by Americans, selling mostly cheap but well-made Chinese goods – everything from clothes to mobile phones and perfumery to household items.

At home, Chinese goods can be shoddy. But not here. Quality looked so high with prices so low it was hard not to be suspicious. How can poor Africans be shopping in the UK – the world’s fourth wealthiest country – and afford to buy? Basically, how could we have the same purchasing power in British shops as the British person? For a moment we were sober-ish Africans!

Food! So by the end of the night, drunk Scots became as noisy as sober-ish Africans!

Our tours were whistle-stop. It was great to spend time at Holmelea School in Glasgow where the children know more about Malawi than some of the male journalists who plan to accompany the First Minister to Malawi in May. Holmelea’s classes were small. The whole school was about the same size as one class in Malawi. The children were fascinated by us. I don’t think they see many African women – especially not treated as important and respected guests.

Finally we would like to thank all the Scottish Executive staff and Jack McConnell for making us feel that we matter and that our views may find an airing at the G8 – even if our beautiful braided, beaded, sequinned and miniature bell ringing African kilt does not!

Clockwise from top: Columnist, Sandra Nyaira in her latest “borrowed” sports car; Editor Lesley Riddoch on a quick exit from the latest African shopping tour; Writers, Caroline, Grace, Susan, Pilrami and Sandra boldly going where G8 First Wives may fear to tread – the Ladies Loo at Gleneagles!