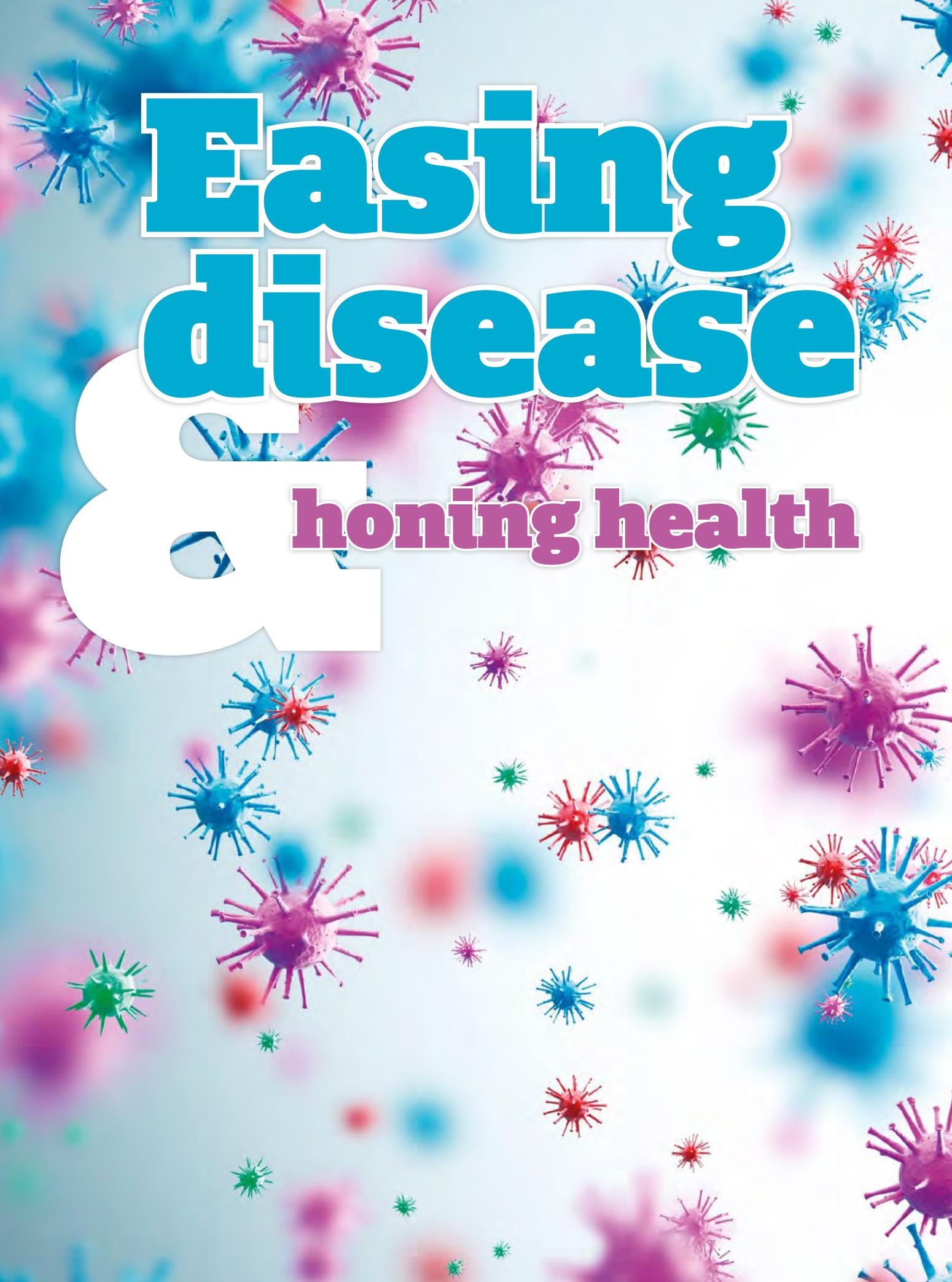


Easing disease & honing health





Good health care should be everyone's right. Yet 400 million people in the world can't afford or don't have access to basic health care. While our mighty push to eliminate polio comes first to mind when considering Rotary and disease prevention/elimination, our collective reach spans all facets of health and wellbeing. From groundbreaking research into stroke, to tackling obesity, providing vital medical equipment to those in need, keeping malaria under wraps, and battling the dark depths of mental health, Rotary's work in the field of health and medical science helps ease the suffering of millions of people worldwide.

Sydney Rotarian on the cusp of **medical miracle**

GROUND-BREAKING research into the prevention and treatment of strokes is underway via a partnership between the NSW Health Statewide Biobank and researchers from the NSW Brain Clot Bank.

The Brain Clot Bank – developed by the Rotary Club of Sydney's newest inductee, Dr Sonu Bhaskar – is the first and largest biobank collection of its kind and is set to revolutionise the treatment of stroke in Australia and internationally.

Over two-and-a-half years, Dr Bhaskar worked tirelessly on the idea of developing the biobank, which he hopes will become an important resource in cardiovascular/stroke research and assist clinicians in the treatment of patients. The NSW Brain Clot Bank, housed at the NSW Health Statewide Biobank, is conducting ground-breaking research into the prevention and treatment of stroke.

The Brain Clot Bank will see clots that are removed during a relatively new procedure, known as endovascular thrombectomy (EVT), analysed using microscopy infrastructure at Liverpool Hospital in Sydney. Previously, clots were only examined pathologically if there was suspicion of infection.

According to Dr Bhaskar, this lack of investigation meant doctors were potentially missing valuable information about the underlying mechanisms of a patient's stroke.

"The NSW Brain Clot Bank will be a useful resource in identifying the source of the clot blockage, which can then

assist doctors in advising stroke survivors of their ongoing risk factors and allow precision-targeted therapy to prevent disease recurrence," Dr Bhaskar said.

"When there is ambiguity around the cause of the stroke or the origin of the clot, there is an ambiguity about what the best treatment options are. This then impacts on the clinical care of the patient. These patients have poorer outcomes, with a five-times higher risk of mortality.

"Clots that we retrieve will, at the very least, throw some insight into this particular group of stroke patients."

Dr Bhaskar and his fellow researcher, Associate Professor Murray Killingsworth, hope to gather 1400 specimens over the next four years for the biobank. Liverpool Hospital and Royal Prince Alfred Hospital have come on board to contribute samples, and it is hoped that other hospitals across the country, and abroad, will eventually contribute.



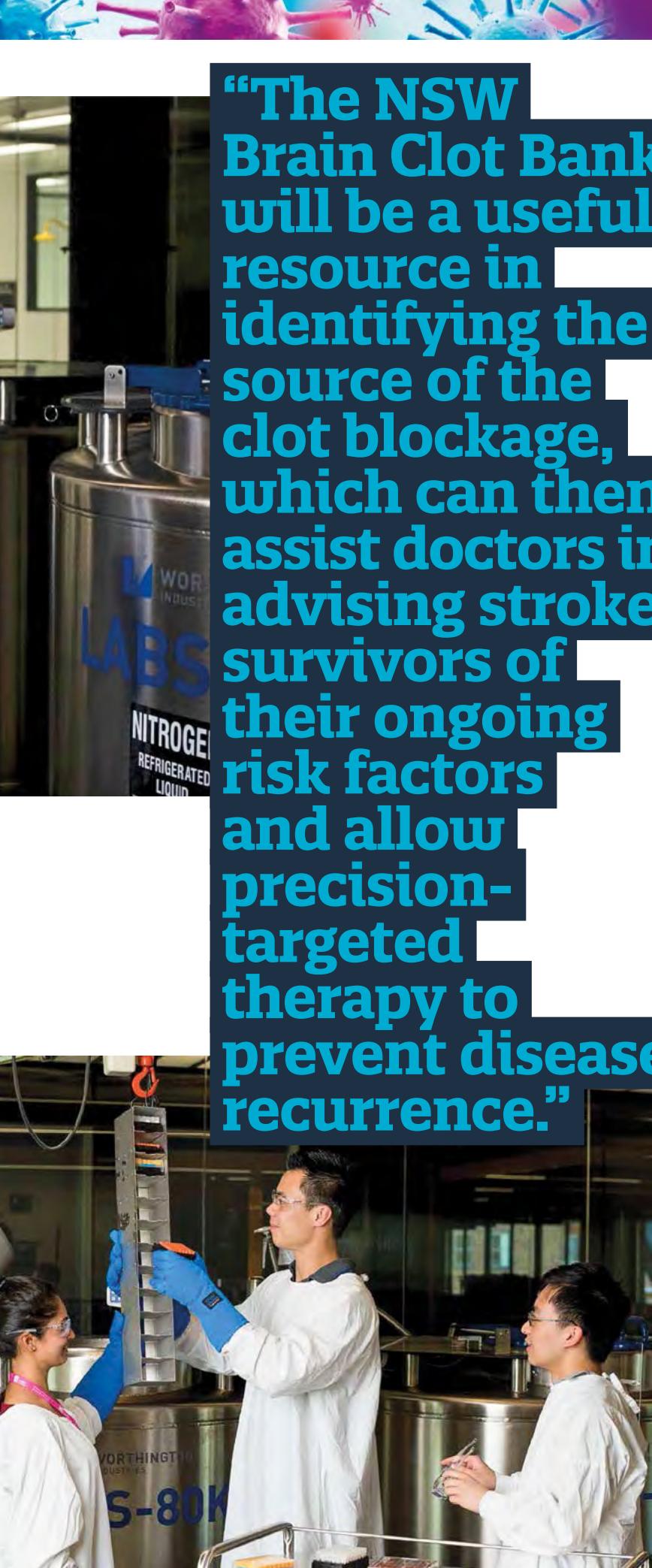
(Photo: NSW Health Statewide Biobank)

"This is a game-changer for health and medical research in this state and will help secure our place on the global stage.

High-quality research depends on biobanks and this state-of-the-art facility can store over three million samples for researchers looking to find the cause of illness and treatment for disease.

The NSW Government has invested \$12 million in this project, which will help make a difference to the health of our community for generations to come."

***The Hon. Brad Hazzard MP
NSW Minister for Health and
Minister for Medical Research***



"The NSW Brain Clot Bank will be a useful resource in identifying the source of the clot blockage, which can then assist doctors in advising stroke survivors of their ongoing risk factors and allow precision-targeted therapy to prevent disease recurrence."

(Photo: NSW Health Statewide Biobank)

Stroke is the third most common cause of death in Australia, and a leading cause of disability. Ischemic stroke is the most common form of stroke, killing more than 10,000 Australians every year. An ischemic stroke occurs when a clot blocks a blood vessel in the brain, with an EVT required to remove it.

Dr Bhaskar has been recently awarded the prestigious European Academy of Neurology (EAN) 2019 Investigator award for his research.

With whatever spare time he has outside the lab, Dr Bhaskar has taken on the task of membership director at the Rotary Club of Sydney. Fellow club member Geoffrey Little cannot speak highly enough of their newest recruit.

"This is the beginning of a Pandora's Box in the quest to prevent strokes and heart attacks, and we can thank Sonu for his efforts in this regard," Geoff said.

"Sonu is a delightful fellow; gregarious, modest and totally impervious to self-adulation. He is individually, and in concert with his colleagues, on the cusp of a great medical miracle that will change the face of mankind."

The NSW Health Statewide Biobank is a NSW Government asset to support research collaboration

Their facility and services are designed to support and enable greater, simpler and more cost-effective participation in biospecimen research.

Large-scale robotic technology can store and process over three million human biospecimens.

Highly sophisticated automated equipment reduces the time it takes to manage and retrieve samples.

Everyone needs a tea towel

AS a 10-year-old, Ruby Seeto believed that everybody should give back to others in return for those who have helped them.

The daughter of past District 9920 governor Ron and Sharon Seeto, it is no surprise that she has embodied Rotary's ethos of Service Above Self.

In 2006, at the age of nine, Ruby was diagnosed with a very rare cancer that involved the removal of 1.6kg tumour and 70 per cent of her liver, as well as her gall bladder. It was a seven-hour operation at Auckland's Starship Children's Hospital, followed by 14 rounds of chemotherapy over the next 12 months. Her recovery involved 12 months of hospital care in great pain, which she helped manage by constantly drawing pictures.

On her release from hospital, Ruby decided she wanted to do something to give back to all those who had helped her through that difficult year and to support other children in similar situations. Using her artistic skills, she designed a tea towel, "because everyone needs a tea towel".

With the help of her mum and sister, Ruby arranged for it to be screen printed and sold them through her family and friends. The tea towels were so successful she raised \$4000 for Koru Care.

This was the beginning of an inspirational story, told by Ruby to delegates at the Regeneration Conference in Christchurch in September. Ruby is now 22, in fulltime work, with a Postgraduate Honours degree in Marketing.

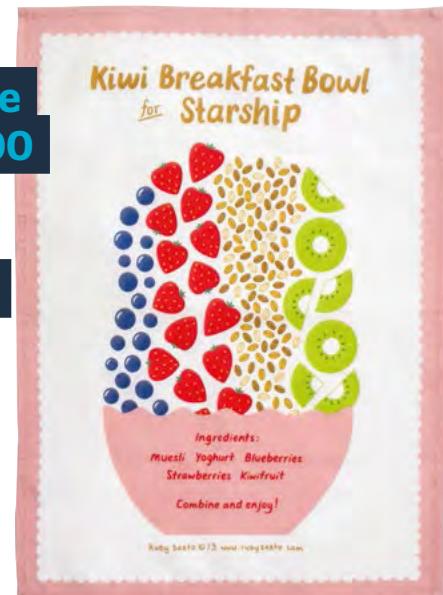
In 2009, a family-owned linen company Wallace Cotton approached the Starship Foundation to see what it could do to help. The Foundation introduced the company to Ruby and every year since, she has designed a new tea towel, as well as wash cloths and aprons featuring her lively and colourful food designs and recipes. To date, well over 80,000 tea towels have been sold and more than \$500,000 raised for the Starship Foundation. This money has been spent on a whole range of initiatives benefiting other children in the hospital, as well as funding cancer research.

The tea towels are priced at \$10, of which \$6 goes to the Starship Foundation. They can be purchased via www.wallacecotton.com/shop/kitchen-/bath/ruby-starship-collection.

Follow Ruby's story on Facebook and Instagram @Rubyteatowels.



"To date, well over 80,000 tea towels have been sold and more than \$500,000 raised for the Starship Foundation."



New wheels for Cassy and Tahlia

LIFE just got a little easier for four-year-old Kelso girl Tahlia Healy, thanks to the generosity of Townsville Rotarians, their corporate supporters and the National Disability Insurance Scheme (NDIS).

Tahlia has lissencephaly, a rare neurological disorder that causes multiple daily seizures and severely restricts her mobility. Doctors say she will never be able to talk, crawl, walk or feed herself.

Tahlia's mum, Cassandra Lau, 35, is a single parent, relying solely on a carer's pension to support Tahlia and herself.

Cassy had been struggling to lift Tahlia in and out of her car and was desperately in need of a vehicle that could be fitted with a wheelchair lift. Cassy would never have been able to afford the vehicle herself.

But her wish became a reality in July, when she was handed the keys to a brand-new Kia Carnival GLS Wagon, fully converted by Freedom Motors for wheelchair access.

Rotary Club of Townsville Sunrise members Guy Raffe and Steven Quine heard about Cassy and Tahlia's story, and took the project to their club.

The object was squarely stated: raise \$50,000 and Tahlia gets the car she needs. Club member Tim McKee OAM was tasked with the job and, together with Guy and Steve, launched Project Tahlia in October 2018.

The first step was to register Project Tahlia with RAWCS to make donations tax deductible.

The committee then went on the Townsville club circuit to gather support. Following a leadership donation of \$10,000 from the Rotary Club of Townsville Sunrise, the Rotary Club of Mundingburra donated \$5000, and then another six local clubs contributed – Townsville Daybreak, Townsville Saints, Townsville Central, Ross River, Port of Townsville and Townsville.

Pickering's Auto Group was the first corporate partner to offer support by significantly discounting the cost of the

Kia Carnival. Kia Motors Australia then came on board, discounting the cost of the vehicle even further. Another Sunrise Rotarian, Stephen Heilbronn, also pledged a major donation to the cause.

The businesses and individuals who donated to the project were: Page & Pearce, Suncorp Vero Golf Challenge, Allclear Printing, Fulton Hogan, Lee and Louise Cox, George and Lorraine Colbran, Laurence Lancini, Heilbronn Group, Northern Management Group, Finance One, AQIS, Mendi Group, SMCE and Bob Pack OAM QC.

"Project Tahlia demonstrates the real value of Rotary to our community," Tim said. "By working together and inspiring help from our corporate partners, we have made a significant difference to the lives of Cassy and Tahlia by giving them this beautiful new car, which will lessen the hardship they have to face every day."

"Cassandra had been struggling to lift Tahlia in and out of her car and was desperately in need of a vehicle that could be fitted with a wheelchair lift."



To watch the moving handover ceremony (NB: Get the tissue box ready... don't say you haven't been warned!) visit youtu.be/eSNKi9PctLU





PICTURED:
Dr Claire
Kelly and
Melissa
Hoyer.

Kicking off Mental Health Month

AUSTRALIAN Rotary Health's favourite time of year is October, Mental Health Month, because that's when we see Rotarians and the wider public go all out to help "Lift the Lid on Mental Illness" and raise money for mental health research.

On October 1, we kicked off Mental Health Month with a Hat Day media launch brunch in Sydney, NSW. This was an opportunity to show the media how important it is to support research that informs our knowledge about mental health.

One of our special guests that morning was Dr Claire Kelly, one of the researchers behind the teen Mental Health First Aid (MHFA) program, which Australian Rotary Health funded a trial of in 2014-16. In a Q&A with media personality Melissa Hoyer, Claire said kids are very unlikely to admit they are not okay.

"Claire specifies that rather than focusing on what we say when a child says they are not okay, we need to actually ask them."



"That is actually one of the reasons why mental health first aid is so important, because there have been various projects over the past, say, 20-25 years to encourage people to seek help for themselves, but they don't work particularly well," Claire said.

"You have to know enough about the problem to be able to recognise it in anyone let alone yourself; you have to acknowledge that, 'Oh, this is potentially something that's actually happening to me'. You have to see the benefits of seeking help as outweighing the drawbacks – which there is a great deal of stigma, internalised stigma, around and a real fear that if you seek help you will be judged."

"So what actually ends up happening, and this is not just across

mental health, but anywhere there is stigma, is that people are more likely to get help when someone they believe cares about them – that they believe is somewhat knowledgeable, at the very least – has actually approached them to say, 'Hey, I'm really concerned about you'."

Claire specifies that rather than focusing on what we say when a child says they are not okay, we need to actually ask them.

"Now, obviously, mental health first aid can't teach someone to diagnose a mental health problem, but you can recognise when someone you care about is not doing well and thinking about major changes in thinking and feeling behaviour that's really interfering with functioning."

"That could be about not spending time with friends and family, it could be about not doing so well at school, and it could be about just sleeping to literally get through as much time as possible. And it doesn't go away quickly."

"A couple of weeks is probably enough to start saying, 'Let's find out what might be going on here'."

The program has now reached tens of thousands of school students across Australia, and has gained the stamp of approval from international star Lady Gaga, who is rolling it out in schools across the US (see page 14).

**For more information
on teen MHFA, visit [mhfa.com.au/
courses/public/types/teen](http://mhfa.com.au/courses/public/types/teen)**

teen MHFA: results from a cluster-randomised crossover evaluation study^{*}

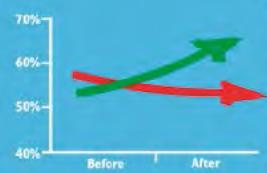
NUMBER OF STUDENTS

A total of 1942 year 10 students in 4 schools over 2 school years were trained in either tMHFA or physical first aid (PFA). Of these, 1116 completed evaluation surveys before and after the training.



CONFIDENCE IN HELPING A PEER WITH A MENTAL HEALTH PROBLEM

Students reported increased confidence in helping a friend with a mental health problem. Pre-training 52.2% reported 'quite confident' or 'extremely confident' vs 64.9% at post-training. Students who received PFA: 58.4% before vs 52.3% after.



RECOGNITION OF SOCIAL PHOBIA/ANXIETY DISORDER

Students who received tMHFA were three times more likely to report the correct label after their training than students receiving PFA. Correct recognition of social phobia/anxiety disorder: 45% before vs 58.2% after.



'More likely to talk to someone if they had a problem like depression'



'Had more helpful intentions to support a friend with a mental health problem'



'Were less likely to believe that mental health problems would make someone dangerous or unpredictable'



Positive changes to student attitudes towards people with a mental health problem.

Students who received the teen MHFA Program...



3 sessions of teen MHFA were compared with 3 sessions of physical first aid



'More likely to believe that depression is an illness, not a sign of weakness'



'Better recognised teachers and school counsellors as helpful with a mental health problem'*



*66.6% before 84.3% after



'Showed less desire for social distance'*

'Likelihood of rejecting a person with a mental illness in certain situations, such as working on a school project together'

^{*}Hart LM, Morgan AJ, Rossetto A, Kelly CM, Mackinnon A, Jorm AF. Helping adolescents to better support their peers with a mental health problem: A cluster-randomised crossover trial of teen Mental Health First Aid. *Australian & New Zealand Journal of Psychiatry*. 2018.

Cool Kids program recognised in NSW parliament

IN September, Macquarie University's Cool Kids program, which has received research funding from Australian Rotary Health over many years, was featured at the NSW Universities' Research Impact Showcase at NSW Parliament House.

Cool Kids, in its many variations, has improved the mental health of tens of thousands of children across the world, with its first ever anxiety program delivered via telephone, then CD-ROM and, since 2016, it has been made available online.

Children who go through the



PICTURED: The Cool Kids team: Dr Lauren McLellan, left, Professor Viviana Wuthrich, Professor Ron Rapee, Professor Jennie Hudson and Dr Ann Wigfall.

program show improved quality of life, with reduced rates of anxiety and depression that are sustained.

Without funding that has evaluated the program's effectiveness, Cool Kids might not be where it is today. This is one example of how your donation

can make a difference.

Intern psychologists from universities in Australia now learn about the Cool Kids program as part of their training, and around 1500 Australian clinicians and schoolteachers have completed training in the Cool Kids suite.



Did you know our researchers may be available to speak at your Rotary club?

Ever have trouble convincing your Rotary club that donating to health research is a worthy cause? We have a range of researchers available and willing to share their research with your club, which may help sway their decision. It is also great to see exactly where your donation is going.

In September, Australian Rotary Health PhD Scholars Bianca Kavanagh and Meghan Hockey (pictured) were invited to present their research to the Rotary Club of Highton in Geelong, Vic.

Bianca's research investigates whether and how personality disorder moderates clinical and epidemiological outcomes in psychiatric disorders; while Meghan's research is looking at the association between dairy consumption and mood and cognition. These two ladies were very well received.

If you would like to organise a PhD Scholarship recipient to speak at your club, contact Cheryl Deguara via cheryl@arh.org.au or 02 8837 1900.

Mental Health Research Grant recipients and Postdoctoral Fellowship recipients are also available. Contact Jessica Cooper via jessica@arh.org.au or 02 8837 1900 for more information.

**Please note, there is no guarantee that researchers will be available to attend all Rotary club locations. Speak to us to find out more.*



Hats off to Hat Day

During the month of October, we encouraged everyone to get involved in Hat Day. Here is what some of you got up to to show your support.



CLOCKWISE FROM TOP: Many clubs, including the Rotary Club of Broadmeadows, set up Lift the Lid awareness tables and collection tins at their local Bunnings Warehouse store; The Rotary Club of Brisbane Mid-City, Qld, hosted a Lift the Lid Ball to raise money and awareness for mental health; The Rotary Club of Mooloolaba, Qld, hosted its annual Walk for Mental Health to support Australian Rotary Health; The Rotary Club of Sandy Bay, Tas, took its bright Lift the Lid posters and collection tins to the streets.





Belmont reaches out to troubled teens

THE Rotary Club of Belmont, Vic, recently presented a cheque for \$160,000 to Headspace Geelong in support of its Social Inclusion Program.

The program is aimed at teenagers experiencing a range of mental health issues, who have become disengaged from education, training and social

settings. It uses a social outreach model to deliver support and interventions to help these young people gain confidence and assimilate back into the community.

The program targets isolated youngsters and offers them one-on-one mentoring support, as well as access

"We are making a major difference to the lives of youth in the Geelong region and these funds mean the program can be expanded to reach even more of those who need support."



PICTURED: Chair of Barwon Child, Youth & Family and Headspace Geelong manager John Frame, left, and president of the Rotary Club of Belmont David Yelland at the presentation of the \$160,000 cheque to Headspace.

to group sessions, to assist them build connections within the community and overcome isolation issues.

With no government funding, the Rotary Club of Belmont took on the program as a major community project in 2016, donating \$60,000 over a two-year period to commence a pilot program.

Based on initial feedback on the benefits of the program, the club held its first fundraising function in May 2017 and raised \$63,000, which enabled the program to cater for more young people in need of the service.

In May 2018, at the second annual fundraiser, a further \$65,000 was raised, enabling 300 one-on-one support sessions and 60 group sessions.



This year's fundraiser, attended by 330 people, far surpassed initial targets of raising \$73,000.

"The support from those present was tremendous," past club president Andrew Jones said. "At the end of the function we were able to announce that we had raised \$81,000 on the day, with a further \$81,000 provided by a donation to give us an amazing total of \$162,000.

"We are making a major difference to the lives of youth in the Geelong region and these funds mean the program can be expanded to reach even more of those who need support.

"We could not have achieved this remarkable result without the support of our members, our community partners Swagman tours, BCYF, Morris Finance, Bendigo Bank Business Banking and the Geelong Football Club and their supporters, customers and suppliers."

Guest speakers at the lunch included Paralympic gold medallist and seven times wheelchair tennis Grand Slam winner Dylan Alcott, TV and radio presenter Andrew Daddo, author Tony Park and Geelong Football Club recruiting and list manager Stephen Wells.

"This was a true community effort conducted in the true spirit of Rotary, where we were all inspired to make a difference," Andrew said.

"The Rotary Club of Belmont is committed to supporting this program for the next two years and looks forward to showing the business community in Geelong what Rotary can achieve."



 PICTURED: The late Peter Drummy, left, and Gerard Sell, of the Rotary Club of Belmont, led the fundraising committee for the Social Inclusion Program.



The unseen sufferers of addiction

WHEN Kerry Kirk, of the Rotary Club of Sunbury, Vic, got talking with Senior Sergeant Brad Towers during a backstage tour of Broadmeadows Police Station, the pair came to the mutual conclusion that "police are never going to arrest their way out of the drug addiction problem".

This brought to light a hidden group in need of support – the parents of offspring who are battling addictions.

"These parents are often withdrawn and nervous. Support services focus on the addicted child, while parents bear their strife and heartache unaided," Kerry said.

So, Victoria Police and the Rotary Club of Sunbury set about addressing this gap in the support network. They developed a community forum with the assistance of local doctors and psychologists, Odyssey House counsellors, the Hume City Council and the Self-Help Addiction Resource Centre (SHARC).

Titled 'You Are Not Alone', the forum aimed to answer the universal distress call of 'We don't know who to turn to!' and showed parents the many sources of help available to both themselves and their loved ones.

More than 70 parents attended the evening, where they heard from specialists including doctors, police, health workers and community referral services representatives. Guest speakers included Mark Eustice, a former AFL player, who

spoke about his journey through mental illness and addiction post-footie, and the manager of an ice-addiction clinic, who has had more than half a dozen referrals since the forum.

"Drugs don't discriminate," Kerry emphasised. "One of the speakers was a twin, a respected police officer. She told how her sibling had died from an overdose after a long battle with drugs. Same parents, same upbringing, but vastly different outcomes."

"All of the speakers empathised with the parents and demonstrated that they are not alone in this battle. I know of eight parent groups who have reached out and got support from one or more of the services represented on the night."

The forum was run as part of Rotary's Victoria Police Leaders' Mentoring program. Initiated by the Rotary Club of Central Melbourne, it is now in its 13th successful year and is VicPol's longest sustained leadership program.

Brad, a 30-year police veteran under the mentorship of Kerry, said that while there was initially a lot of tension in the room, participants soon settled in.

"Police and the drug scene are not always a comfortable mix and many parents want to stay unknown. But when someone said, 'We're all parents here', we felt the tension in the room relax, because people felt they wouldn't be judged. Two parents burst into tears afterwards and one said, 'If we'd had this help 10 years ago, we wouldn't be in the predicament we are now'."

Following the success of this initial forum, the Rotary Club of Sunbury hopes to run a repeat event within the next 18 months. While a lot of time was invested in preparing the forum, Kerry says the monetary cost was negligible.

"We put about 150 hours work into the evening, but the only cost to the club was \$200 for the venue hire. This is something other clubs in Victoria and nationally could easily replicate and I will happily share our format and materials."

For more information, contact Kerry via kerry.kirk9@gmail.com.



PICTURED: Speakers at the forum included Glen Hunter from the Self Help Addiction Resource Centre, left, Dr Ravin Sadhai, Senior Sergeant Brad Towers from Victoria Police, Leading Senior Constable Leonie Hill from Victoria Police, Keynote Speaker Mark Eustace, Jane Stone from Habz, Bryan Ambrosius from Odyssey House Victoria, Kerry Kirk from the Rotary Club of Sunbury and Rosemary Brown from Hume City Council (not pictured).

Big brekky for men's health

PROSTATE cancer is the most common cancer affecting men in New Zealand, with around 3000 new cases diagnosed annually and approximately 600 deaths every year.

It is important that men are aware of the signs of potential disease, and of the checking and screening tests available from their doctor.

Men with a first-degree male relative (father or brother) who has prostate cancer have a higher chance of developing it, and risk also

What are the risk factors?

The factors most strongly linked to an increased chance of developing prostate cancer are:

- **Age:** Prostate cancer is an age-dependent disease, which means the chance of developing it increases with age. The risk of getting prostate cancer by the age of 75 is one in seven men. By the age of 85, this increases to one in five.
- **Family history:** If you have a first-degree male relative with prostate cancer, you have a higher chance of developing it than men with no such history. The risk increases again if more than one male relative has prostate cancer. Risks are also higher for men whose male relatives were diagnosed when young.



Men over age 40 with a family history of prostate cancer should talk to their doctor about testing as part of their annual health check-up. For more information on prostate cancer, visit prostate.org.nz or prostate.org.au.

PICTURED: Guest Speaker Dr James Johnston emphasised that while prostate cancer is statistically the most common cancer affecting New Zealand men, it is very treatable – especially if detected early.

increases with age. Younger men are less likely to develop prostate cancer, but if they do, they are more likely to need treatment.

The Rotary Club of Waitara, NZ, recognises the importance of men's health and the reluctance of men to be pro-active, especially around prostate cancer. As part of Blue September – the Prostate Cancer Foundation's annual awareness and fundraising campaign – the club held an early morning breakfast on September 18 at the Waitara Service and Citizens Club. More than 185 people – aged from senior high school students to senior citizens – came along to take advantage of the cook up.

A specialist urologist from New Plymouth, Dr James Johnston, gave an interesting talk, acknowledging that many consultations prove not to be cancer, but other issues that can be quickly and effectively treated.

The underlying message is that while prostate cancer is statistically the most

common cancer affecting New Zealand men, it is very treatable – especially if detected early – and can be cured. Any male with urinary problems is encouraged to get it checked.

The Rotary Club of Waitara was gratified with the response from those who attended, the support from local businesses in selling tickets and donating provisions for the breakfast, the local newspaper *Waitara Angle* in promoting the function, and the Raleigh Restaurant for its support.

"We deem this to have been a very successful event that brought many members of the community together, generated awareness, and raised money for a very worthy cause," Noel Chilcott, of the Rotary Club of Waitara, said.

"We raised more than \$2200 from the breakfast, which we have donated to the Blue September campaign."

What are the symptoms?

Early prostate cancer rarely causes symptoms. Even when prostate cancer is advanced at the time of diagnosis there may be no symptoms. Where symptoms do occur, they are often due to non-cancerous conditions, such as benign prostate hyperplasia (BPH).

Symptoms of advanced prostate cancer may include:

- Unexplained weight loss;
- Frequent or sudden need to urinate;
- Difficulty urinating (e.g. trouble starting or not being able to urinate when the feeling is there or poor urine flow);
- Blood in the urine or semen;
- Pain in the lower back, hips or pelvis.

These symptoms are not always signs of prostate cancer, but you should see your doctor if you do experience any of the above.



Tackling Samoa's obesity epidemic

(Photos: Business Systems Limited)

THE tiny Samoan islands have among the highest rates of obesity in the world, with almost 80 per cent of the population considered obese or overweight.

And rates are on the rise.

According to a study published in online journal Diabetic Medicine, obesity prevalence increased from 27.7% to 53.1% in men and from 44.4% to 76.7% in women in the period 1978-2013.

The team behind Nobesity Samoa is working to change these alarming trends. Launched by Business Systems Limited in 2015 and assisted by the Rotary Club of Apia, Samoa, the program aims to instil healthy living and eating habits in children from a young age.

With #kidscankidswill as its catchcry, the program targets kids between the ages of five and 13 in a bid to address health issues before they reach secondary school.

"Samoa featuring in WHO's Top 10 list of obesity is of great concern," Nobesity Samoa coordinator, Visceta Meredith says. "The rise of non-

communicable diseases in Samoa is enough reason for us to start working with our young kids. We have to put a stop to the growing numbers. We have to be more proactive in our approach; be part of a solution or prevention so we don't get to the end result, which sees bad health as the root of many other problems.

"If we work with our kids today, we should see a decline in the rising number of health problems for Samoa in generations to come."

Now in its fourth year, the 10-week program sees kids partake in fun weekly sessions where they learn about the importance of good nutrition and being physically active.

Participation has been steadily rising, with an average of 20 to 30 children registering each round. Visceta says the program is proving successful, with noticeable improvements in the kids' performances on the field.

"They are able to run

for longer periods of time or longer distances without struggling to breathe. They are able to do more reps of strength exercises as we progress through each week. They are more alert about what they are eating and can identify each fruit and the vitamins they provide."

A leading factor in the country's rising obesity rates is increased access to high-fat, high-sugar and highly processed foods. For 3000 years, Samoans fished and farmed the islands of the South Pacific, thriving on papaya, breadfruit and taro, and catching and preparing fish with lime and coconut. But as unhealthy, imported foods began to flood supermarkets, the preference for cheap fast food overtook natural, local produce. Access to imported vegetable oil saw a rise in the number



**Rotary New Zealand
World Community Service
(www.rnzwcs.org) proudly
endorses the efforts of the
Rotary Club of Apia, Samoa, and
acknowledges the contribution
made to Nobesity by the Rotary
Club of Papanui and the Harold
Thomas Trust.**



of establishments selling cheap fried chicken, and cheap off-cuts of fatty meat like mutton flaps and turkey tails started coming in from New Zealand.

Against this background, one of the biggest challenges Nobesity faces is getting parents to support the program within the family home.

"The challenge really for the kids is the easy access now to all things sweet and not so good for their health," Visceta says. "But that is really up to the parents. They are the ones with the money and the ability to make the right choice."

Visceta says it's been heartening to see the kids themselves promote the message of good health within their homes and within the community.

"The kids are raising more awareness at home on what a proper meal is. It is great to see that our kids are the best carriers of health promotion messages in our community. The more we inspire and encourage them, the further these messages will go."

In addition to the 10-week programs, Nobesity runs a number of additional services aimed at parents. They hold gardening and cooking classes and



Trouble in paradise

According to the Global Health Observatory (who.int/gho/ncd/risk_factors/overweight/en) the world's 10 most obese countries are all located within the South West Pacific.

1. Nauru – 88.5%
2. Palau – 85.1%
3. Cook Islands – 84.7%
4. Marshall Islands – 83.5%
5. Tuvalu – 81.9%
6. Niue – 80%
7. Kiribati – 78.7%
8. Tonga – 78.5%
9. Samoa – 77.6%
10. Micronesia – 75.9%



host awareness campaigns and parent information evenings.

"Growing their own vegetable gardens assists families with the cost of staying healthy," Visceta says. "A vegie garden will ensure there is a sustainable supply of veggies for the family and kids will enjoy them more knowing they grew them themselves."

"Cooking is also a way of providing more options rather than going for fast food type meals."

"Our aim has always been encouraging kids to make healthier choices now and instil in them good habits that will benefit them in years to come, thus making Samoa a healthier Samoa."

Purple House opens dialysis clinic in APY Lands

IN early 2018, District 9520 embarked on applying for one of the largest Rotary Foundation global grants it has pursued, to support Aboriginal people in remote South Australia.

Rates of kidney disease are 15-30 times higher than the national average in remote Aboriginal communities. The reasons for this are complex and likely due to several factors, including increased susceptibility to kidney damage (a genetic predisposition), higher rates of diabetes and obesity, being born prematurely with small kidneys, constant infections, high blood pressure, poor access to good food, sub-standard housing and limited education.

Purple House is an innovative, Indigenous-owned and run health service operating from its base in Alice Springs in the Northern Territory.

Many Australian Rotarians will know of Purple House's work through its dynamic Chief Executive, Sarah Brown, who has appeared at many Rotary Conferences and Institutes.

Now operating 18 remote clinics and a mobile dialysis unit called the Purple Truck, Purple House is getting patients back home so that families and culture can remain strong. Purple House has achieved significant improvements in health and wellbeing through its community-owned, holistic model.

In 2006, Purple House partnered with the Rotary Club of Woden, ACT, which assisted in the redevelopment of a derelict building in Kintore. The relationship with Rotarians around the country and the world has continued since then.



After much lobbying from the community, primarily led by one of its members, Kinyin McKenzie, the Federal Government agreed to fund the building of a clinic at Pukatja, in the APY Lands (Anangu Pitjantjatjara Yankunytjatjara) in 2015 – the first such clinic inside the South Australian border. The build included the clinic and two homes for nurses, who would live in the community and help with dialysis. However, there was no funding for the dialysis equipment.

District 9520, led by the Rotary Club of Waikerie, SA, set about raising funds for a global grant and District



6040, Kansas City, US, came on board as the project's international partner, donating US\$26,000 from district designated funds. A Group Study Exchange team visited in April 2019 and took the opportunity to explore Alice Springs and see the work of Purple House.

Queensland's District 9630 gave US\$15,151, as did District 9520 from district designated funds. The South Australian clubs of Unley, Brownhill Creek, Yankalilla, Victor Harbor and the E-club of Australia Nomads, also made donations. With the approval of the grant application and funds



"It was a grand affair, with many speeches from community leaders. Children from Amata school danced, and the Ernabella school children had written stories and painted pictures for inside the clinic. There was singing and candle lighting for family who passed away before they were able to get home."

Kidney disease among Aboriginal and Torres Strait Islander people

In 2012–13, almost one in five (18 per cent) Aboriginal and Torres Strait Islander people aged over 18 had indicators of chronic kidney disease.

They are three times as likely as non-Indigenous people to have indicators of Stage 1 chronic kidney disease, and more than four times as likely to have indicators of Stages 4 and 5.

The incidence of end stage kidney disease for Aboriginal and Torres Strait Islander people is especially high in remote and very remote areas of Australia, with rates up to 20 times those of comparable non-Indigenous peoples.

Around nine in 10 Aboriginal and Torres Strait Islander people with signs of chronic kidney disease are not aware they have it and they are almost four times as likely to die from the disease than non-Indigenous Australians.

from the Foundation matching grant and World Fund, a total of US\$152,945 was raised, some AU\$223,000 at current exchange rates.

These funds allowed the clinic to purchase four chairs, including all the dialysis systems, water filtration, plus ancillary equipment and supplies. It also provided furniture, washing machines and other equipment for the nurses' accommodation.

Purple House completed the build in June this year and the clinic accepted its first dialysis patients in August. The clinic is capable of supporting up to 16 patients.

The official opening of the unit, named the Kinyin McKenzie Dialysis Centre, was held on Thursday November 7, with some 200 people from the local Aboriginal community attending, including the son of Kinyin McKenzie, who did not live to see the clinic. Other attendees included Federal Member for

Lingiari Warren Snowdon Irene Nangala representing the Purple House Board, and friends and past residents who travelled from interstate to attend the event. An ABC news team provided coverage.

"It was a grand affair, with many speeches from community leaders," said past District 9520 governor Jerry Casburn, who attended the opening.

"Children from Amata school danced, and the Ernabella school children had written stories and painted pictures for inside the clinic. There was singing and candle lighting for family who passed away before they were able to get home.

"In his address, Warren Snowdon recognised the significant contribution Rotary made and thanked Rotary for its continuing support.

"Attending on behalf of Rotary was, for me, a significant honour and one not soon forgotten."

Aphasia on the agenda

ACCORDING to the Australian Aphasia Rehabilitation Pathway, every six seconds a stroke will cause an individual to suffer from reduced quality of life. One of the ongoing disabilities, aphasia, is a condition few have heard of. But one long-time Rotarian is on a mission to change that.

Aphasia is a communication disability, caused by damage to the language centres of the brain. As well as stroke, the condition can be the result of a brain injury, brain tumour or degenerative disease, and sufferers experience impeded abilities to understand, speak, read and write.

While their intelligence remains unaffected, aphasia can take a serious toll on sufferers and their families, as Sean O'Brien, of the Rotary Club of Nepean, NSW, discovered first-hand. After a successful international career in sales, Sean suffered a stroke in 2013, with complications resulting in aphasia.

How to interact with a person who has aphasia

- Sit down with them and take time to talk
- Ensure only one person is talking at a time
- Find a common interest to chat about
- Talk normally, don't shout, but do pause between phrases
- Use an iPad or word book if you have one
- If you can't make the conversation work, let them know and try again later



PICTURED:
Sean O'Brien
and his speech
pathologist
Colleen Kerr
presenting
at the 2018
NSW Patient
Experience
Symposium,
Hilton Hotel
Sydney, NSW.

What would you do if you woke to a world where you could no longer say the words you wanted to say? If you're a Rotarian like Sean, you'd get out there and change the world. Hear from Sean about his first-hand experience with aphasia and learn how to interact with sufferers of the condition. Email Sean via sobee@optusnet.com.au to ask about him speaking at your club or district.

"For the first few weeks, I didn't have a clue what was happening. I was tired, I couldn't talk or hear, and I lost memory of numbers, some names and what do to with things like deodorant."

"For the first few weeks, I didn't have a clue what was happening. I was tired, I couldn't talk or hear, and I lost memory of numbers, some names and what do to with things like deodorant. It was a difficult time for my family as well, as we tried to understand what aphasia was," Sean said.

What followed was months of rehabilitation, but when he could Sean returned to Rotary, only to realise that no one knew what aphasia was or how to interact with someone with the condition. Through his speech pathologist, Colleen Kerr, Sean connected with fellow Rotarians and aphasia sufferers, Diane Finch and Bernard Chandra, and established The Aphasia Awareness Delegation, or TAAD, in 2015.

Sean has spent the past four years raising awareness about the condition through speaking at events and conferences, which Colleen says is remarkable, but not surprising, knowing Sean's personality.

"Sean has come such a long way.

He's gone from saying two words to getting up and presenting to rooms full of people. He will continue to improve, but aphasia is permanent; Sean will always have language challenges," Colleen said.

Using gestures or alternative words to communicate his message, Sean educates on how to interact with people who have speech issues through practical advice. And he's already reached thousands of people through speaking at Rotary clubs around Sydney and presenting at the National Brain Injury Conference and Australian Aphasia Conference.

With over 80,000 Australians living with aphasia, Sean hopes to continue raising awareness, with a long-term goal of making TAAD national.

For more information on aphasia, visit the Australian Aphasia Association at aphasia.org.au or the Aphasia New Zealand Charitable Trust at www.aphasia.org.nz.

Grants send trainee doctors abroad

SIX Rotary Feros Medical Grants, worth \$1500 each, have been awarded to Brisbane medical students to undertake their observership in a developing country.

Since its foundation, Rotary has given a high priority to reducing the burden of infection and disease by sponsoring immunisation programs, undertaking projects to provide potable water and sanitation, enhancing the outreach and effectiveness of health services, and improving the professionalism of health practitioners in developing countries.

It is against this set of broad objectives that the Feros Medical Grants scheme originally took shape and now operates.

The scheme began as an initiative of Dr John and Judy Feros, and has grown to become a signature project of the Queensland Western Cluster of Rotary Clubs (Brisbane) that includes Toowong, Brookfield, Ashgrove and the Gap, Kenmore, Paddington and Karana Downs.

The Feros Medical Grants are offered to University of Queensland (UQ) medical students who, at the end of their first year of the new postgraduate medical course, have to find, negotiate, organise and fund their own four-week observership placement in order to gain exposure to the practice of medicine prior to their clinical placements in years three and four of the course.

The scheme provides partial funding of airfares and equipment and/or medical consumables for students who spend their time in a remote area of need.

"If the students choose to do this placement in a developing country,

they are more likely to turn the observership into a hands-on practicum," explains Ross Pitt, vocational director of the Rotary Club of Toowong.

"Reports from previous grantees indicate students also return with a much more 'population health' outlook, with a strong commitment to reducing the burden of infection and disease."

Following 10 applications from UQ students, where applicants were ranked on their 'Good Standing' within the university, history of community service, and the location of their observership, six outstanding students were selected to receive a grant:

- **Nikita Devarajan** – Karapitiya Hospital, Golle, Sri Lanka
- **Andrew Kelly** – Maluk Timor, Dili, Timor Leste
- **Jordan Hannah** – Mount Meru Hospital, Arusha, Tanzania
- **Ashleigh Longford** – Lady Wellington Hospital, Manali, Himachal-Pradesh, India
- **Emily Bruggemann** – Lady Wellington Hospital, Manali, Himachal-Pradesh, India
- **Aathavan Shan** – Christian Medical College, Vellore, Tamil Nadu, India

Ross hopes that our 'Down Under' districts of 9600, 9570 and 9550 will embrace the Feros Medical Grants scheme to offer observerships within these districts.

"For this to happen, we need much stronger commitment to volunteering their services in rural and remote communities in Australia and in developing countries," Ross said.



"Reports from previous grantees indicate students also return with a much more 'population health' outlook, with a strong commitment to reducing the burden of infection and disease."

What drives the Rotarian who drives Rotarians Against Malaria?

WHEN National RAM Manager Dr Jenny Kerrison addresses clubs about the need for malaria eradication, she often starts with the African proverb: 'If you think you are too small to make a difference, you haven't spent a night with a mosquito'. Jenny is one small Rotarian making a big difference on an international scale.

A registered nurse and midwife, with a Doctor of Education and PhD under her belt, Jenny has devoted her time to improving the lives of others since 2010.

After joining the Rotary Club of North Hobart, Tas, in 2011, Jenny undertook a seven-year project to improve conditions at Kumudini Hospital in Bangladesh. Each year, she led a small team of volunteer nurses, infection control specialist and midwives to provide hands-on, practical help at the hospital.

"We set up a triage system at their emergency department, introduced postnatal and newborn observation charts, and introduced infection prevention methods on the wards and in the operating rooms. We also obtained AU\$90,000 from the Australian Ambassador in Bangladesh, which was used to improve patient care and nursing education at the hospital, and shipped 250 decommissioned hospital beds from a local nursing home in Hobart.

"I was very fortunate to have the assistance of my Rotary club, St Canice Village, and the Rotary clubs of Claremont and Sorell, Tas."

Now, Jenny is working to eliminate malaria in Timor Leste with the help of a US\$251,334 Rotary global grant. The grant had wide-spread support, with donations from 15 of the 21 Rotary districts in Australia, including 13 Rotary clubs in District 9800.



Jenny designed the program with RAM and the Timor Leste National Malaria Program (NMP), which is implemented in-country by NMP. The host partner for the project is the Rotary Club of Dili Lafaek.

"Timor Leste holds a special place in my heart because of my previous work in West Timor," Jenny says. "I also worked in Timor Leste between 2013 and 2015 prior to initiating this project. I was familiar with the country and am fluent in Bahasa Indonesia, so when the opportunity came up to lead a team of RAM volunteers to Timor Leste in 2017, I offered to be team leader."

"If you think you are too small to make a difference, you haven't spent a night with a mosquito."



PICTURED: Community members receive education on the use and care of long-lasting insecticide-treated bed nets following a mass distribution to Timor Leste.

"The grant enabled us to buy 40,000 bed nets for pregnant women. Pregnancy is a vulnerable time and malaria during pregnancy can cause maternal anaemia and spontaneous abortion, stillbirth, premature birth and low birth weight. So, when we help pregnant women, we also help the unborn baby. In the end, the families and whole community benefit from this Rotary global grant project.



PICTURED: National RAM Manager Dr Jenny Kerrison, centre, on a boat to Atauro Island, 25km north of Dili, Timor Leste, with Rotarians John Hayes and Shirley Hayes-Cornish.

OPPOSITE: Then president of Rotary Club of Dili Lafaek, Acku, left, and Jenny sign the Rotary global grant memorandum of understanding.

"We also provided 80 Hudson sprayers for indoor spraying of insecticides and funded training for community health volunteers and midwives in bed net distribution. The sprayers will benefit the whole nation of 1.3 million people."

Next year, Jenny will lead a small team of volunteers to three districts in West Timor that border with Timor Leste. The Rotary Club of North Hobart received a district grant for a community assessment in these districts, with the hope of developing a global grant to address cross-border malaria elimination.

"Eliminating malaria in West Timor will benefit both West Timor and Timor Leste," Jenny says.

On top of her role with RAM, Jenny is a director of Rotary Australia World Community Service (RAWCS) Ltd., The Rotary Foundation's technical cadre, and secretary for the International Rotary Action Group for Malaria Elimination (known as RAM Global), which she is helping re-establish after a decade of inactivity.

"I've helped the action group develop its strategic five-year action plan, which we are now rolling out.

"For RAM in Australia, my goal is to step-up our fight against malaria by accessing large grants to help eliminate malaria in our partner countries – Papua New Guinea, Solomon Islands, Vanuatu, Timor Leste and West Timor (Indonesia). Timor Leste will eliminate malaria by 2020, but our support for them is more important now than ever before if we are to maintain zero malaria in the country.

While life is certainly busy, Jenny says the long hours are worth it in the end.

"We live in a world of opportunities, but they are not equally distributed. If, through Rotary, I can help improve the lives of others – mothers and babies, nurses in Bangladesh, prevent malaria sufferings and deaths in families, women and children in Timor Leste and other neighbouring countries – then the long hours of volunteering are well spent."



Rotarian Malaria Symposium

June 05, 2020

Honolulu, Hawaii

Keynote Address

Dr. Philip Welkoff Director for Malaria at the Bill and Melinda Gates Foundation

Dr. Brendan Crabb

Worldwide Antimalarial Researcher
Melbourne, Australia

A discussion on the on-going research to develop a malaria vaccine.

Dr. Nanthalile Mugala

Country Director, PATH
Lusaka, Zambia

On research being done to block mosquito to human transmission.

John Fairhurst

The Global Fund
Geneva, Switzerland
Insight on the financing outlook for the control and elimination of malaria.

Afternoon Program

The afternoon program will provide a stimulating look into how Rotary is impacting malaria around the globe.

- In Africa
- In Asia and the South Pacific
- In the Americas



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RAM accelerating malaria elimination



MALARIA infections can be deadly, with the greatest disease burden on the poor, pregnant women, and children under the age of five. The disease is caused by the parasite Plasmodium and spread by female Anopheles mosquitoes.

Globally, malaria cases are increasing, including in Papua New Guinea and the Solomon Islands. In contrast, Timor Leste is on track to receive WHO malaria elimination certification by 2020/21.

Nearly 50 per cent of the world's population is at risk of contracting malaria. Globally, in 2017, there were approximately 219 million new cases and 435,000 deaths. Sixty-one per cent

of all malaria deaths were in children under the age of five. In 2017, PNG had the highest number of malaria cases (81 per cent) in the Western Pacific Region.

Prevention and early treatment are critical to saving lives.

In the 1990s, Rotarians Against Malaria (RAM), an Australian initiative, was established to help control and eliminate malaria in PNG and the Solomon Islands. Later, in 2006, RAM initiated support in Timor Leste and in 2020 will help accelerate malaria elimination in Vanuatu and West Timor (Indonesia).

Malaria prevention is cost effective and has been a key focus for RAM. The two key malaria prevention tools

are long lasting insecticidal nets (LLINs/ bed nets) and indoor residual spraying (IRS) (WHO, 2018).

RAM supports partner countries in different ways. In PNG, RAM Australia donates to the Chasing Malaria Program, where school prevalence surveys are conducted on children, and all positive cases are treated and given a bed net to prevent the spread of the deadly disease.

In the Solomon Islands, RAM provides basic hand tools to villages to reduce mosquito-breeding sites through the government's Healthy Settings Program.

"The Rotary club of North Hobart and RAM is managing a global grant to keep Timor Leste on track to receiving WHO malaria elimination certification by 2020/21."

In April 2019, a small RAM team visited the Solomon Islands to collect information for a DFAT grant application. They noted that the Western, Choisul and Isobel provinces, where the Healthy Settings Program was implemented, were successful in reducing the number of malaria cases.

In Timor Leste, the Rotary club of North Hobart and RAM is managing a US\$251,334 global grant to keep the country on track to receiving WHO malaria elimination certification by 2020/21. An important focus now for Timor Leste is to prevent malaria resurgence.

RAM is a national project supported by all Rotary districts in Australia and governed by the Rotary Australia World Community Service (RAWCS) Ltd. RAM needs your help to eliminate malaria. Please 'Adopt a RAM project'.

For more information, visit ram.rawcs.com.au.