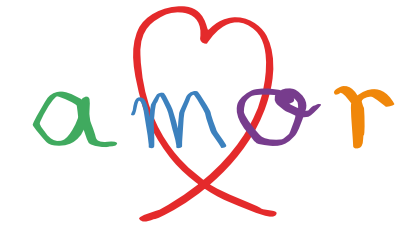


AIDE MONDIALE ORPHELINS RECONFORT



AIDE MONDIALE ORPHELINS RECONFORT



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UNAIDS Mission, Beira, Mozambique
March 2006.

Child Zé, 5 years old, lost his family
to AIDS. He is one of the reasons
behind founding AMOR

Tasha de Vasconcelos

Founder AMOR

Aide Mondiale Orphelins Réconfort

Tasha was born in Beira, Mozambique, to a Portuguese father and an English mother. Her career as a supermodel and actress took her to Paris, New York, Los Angeles and London, but she always remained extremely attached to Africa and the country of her birth.

This profile brought her back to her true life's journey, and over fifteen years of humanitarian work, returning her to Africa in 1996 with the Nelson Mandela Children's Fund, then the Unicef in 1999 in Bolivia, and Algeria, and finally in 2006 back to Mozambique as UNAIDS special campaigner for children with HIV.

From this trip in 2006, her foundation AMOR was born.

In 2009, she became the first and only ambassador of the Institut Pasteur, the place where the Aids virus was first identified - a great cause and a great honor for her.

President José Manuel Barroso gave to Tasha de Vasconcelos a new mission as Ambassador for European Union for Humanitarian Causes.

2010 saw the publication of her autobiography "Beauty as a Weapon" and she was also the subject of a documentary "La Belle Humanitaire" devoted to her humanitarian work.

In 2013, she was officially appointed Malawi Honorary Consul to Monaco.

In 2015, official partnership with AMOR and Monaco princely government.

In 2015, "Say No" campaign : to protect girls from sexual abuse and give them the right to education.

In 2016, on January 7 appointed UN Women Ambassador Global Champion Planet 5050.

"...At the age of 10, I was forced to flee the civil war. One million were killed. Four years later, at the age of 14, we faced another revolution in Zimbabwe. My grandfather was killed and we were forced to flee again leaving behind a country and the people with whom I shared my home and life, and most of all, a land wich I've always kept on the sole of my feet. I am African at heart..."



edito



I know that thanks to who we are and our action we are building a force of change which will improve the future of humanity.

To Whom It May Concern...



As founder and President of AMOR, a Monegasque Association to help save the lives of mothers and children worldwide and especially in the African continent where I was born, as an internationally renowned model and actress and humanitarian ambassador to the European Union, as author, autobiography "Beauty as a Weapon", let me share with you our work.

AMOR was founded in 2006, and in 2009, we opened the AMOR Maternity Hospital in Malawi. We have significantly reduced maternal mortality and safe motherhood is a serious battle in Africa, especially Malawi, a country with the highest rates of maternal death and HIV transmission from mother to child. Today babies are being born and lives saved because of the work of AMOR.

This has made me more than ever aware of the fight to combat maternal mortality where I am personally committed through AMOR. We must together build the basis that creates self worth sustainable development and **restores the natural dignity entitled to every human being**. This is the basis of humanity dignity and self esteem. By supporting these programs, we give aspirations to many orphans, that have been shattered and left behind as the head of the family, whose eyes are opened again.

The AMOR maternity hospital in Kasese, Malawi today has more than 5371 babies born. Because of the work 7 out of 8 babies are born HIV negative in a community of 200 000 patients. The HIV rate has dropped since we opened from 25 percent to 11 percent. We also provide outreach clinics to help the outlying area.





With the mothers.
Kasese, maternity Hospital

The AMOR Eye Clinic opened in April in Nandumbo Health Center and will be providing eye care to the community of Balaka, Southern Malawi. Two young Malawian opticians were trained in Europe and now will operate the facility and give eye care services to a community of 30 000 in this area.

The new maternal shelter with the Presidential initiative to support safe motherhood will give maternal health support to the hospital in Domasi, Malawi and this is to be built. We have a program of community midwives and nurses being recruited from the villages with the help of their chiefs that will be part of this program. 94 percent of donations go directly to the work on the ground.

The board of AMOR joins me in thanking you for supporting our work that is changing the lives of so many and giving hope and dignity to children for the future.

In the field of education we have launched the “say NO” campaign to protect young girls from sexual abuse and give them the right to education. Joint partnership for girls school with the Vatican.



”

Tasha de Vasconcelos

*Tasha de Vasconcelos
Founder AMOR*



Mother
of twins Madalidsu
and Joyce

Grandmother
of twins Madalidsu
and Joyce

AMOR KASESE MATERNITY HOSPITAL MALAWI



THE AMOR KASESE MATERNITY HOSPITAL

A profound need...

Maternal mortality came up by an encounter with Dr Chris Brooks who explained the desperate need to build a maternity in Malawi as that 1 mother dies in Europe compared to 190 in Malawi during childbirth. The mortality numbers were proof enough to alert my attention. The threat of HIV transmitting from mother to child was 7 out of 8 positive and since we opened the hospital in 2009, 7 out of 8 babies are born HIV negative. We have saved lives and also with our mobile unit have begun to change and give re-education of community values. We will need a strong and healthy Africa for the future; and it begins with the healthy births and sanitary conditions. Africa needs healthy AIDS-free babies and the mortality rate has dropped significantly this year. This year we have saved the lives of 2371 babies born and the visits to the hospital have tripled by the mothers, some of who walk five hours, to come to be consulted. This maternity hospital is the only one within hours of walking and many mothers and babies were dying as they were forced to give birth behind trees. This hospital is the beginning of the steps needed to build toward a community that will grow and be sustainable, instead of leaving a continent behind that is at risk of Aids, malaria and having a child of 10 as the head of a family.



The Team.

Kasese, maternity Hospital



The AMOR Kasese Maternity Clinic is making a high impact difference in Malawi - a country caught in the epicenter of the HIV/Aids pandemic and suffering a maternal mortality rate that is one of the worst in the world, almost 675 per 100,000 live births.

The clinic provides comprehensive pre-natal, twenty-four hour maternity and post-natal care of the women in the surrounding catchment area of some sixty thousand inhabitants. This clinic is equipped to handle a large patient load and anticipates more than forty babies each month.



Opening the AMOR maternity hospital in Kasese with H.S.H. Prince Albert II of Monaco and Dr Joyce Banda, on November 11th 2009





Malawi, one of the poorest countries in the world, is currently facing the threats of HIV/AIDS, food insecurity and poor infrastructure. Malawi has the highest population density in Sub-Saharan Africa, and life expectancy fell from 52 years in 1992 to 41 in 2004 largely due to the HIV/AIDS epidemic that plagues the country. Malawi faces a human resource crisis within its health service infrastructure exacerbated by a high mortality rate caused by HIV/AIDS. This has created a lack of capacity to deliver health services, especially in rural areas, where primary health care is severely compromised with only one physician and 26 nurses per 100,000 population. A series of World Health Organization surveys in 2002-2004 showed that almost 50 per cent of facilities are short of drugs, have inadequate means of communication and transport, and even lack supply of emergency drugs.



Visiting the maternity with HSH Prince Albert of Monaco and Dr Joyce Banda

The nature of the clinic's care programs begins in the communities with health awareness training to ensure better nutrition for expectant mothers as well as training local Village Health Officers to monitor women and look for any health complications. After maternal services are provided, post-natal care begins with the child being enrolled into the Under Five Health Care Program where they receive all essential vaccinations. If the mother is HIV positive, her health and that of the baby's is monitored closely and both are enrolled into the Preventing Mother to Child Transmission Program where Lifeline has seen phenomenal success in preventing the spread of the HIV virus.

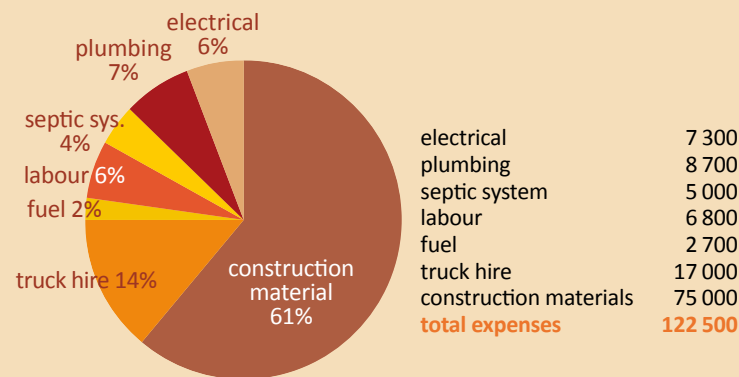
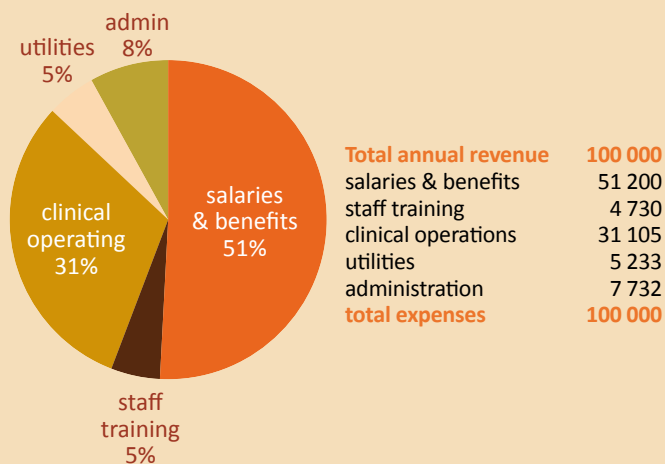
An ambulance service is also provided should serious complications arise at the time of delivery and the mother needs to be referred to the regional hospital.

ANNUAL REPORT

Since we have begun, 7 out of 8 births are now HIV negative. The percentage of deaths from AIDS has dropped in the last three years from 25% down to 11%. The hospital now administers services to 300,000 patients a year compared to 100,000 three years ago, so the system is strained and funds needed are compounded. 1371 babies have been born since the opening of the maternity hospital. It is gratifying to know that 94 cents of every dollar raised goes to the medical efforts in Malawi. The hospital is run by a well-trained and efficient medical team of medical practitioners, nurses and pharmacists. Additional funds are needed for medicines, and short falls due to the worldwide economic down-turn. An environmentally friendly system of brick making has been developed which requires no timber to be burned therefore saving forestation. The aim is to develop a self-sustainable community around the hospital. Also important to note that we have begun to charge a small fee for medical services as this is the way to begin to make the community self sustainable and an Africa that can grow forward. This is the key to not just give them the fish but show them how to fish for themselves.

AMOR clinic budget (US\$)

Clinic construction (US\$)



Total annual revenue	100 000
salaries & benefits	51 200
staff training	4 730
clinical operations	31 105
utilities	5 233
administration	7 732
total expenses	100 000

The AMOR Maternity Clinic employs highly trained nursing staff and is committed to their ongoing training to ensure the best of quality maternal care programs to the women of Kasese and surrounding districts.



Birthing beds in place



Interior finishing in progress



Clinic Statistics

61 percent in the pie chart and figure USD per year since 2009 up until today. There were 200 000 patient visits in 2009. This means that our medical staff at the Ngodzi and Kasese sites are treating an average of 8 250 patients per month... through treatment at our two static clinics, fifteen outreach clinics and our two maternity hospitals and participation in our various HIV / AIDS programs.

Our patient load has quadrupled over the last four years from 55 000 in 2006, 90 000 in 2007 and 120 000 in 2008.

Our field program is supported by approximately 70 qualified and dedicated health care practioners.

These statistics are really quite remarkable in making a substantial difference in improving health care and saving lives.

Deforestation is a serious problem in Malawi. Every year thousands of trees are cut to use in brick making kilns. AMOR Association is committed to conserving the environment and has used non-fired environmentally friendly Hydraform bricks in the construction of the AMOR Maternity Clinic





Medicine room at the AMOR hospital



With little baby Madalitsu



Weekly school classes for orphan children



The AMOR Maternity Clinic employs highly trained nursing staff and is committed to their ongoing training to ensure the best of quality maternal care programs to the women of Kasese and surrounding districts.

A day at the AMOR clinic A STORY BY MARION CHIKUSE

“My name is Marion, I am the lead nurse at the AMOR Lifeline Malawi Kasese clinic. I am also a wife and a mother of 2 children. My day at the clinic starts with a prayer with the staff, and a brief update on any incidences. I allocate nurses and patient attendants to various services. Today, I am covering at the maternity wing and Antenatal clinic. Since there is no patient in active labor, I have sent the pregnant mothers on the Antenatal registry list for immunization and HIV counseling and testing and then conduct health education on birth preparedness and other topics of relevance. On consultation, I conduct an examination and offer specific counseling and as the need arises give medicine, then she is done for the day and given a date of next appointment. All the documentation is put in a register as well as the mother’s health passport. Today two mothers have tested HIV positive, I have immediately referred them to the ART clinic. As I am going through the antenatal register analyzing the day’s data, a Patient Attendant has just come to report that a woman having convulsions in the maternity ward. I immediately administered an intramuscular injection of diazepam and assigned the Patient Attendant to check vital signs while I commence an intravenous infusion. The woman’s blood pressure is normal, the convulsions have stopped but she has a fever. It could be malaria I have put her quinine and immediately refer her as an emergency to the District Hospital which is about 10 km from the Lifeline Malawi Health Centre. I dropped everything and jumped in the ambulance with her, back in the ward from the referral centre I compiled a report for the day, checked supplies and handed over to the nurse on duty for the night. Its 5.00 pm, time to go home to rest my aching feet. The AMOR/Lifeline maternity has delivered 2371 babies since it opened in 2008.” Marion Chikuse, Lead Nurse/Midwife - AMOR Lifeline Malawi Kasese Health Centre.



Outreach mobile clinics with Lifeline Malawi

Cambridge trained Dr. Brooks, M.A., M.B., B.Chir., L.R.C.P., M.R.C.S., D.T.M.H., along with his wife Heather and daughter Chloe, left a successful medical practice in Canada to establish LM's first medical outreach in the lakeshore community of Ngodzi, Malawi - a rural community of 40,000 people some 100 km southeast of the capital city of Lilongwe. The health conditions and medical needs of the local Yao tribe's people were desperate, as there were no trained medical personnel and there was no local access to medicines.

From very humble beginnings, Lifeline Malawi's work has blossomed into a formidable success that treats some 150,000 people a year from two established rural health centres located in Ngodzi and Kaseke. Additionally, numerous mobile clinics reach deep into rural areas of Malawi to bring medicine to the people and have greatly benefited the overall health of these communities.

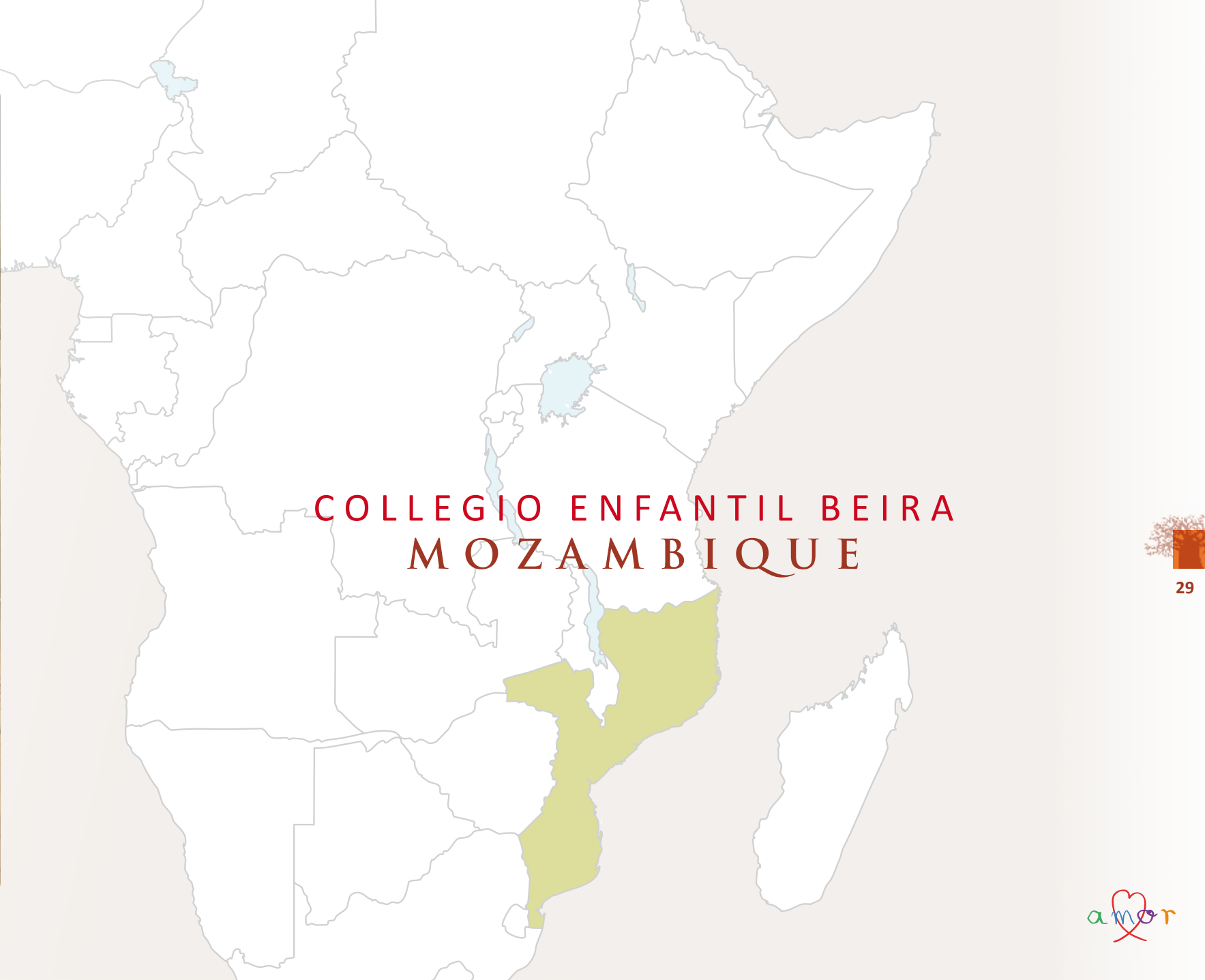


Outreach clinic with Dr Chris Brooks, Dr Halden Ndjiko and nurse

DR. CHRIS BROOKS FOUNDER AND PRESIDENT, LIFELINE MALAWI

"In each of our two clinics and numerous mobile clinics we see well over 500 people a day - and the growth trend seems to have no end in sight. Still, we are making a real difference in health care in Malawi with significantly reduced rates of HIV/AIDS and other serious diseases. We are thrilled that AMOR has enabled us to bring quality maternal care into a region of Malawi that is in desperate need."





COLLEGIO ENFANTIL BEIRA
MOZAMBIQUE

COLLEGIO ENFANTIL

The target group

The main target group are children from the ages of 0 to 6 years old, that are found in a situation of extreme risk of survival. The children are sons/daughters of families that have passed away or live in very difficult socio-economic situations.

The families are from 13 districts of the Sofala Province and Beira City in Mozambique. The main causes of provisional hospitalization are mothers dying after labour. The number of children that confronted these problems, has been increasing by the day especially because of HIV/AIDS.

The job of attending to the children is planned and coordinated by a team of forty people. We work all year round, 24 hours a day.

Other NGO partners with us are World Food Programme UN, Ministry of Health and Beira Central Hospital.









Objectives

The objectives of the plan are the following: Lessen the impact of HIV/AIDS on orphans and vulnerable children; develop the institutional capacity in order to act in the area of intervention of HIV/AIDS; develop the community's capacity to take part in the care of HIV/AIDS orphans and vulnerable children; make sure the management and assessment system is working to manage and assess the response.

Previous propositions are linked to one of various factors that have directed the design of this project. This project is designed to significantly contribute to the efforts undertaken either by the government or by the society's various institutions which aim is a combined intervention of activities.

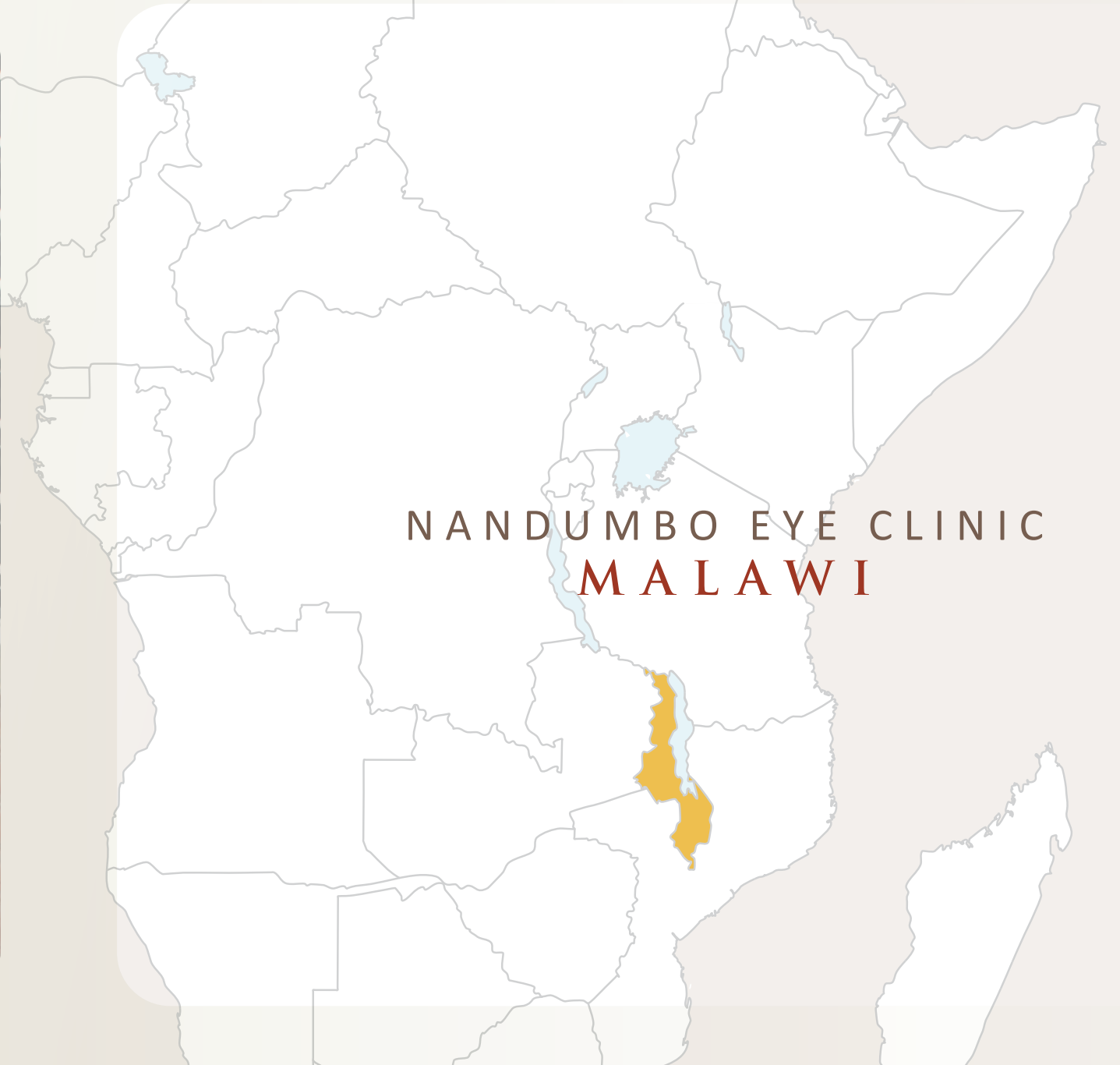
The project will associate various components in its introduction and execution, particularly vocational training, pre-schooling, and rehabilitation and psychosocial support to the orphaned and vulnerable children.



Visiting and meeting with Armando Guebuza, President of the republic of the Mozambique



With Michael, Maphtso and Wells Sakala



NANDUMBO EYE CLINIC
MALAWI





NANDUMBO EYE CLINIC

AMOR has opened an eye clinic at Nandumbo near Ulongwe in Machinga District in Malawi. For this, two trainees, Mr. Michael Kathumba and Mr Maphasto have completed and undergone training during last September with the help of donor Afflelou Foundation as well as the Malawi Ministry of Health. They've learned the following subjects :



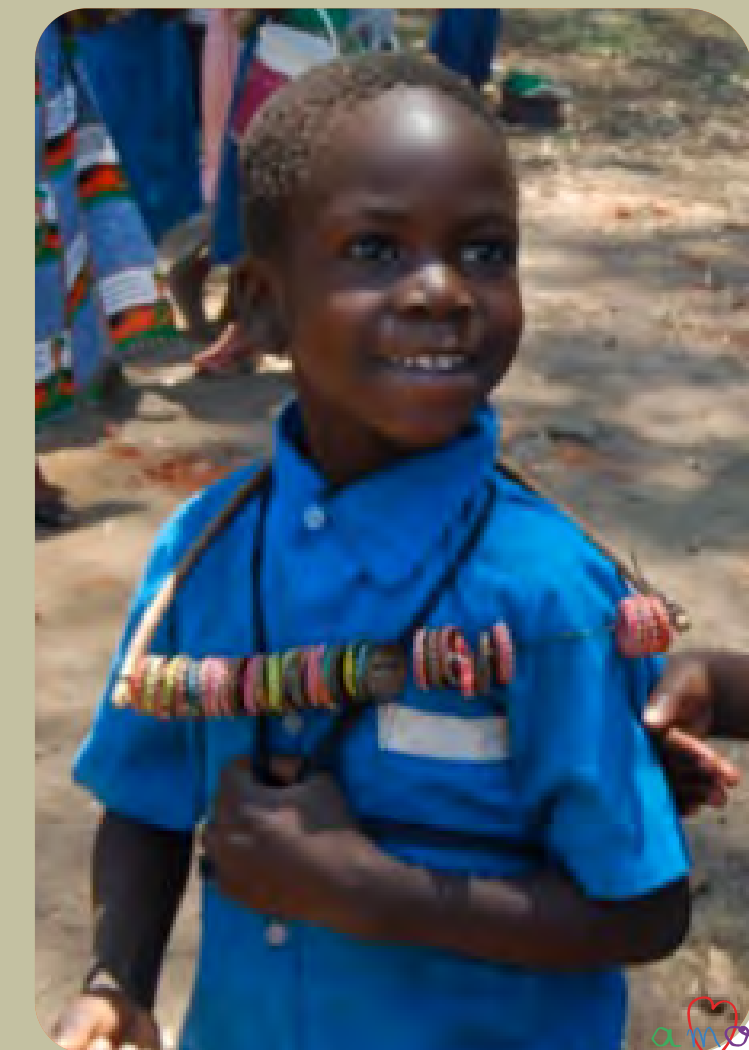
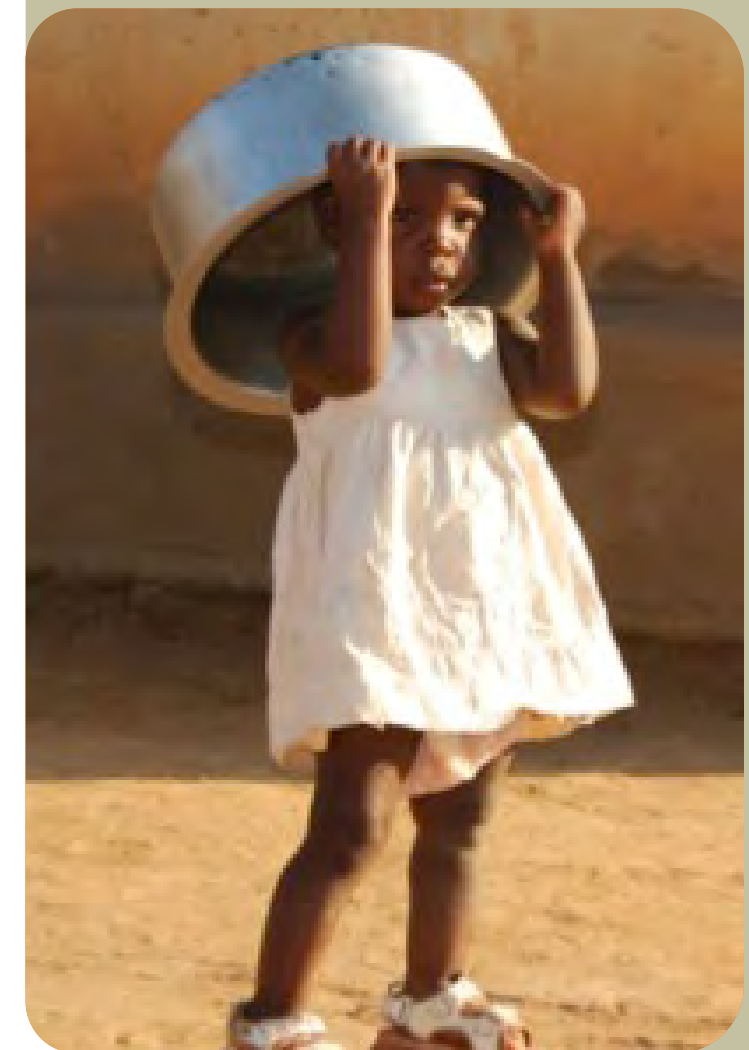
Michael, one of our two Malawian trained opticians

The eye clinic materials just arrived

- Different eye anomalies and the ways to correct them.
- How to use the main machines
- How to screw the glasses and also to center, to adjust, to set, to polish the lenses
- How to define the type of frame people need (according to the correction, the face etc)
- How to repair a pair of glasses in case of damages.



A detached portable house has been delivered to the Ministry of Health. This contains a refractometer (an instrument used to detect eye anomalies) as well as a machine to polish glasses. The donor has also sent 2000 pairs of glasses for adults and 2000 pairs of glasses for children.





MATERNITY SHELTER IN ZOMBA
SOUTHERN MALAWI





Meeting at State House in Malawi on August 14th 2014 with His Excellency Professor Peter Mutharika, President of the Republic of Malawi.

Laying foundation stone for a maternity shelter at Domasi, Zomba in Southern Malawi, with Dr. Joyce Banda, on 1st January 2013.



The Presidential Initiative on maternal health and safe motherhood

Safe motherhood and maternal health, is key to see that no woman dies while giving birth. Presently, 675 women for every 100,000 live births die of maternal related complications. “This is unacceptable and with the assistance of well-wishers like Tasha, I will do all I can to ensure that we reverse the situation,” she said at the rural hospital where she was born some 62 years ago.

She commended Tasha for her support and commitment to help Malawian women. “You are loved in Malawi because of your work and you are not known as Madalitso (Blessings for nothing),” said the Malawi leader who has so far mobilized support for the construction of six waiting homes across the country since she ascended to the presidency in April last year.

Tasha who was born in Mozambique and was adopted by Malawi, said she has a passion for Malawi and in particular Malawian women, “who have touched my heart”. “I am speaking today on behalf of all women, wives, single mothers, daughters and sisters. We can join together to help change and make a difference.”

“In my role as European Union Ambassador for Humanitarian Causes, I will continue my work of serving. As an International supermodel, I encourage all you young people to follow your dreams because anything is possible with hard work.”



Goal: To accelerate the reduction of maternal and neonatal morbidity and mortality towards the achievement of the Millennium Development Goals (MDGs).

Objectives: To increase availability, accessibility, utilization and quality of skilled obstetric care during pregnancy, childbirth and postnatal period at all levels of the health care delivery system.

To strengthen the capacity of individuals, families, communities, Civil Society Organizations and Government to improve Maternal and Neonatal Health.

Interventions: Currently, the initiative is implementing different activities to reduce maternal and neonatal deaths in the country.

Community mobilization and training of chiefs: Capacity development of chiefs, opinion leaders and their communities is part of integrating development knowledge for national development strategies.

Training of skilled community midwives: Increase numbers of skilled and trained midwives. 158 community midwifery students are in various CHAM nursing colleges. Plans to train over 1000 community midwives by 2014.



CONSTRUCTION OF MATERNITY WAITING SHELTERS

Shelters are being built to ensure close monitoring of pregnant mothers and encouragement to seek quality maternal health care. Seven shelters are being constructed in various districts; Mulanje shelter has been complete and handed over. These are under construction, Dowa shelter Balaka shelter, Karonga shelter, Mchinji Mkanda shelter, Lumbadzi shelter and Maternity Unit at Senior Chief Kwataine's. The Maternity unit has been completed and only requires furniture, staffing and medical equipment.



APPEAL FOR SUPPORT

Training of 1000 community midwives by 2014.
Each student at U\$ 3000.

Construction of 130 Maternity waiting shelters.
Each shelter for 32 beds at U\$ 80 000.
Each shelter for 24 beds at U\$ 70 000.

Training of over 20 000 Chiefs by 2014.
At least 6 000 at U\$ 200 per chief amounting to U\$ 1.2 million per year.
Drugs, equipment and resources for midwifery care at maternity units.



Meeting in Brussels with President Jose Manuel Barroso
 appointment as European Union Humanitarian Ambassador
 8th March 2010



Meeting with Princess Astrid Of Belgium and with President José Manuel Barroso

Ambassador European Union for Humanitarian Causes

“I hope to sensitize the member states to pursue their engagement toward developing countries notably in the context of the Millenium objectives.”

“The Millenium objectives” for the developping stopped in 2005 by the European Union preview the realisation of engagements in 12 domaines (commerces, environment, fishing, research, migration...)

“I have been fighting since a long time against poverty in Africa. I feel only naturally and totally concerned by the 79 million Europeans where 19 million children are living under poverty level.

This is why I decided to support and engage as Ambassador to the European Union in this cause for combating poverty and social exclusion.”

On the 79 million Europeans under poverty level, the majority of them encounter serious obstacles to access employment, education, housing and financial and social service. This situation have been deeply agravated by the world economic crisis which has brought about a recession and augmented unemployment in all the countries.





UN Women ambassador Planet5050 Global Champion

Tasha de Vasconcelos is honored to be appointed as a UN Women Global Champion for Planet 50-50 by 2030.

Our champions are women and men who have made gender equality and women's empowerment their cause and mission in life. Hear from them on why they have made women's rights their top priority and what you can do to join them!



Our champions are women and men who have made gender equality and women's empowerment their cause and mission in life. Hear from them on why they have made women's rights their top priority and what you can do to join them!

See more at:
<http://beijing20.unwomen.org/en/voices-and-profiles/champions>



1ST SPEECH AT  UN HEADQUARTERS

PLANET 50-50 BY 2030
STEP IT UP
FOR GENDER EQUALITY





CARITAS - CENTRE D'EVEIL DES TOUTS PETITS
MAURITIUS



CARITAS CENTRE D'VEUIL DES TOUTS PETITS

Soutiens et aide des enfants très fragiles 1-8 ans pour avoir la possibilité de manger et apprendre a ce centre qui aide car ou ils sont sans parents et famille et en situation de détresse.





SHELTER FOR WOMEN AND CHILDREN IN DISTRESS MAURITIUS



SHELTER FOR WOMEN AND CHILDREN IN DISTRESS

Our Objectives

- To encourage and support women and children in difficult situation in their future.
- To protect and care for the emotional and psychological needs of the children and women involved.
- To offer support to families and offering individual counseling and group counseling.
- To see through their full education especially for those who are academically geared.
- To prepare children for job training so that they can reintegrate society again as a responsible citizen.





Our Mission

The Shelter provides a comprehensive set of domestic violence services, and is regarded as a professional, stable, mission-driven organization governed by a dedicated volunteer Board of Trustees with the day-to-day operations managed by an experienced and committed staff. The mission adopted by the Shelter is:

- To provide protection, safety, intervention and support to Women and Children impacted by domestic violence and other abuses
- Through education and other services the shelter empowers women and children to promote equality and respect in all relationships, and advocate for the fundamental rights of every individual to a life free of intimidation and violence.







REFUGIO ABOIM ASCENSÃO

We support Refugio Aboim Ascensão le program Emergencia Infantil.

The Refugio provides professional care services all year to benefit at risk children from 0 to 6.

This project is very special as it is helping the most vulnerable and fragile.

This project was the first and we will keep helping these children that are in the most fragile circumstances.

Refugios main purpose is to provide these children with a safe structured happy and healthy environment, WHILE GIVING THEM TOOLS to develop confidence and self esteem for the future.



SANTA MARIA RAPHAELA TASSE PROGRAM
PORTUGAL

SANTA MARIA RAPHAELA TASSE PROGRAM

Help the self esteem and success and give education to the children: Santa Maria Rafaela is the nuns foundation that we are supporting.

It is based on the Tasse program which helps with the schooling and education for the children. (between 5 to 18yrs)

Tasse is in Bairro de Fonte da Prata, a very poor area. These children are marginalised and or orphaned or from broken families or refugees.

These refugees come from some of the following countries Cape Verde, Brazil, Guinea Bissau, Angola and Mozambique and of course including the local community.

This project helps the community and is under the Nuns sisters supervision. We will continue to support them from AMOR. These are our fist projects in Europe. Very significant step for our mission to serve humanity which is very close to my heart.





Malawi, 11th Nov 2009. Opening of the AMOR maternity with H.S.H. Prince Albert II of Monaco

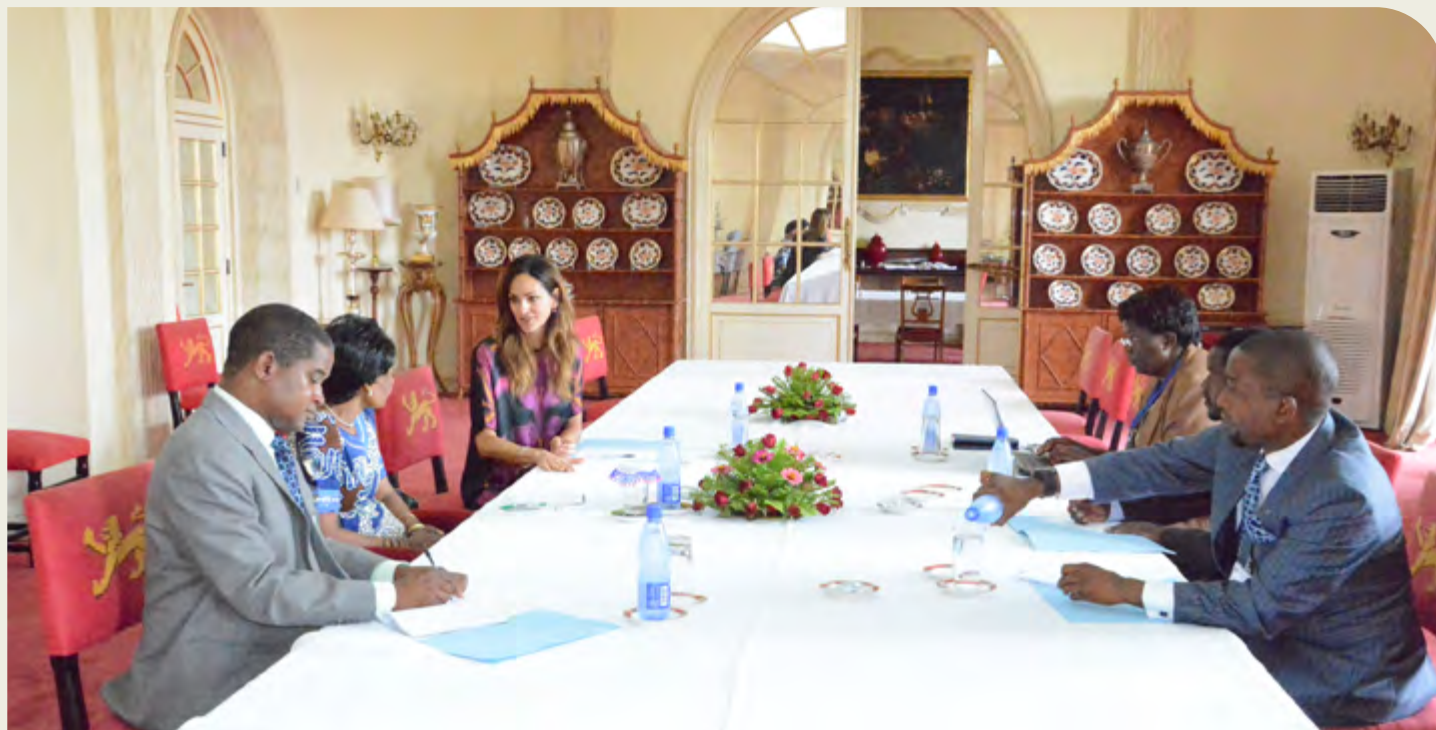


Press conference in Zomba, Malawi

COLLABORATIONS AND PARTNERSHIPS

Our Missions and Goals :

“ One of the best guarantees for getting countries on the faster track to less poverty and more opportunity is investing in maternal health and reproductive health programs Joy Phumaphi, Vice President for Human Development, World Bank ”



Official Meeting at Kamuzu State House, Lilongwe Malawi on January, 15th 2015

- Estimate the situation of the care in cancer research of the country and general house programme.
- Meet the government officials after this evaluation.
- Bring an immediate sanitary help under the form of small equipment.
- Estimate the feasibility of a CHPG - Queen Elisabeth hospital Bantyre project.
- Poverty is one of the root causes of environmental degradation in Malawi and is at the core of the government's development agenda for foreseeable future.

«WHERE THERE IS POVERTY AND SICKNESS, INCLUDING AIDS, WHERE HUMAN BEINGS ARE BEING OPRESSED, THERE IS MORE WORK TO BE DONE...»

NELSON MANDELA, Former President of South Africa and Nobel Peace Prize recipient



Gift of the Princess Grace Hospital and of the Mairie of Monaco



The Princess Grace Hospital has made a significant donation of important medical equipment and material, especially 40 medicalised beds, 20 wheel chairs, medical chairs and children's beds, etc.

The Princess Grace Hospital is supporting the engagement of AMOR and made the wish that, in the future, be privileged partners in the actions supported by the high patronage of H.S.H. Prince Albert of Monaco.

Following a meeting with the founder of AMOR, with the Mayor of Monaco, Mr Yann Malgherini, Adjoint au Maire, Délégué with Mrs Nathalie Vaccarezza, Chief of Social Services actions for "Petite Enfance", Mr Georges Marsan, Mayor of Monaco, has confirmed that the Mairie wished to support the project of AMOR.

This partnership can be maintained in the future and developed to every kind of material and equipment, in accordance with the needs and renewal of baby equipment.



22 tonnes of medical
and children's hospital
equipment



Partnership with Monaco Princess Grace Hospital : Humanitaire mission to Malawi Doctor Georges GARNIER - Doctor Charles FERRARI

From Saturday 1st November until Wednesday 5th November 2014 a humanitarian mission in collaboration with the International Cooperation of Monaco with the initiative of Mademoiselle Tasha de VASCONCELOS, Consul of Malawi in Monaco and internationally renowned Top-Model, took place in Malawi.



The goal was to evaluate the cancer programme and bring medical treatment and equipment to the country with an official collaboration and exchange programme to train doctors. Miss de VASCONCELOS supported this initiative between the Monaco Princesse Grace Hospital and the Blantyre Queen Elizabeth Hospital.

This mission was carried out by a Monaco medical-surgical team with chief oncologist and surgeon Dr Georges GARNIER and Dr Charles FERRARI.



Collaboration with Monaco Princely Government : The Project

- Direct beneficiaries: pregnant women from the region of Thyolo (120.000 inhabitants).
- Indirect beneficiaries: the families of the women who are pregnant who will be taken care off in this hospital.
- General objective: contribute to the reduction to the rate of maternal mortality in the region.
- Specific objectives:
 - Reinforce the access for women to services of medical health and neonatal help in the district.
 - As a greater result, the maternal mortality rate will be reduced.



Benefit of building a women's waiting maternal hospital shelter at Bvumbwe - Thyolo District and Machinga

Thyolo District has a population of about 600,000 people and has 1 district hospital, 28 primary health centres - of which Bvumbwe is the largest one.

Bvumbwe trading centre has a population of 120,000 people. It is located on the main road from Blantyre going to Mulanje (25 kms from Blantyre). Bvumbwe residents are mostly employed by tea estates as casual labourers.

Some of the problems being faced in Bvumbwe are:

- HIV prevalence rate of 15% - high TB rates amongst HIV patients.
- Understaffing in health centres.
- Low staff morale due to meager salaries for health care workers.
- 100-1500 health care workers per 100,000 people for Thyolo district.
- Long distances to the nearest health facility.
- Two thirds of Thyolo population are under 25 years old.
- Women in Thyolo have an average of 5 children in their lifetime.
- **1 in 4 women ages 15-19 have begun child bearing.**
- **1 in 6 women give birth at home.**
- **1 in 6 deaths of women 15 to 49 years old are due to maternal-related complications.**
- Complications from unsafe abortion rates amongst teenagers - 30 every month.



The shelter will be KEY to reducing/stopping some of the bad statistics above - such as maternal related complications and deaths; not giving birth at home and improving safe motherhood at Bvumbwe and Thyolo District in general!

The Objective of the Project is to achieve rapid and sustainable improvements in Malawi's maternal death indicators in Thyolo District by investing in infrastructure - a 24 bed waiting home shelter! Maternal mortality rate in Malawi is 1 in 36 women.

"The problem with maternal mortality is generally that the woman doesn't have access to proper emergency obstetric care, is unable to reach the facility in time, or once she reaches the facility, there is limited capacity to deal with the problem," said UNC Project-Malawi doctor Jeff Wilkinson, MD, associate professor of gynecology at UNC and leader of the project. "So the idea of a maternity waiting home is that a woman who lives remote from a health care facility or is deemed to be high-risk in pregnancy will come to the home early and either await onset of labor or in some cases be scheduled for an elective Cesarean delivery, if needed." [Source: UNC]

Collaboration with Prince Albert II Foundation : Planting first tree as a symbol

Poverty is one of the root causes of environmental degradation in Malawi and is at the core of the government's development agenda for foreseeable future.

We have the platforms as churches, community meetings, and funeral services among others which shall be used to raise awareness. In the case of Malosa students we have established environmental education clubs. The project may reach up to 300 000 people with the messages about taking care of the environment.

We will also integrate local representatives into the decision-making process in order to empower local communities in the management of natural resources.

As the Anglican Diocese of upper Shire we wish to plant 1 000 000 trees in the space of 5 years of which this year we shall target about 200 000 trees.



Collaboration with Vatican - Girls school project with First Lady of Malawi, Gertrude Mutharika

In brief the girls in Malawi face early and forced marriages from the age of 6 years or even earlier through betrothal. 5% of children are married before the age of 18 years. There is acute poverty high illiteracy levels early pregnancy lack of knowledge and skills to negotiate for safer sexual intercourse and to say no without feeling guilty. School drop out currently standing at almost 90% by tertiary education among others. The negative cultural practices aggravate the situation.

Construction of a catholic girls hostel for 180 beds in Archdiocese Lilongwe, Malawi, to protect young girls and give them safety and education under the archdiocese under archbishop Tarsizio Ziyaye. This will prevent school dropout, early marriage, violence, violence to abuse and discrimination.



Governance



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TASHA DE VASCONCELOS

“Beauty at the service of humanity

“La beauté au service de l’humanité”



PRESS

<http://www.amorinternational.org/press/>



VIDEOS

<http://www.amorinternational.org/videos/>



International actress and supermodel Tasha de Vasconcelos is in the country on a 10-day tour.

The actress, also a UN humanitarian ambassador, arrived on Wednesday evening and will be making an extensive tour of the country on a mission to create awareness and launch projects on maternal mortality.

Tasha has starred in several blockbuster movies, including Johnny English, Fatal Attraction and Dot The I. She has also starred in several TV shows like Perfect World, Largo Winch, Relie Hunter 2 and Murder On The Orient Express.

Speaking to Word Is upon her arrival at the Jomo Kenyatta International Airport, Tasha said she was honoured and looking forward to her stay in the country.

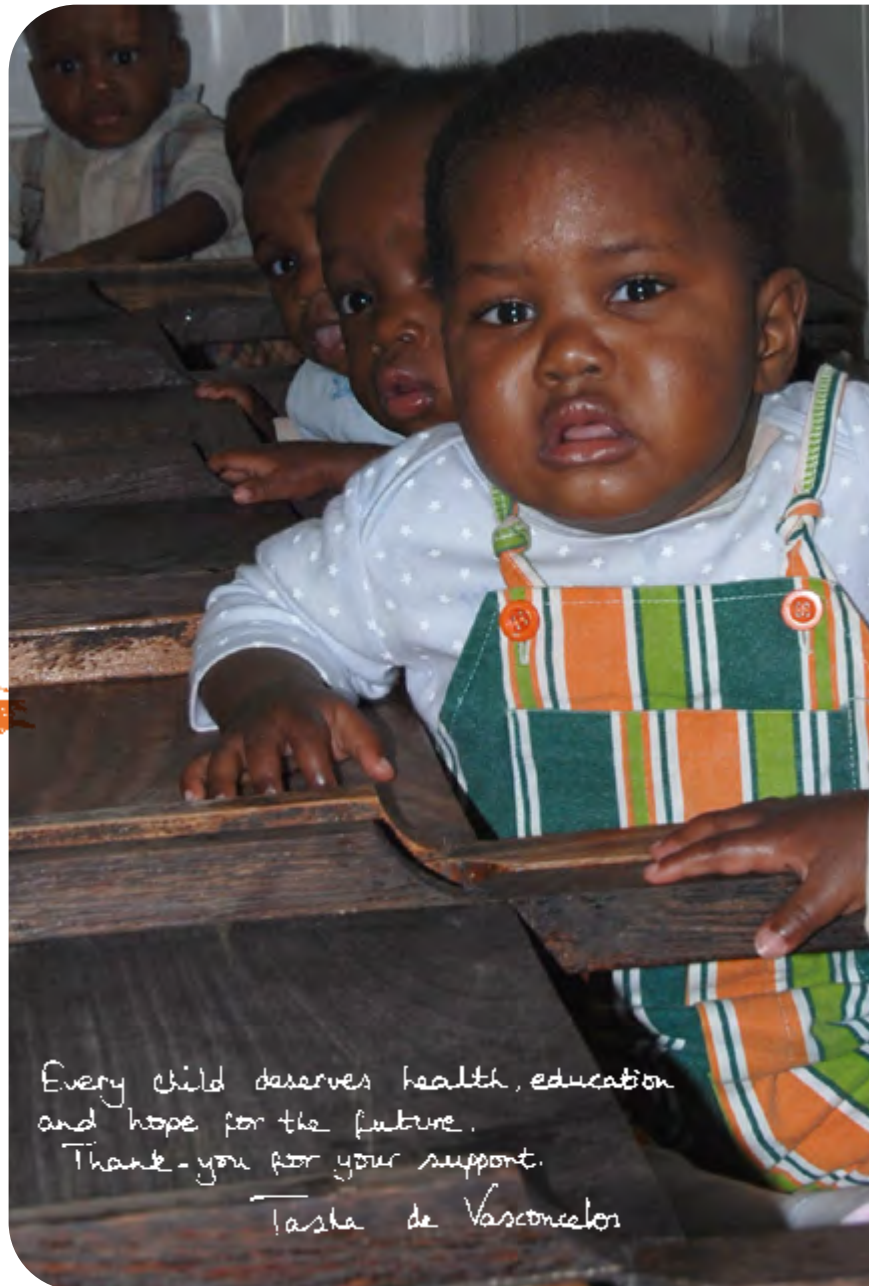


Kenya ONU mission at Lewa



Supporting Program for Women in Nairobi





AIDE MONDIALE ORPHELINS RECONFORT

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L'association AMOR a été formée dans le cadre de la Loi 1072 du 27 juin 1984 et de l'arrêté Ministériel numéro 84-582 du 25 septembre 1984, pour une durée de cinquante années à partir de son autorisation gouvernementale.

Les statuts de l'association, datés du 28 juin 2006, ont été approuvés par le Gouvernement Princier aux termes d'un arrêté délivré par S.E. Monsieur le Ministre d'Etat le 3 août 2006, numéro 2006-418.

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 BIC code: CMBMMCMXXX
 Clearing: 17569
 Account of "AMOR Association"

Currency	Swift Code	Bank Name	City(ies)
EUR	UBSWCHZH80A	UBS SWITZERLAND AG	ZURICH
USD	CHASUS33XXX	JP MORGAN CHASE BANK NA	NEW YORK

Accountability

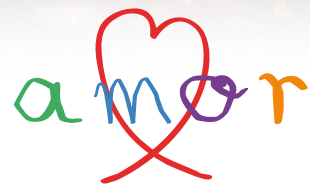
Our accounts are the object, each year, of a control headed by Cabinet KPMG expert-comptable.

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