



Beyond a Single Story

Grade 7-12 Workshop





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Workshop Outline

Purpose

In this activity, students will explore the ways that intersecting identities can affect a person's reality and quality of life. By considering the diverse viewpoints within a community, students will gain an understanding of the complexities of analyzing a community's challenges and strengths.

Estimated Time Required

90 minutes

Outcomes: Alberta Program of Studies

This activity helps achieve Outcomes of Learning as described in Alberta Education's *Guiding Framework for the Design and Development of Kindergarten to Grade 12 Provincial Curriculum* (Dec 2020).

Knowledge Development

- Approach the world with intellectual curiosity and humility.
- Engage new ideas and diverse viewpoints.
- Question assumptions and evaluate sources of information with discernment.

Character Development

- Exercise compassion and empathy when analyzing a diverse society.

Community Engagement

- Understand the needs, beliefs, and expectations of diverse communities.
- Identify connections that transcend differences.

Competencies: Alberta Program of Studies

This activity supports the development of the following competencies:

Critical Thinking and Creative Thinking:

- Considering the complexities involved in attempting to identify the needs of another community and its diverse members.

Decision Making and Problem Solving

- Considering diverse viewpoints when making community decisions.
- Analyzing the successes and shortcomings of responses to community challenges.

Support Materials

- Community Information Sheet
- Profile Cards
- Organization Response
- Discussion Guide

Community Case Studies

The Community Case Studies provided in this activity were created in partnership with the organizations and their international partners. Some individual Profile Cards are based on real community members and some are fictional, but the challenges the communities face are all real. Each organization has developed the Community Information Sheet, Profile Cards, and Organization Response based on their many years of experience working in solidarity with communities facing the challenges outlined.

Qabi Bay, Afghanistan | Canadian Women for Women in Afghanistan | www.cw4wafghan.ca

Years of conflict and war in Afghanistan has meant that Afghan people, especially women and girls, are often not free to live their lives, work, or attend school. Many parents in Qabi Bay are reluctant to send their daughters to school.

Rampur, India | Centre for Affordable Water and Sanitation Technology | www.cawst.org

Many community members suffer from water-borne and water-washed illnesses due to unsafe water and sanitation. Sickness results in medical bills and reduced work time, leading to economic poverty for many families.

San Andrés, Nicaragua | Change for Children Association | www.changeforchildren.org

Due to responsibilities within the family, many children do not continue their studies past grade 6. Girls are even less likely to continue to junior high.

Hamburg, South Africa | Keiskamma Canada Foundation | www.keiskammacanada.com

The village of Hamburg has extremely high rates of HIV/AIDS. For those living with HIV/AIDS, and experiencing poverty, managing their health can be very challenging.

Sigilai Village, Kenya | Operation Eyesight Universal | www.operationeyesight.com

High rates of preventable eyesight loss and vision impairment exist in Sigilai Village. Vision impairment seriously affects childrens' progress in school and adults' ability to earn a living.

Note

This activity is focused on using a strength-based model rather than a deficit model when reflecting on communities. Though these communities face challenges, they also have abilities, capacities, and cultural practices that are worthy of deep admiration. Furthermore, discussions should extend to the root causes of community challenges, rather than framing challenges as isolated issues in the control of community members. Every effort should be made to remind students that, though they may do their best to extend their understanding and empathy, they will likely never know what it is truly like living in these same life situations.

Set-Up

Choose a **Community Case Study** and print out its corresponding materials.

Split students into small groups of 5 or 6, depending on the number of **Profile Cards** for the case study.

Print out enough materials so that each small group will eventually receive: 1 **Discussion Guide**, 1

Community Information Sheet, 5-6 **Profile Cards**, 1 **Organization Response**.

Cut the **Profile Cards** in order to hand out individual profiles later.

Follow the instructions below to find out when to hand out each material.

Pre-Activity Discussion

Hand out the **Discussion Guide** (page 7 of this guide).

Ask students to work individually and write down the answers to the following questions based on their own lived experience. Ask students to compare and discuss their answers with their small group.

1. Optional: Write a list of what makes you happy.
 - a. Write a list of what makes you unhappy.
 - b. Circle any answers on both lists that are dependent on other people or the availability of certain services offered by your community.
2. Write a list of what your community offers that makes your life better.
3. Write a list of what your community lacks that could make your life better.
4. Compare your answers to those in your group. Are they the same or different? Why are your answers different than others?

Activity

Hand out **Community Information Sheet** and **Profile Cards** to each small group. Each member of the small group should receive a different individual **Profile Card**.

Ask students to read their **Profile Card** and summarize it to the small group.

Ask small groups to read the **Community Information Sheet**, while keeping the perspective of their **Profile Card** in mind.

Ask students to discuss the following questions in their small groups.

1. What opportunities are available in the community?
 - a. Are these opportunities available to everyone? Why / Why not?
2. How do women and girls experience life in this community?
 - a. Is there a difference in their lives compared to boys' and men's lives?
 - b. Optional: How do LGBTQ2SS+ folks experience life in this community?
3. What are the primary challenges facing the community?
 - a. Are these challenges faced by everyone? Why / Why not?
4. What might help to improve the lives of those in the community?

Hand out the **Organization Response** to each small group.

Ask small groups to read the **Organization Response**, then answer the following questions.

1. What was the organization's response?
2. How do you think the response might affect the life of the person in your profile card?
 - a. Are there ways you would change the response to better support the person in your profile card?



Debrief

Discuss the following questions as a large group.

1. How did considering the person in your profile card affect the way you answered questions?
2. In what ways is this community similar to your own?

Extension Activity

Estimated Time Required: 45 minutes

*Before beginning the activity, watch *The Danger of a Single Story*, 18-minute Ted Talk by Chimamanda Ngozi Adichie.*

https://www.ted.com/talks/chimamanda_ngozi_adichie_the_danger_of_a_single_story?language=en

Ask students to answer the following questions.

1. What could be the issues of portraying one single story of a community?
2. What are some of the different stories of your community?
3. Do you feel like you know multiple stories of the community we're talking about today?

Discussion Guide

Pre-Activity Discussion

Work individually and write down the answers to the following questions based on your own lived experience. Then, compare and discuss the answers with your group.

1. Optional: Write a list of what makes you happy.
 - a. Write a list of what makes you unhappy.
 - b. Circle any answers that are dependent on other people or the availability of certain services offered by your community.
2. Write a list of what your community offers that makes your life better.
3. Write a list of what your community lacks that could make your life better.
4. Compare your answers to those in your group. Are they the same or different? Why are your answers different than others?

Activity

Choose a Profile Card. Read your Profile Card independently, then summarize it for your group. Next, read the Community Information Sheet, independently or as a group. Keep the perspective of your Profile Card in mind as you read about the community. After reading the Community Information Sheet, discuss the following questions in your group.

Discuss:

1. What opportunities are available in the community?
 - a. Are these opportunities available to everyone? Why / Why not?
2. How do women and girls experience life in this community?
 - a. Is there a difference in their lives compared to boys' and men's lives?
 - b. Optional: How do LGBTQ2SS+ folks experience life in this community?
3. What are the primary challenges facing the community?
 - a. Are these challenges faced by everyone? Why / Why not?
4. What might help to improve the lives of those in the community?

Read the Organization Response and discuss the following questions in your group.

Discuss:

1. What was the organization's response?
2. How do you think the response might affect the life of the person in your profile card?
3. Are there ways you would change the response to better support the person in your profile card?

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Qabi Bay, Afghanistan
Canadian Women for Women in Afghanistan
www.cw4wafghan.ca

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Qabi Bay, Kabul Province, Afghanistan

Afghanistan is a country with a rich and diverse cultural heritage, at the crossroads of east and west and an important point on the historic Silk Road trading route. Almost half of Afghanistan's population is between the ages of 0 - 14, which means a huge potential for them to shape the future of their country, if given opportunities.

Qabi Bay is a village 30 km to the south east of the capital city of Kabul. It has a population of about 37,000. In Qabi Bay, the predominant languages spoken are Dari and Pashtun, and the life expectancy is 64.96 years. About half of households in Qabi Bay have access to electricity on the national grid, for 5-6 hours a day. 35% of households in Qabi Bay have access to a safe municipal water source, and 40% of households rely on unimproved water and sanitation sources such as shared latrines. Years of conflict, particularly under Taliban rule, destroyed adequate water infrastructure in Qabi Bay.

Since 2001, Afghanistan has seen an expansion of its active civil society, from women's rights organizations to community banking initiatives. There is also a vibrant public culture with news media and arts initiatives.

53% of households have a TV, which is a popular source of both entertainment and news about current events. Soccer clubs and tea houses are some public places to gather for men, but not women. Both boys and girls take part in kite flying, a popular pastime.

The Challenge: In recent decades, Afghanistan has experienced many years of conflict and war, including terrorist attacks which required the presence of the military from Canada and other Western countries. In 2004, Afghanistan became a democratic state with its own constitution, but the conflict has not ended. This has meant that Afghan people, especially women and girls, are often not free to live their lives, work, or attend school.

Because Qabi Bay is rural, the walk to school is long and often dangerous. Many parents are reluctant to allow their daughters to attend school in this environment, where risk of violence and natural disasters are real. Cultural practices, such as early marriage, also create barriers for girls who want to attend school. Many families in Afghanistan also live in poverty, meaning that sometimes, children leave school in order to work and support their families. After years of war, teachers have not had opportunities for training and schools often lack basic resources like desks, books, and washrooms. This often means that, in order for children to attend school, their parents have to pay extra costs for basic school supplies.

Every public school has a council of teachers and parents, who are often very effective in encouraging school enrollment and addressing parental concerns about safe learning spaces for their children - especially girls. Today, more children attend school than at any time in Afghanistan's history. 39% of students in Afghan schools are now girls!

Glossary

Early Marriage: Any marriage where at least one of the parties is under the age of 18. It is considered to be a form of forced marriage since one or both parties cannot express full, free, and informed consent. Globally, this practice disproportionately affects girls, disrupting their education, making them more vulnerable to violence and maternal mortality, and preventing their full participation in society.

Life Expectancy: The average age of death in a population. Life expectancies can reflect global inequalities. Higher income countries typically have high life expectancies and lower income countries have lower life expectancies.

Pit Latrine: The simple pit latrine is a toilet dug into the ground. It is the cheapest and most basic form of improved sanitation available.

Unimproved Sanitation Sources: Sanitation facilities that are considered unsafe and do not ensure a hygienic separation of human excreta from human contact. Some examples include pit latrines without covers or bucket latrines.

Unimproved Water Sources: Water sources that are not considered safe and do not meet standards of water quality. Some examples include unprotected dug wells or surface water from rivers, lakes, or streams.

Mirwais

28 year old man

Single

Lives with parents, 3 brothers and 2 sisters

Mirwais started teaching after he graduated high school. Then, he took the principal's examination and became a school principal. Only 12% of exam takers passed, and Mirwais feels lucky to be among them. He became the principal of two schools (a boys' school and a girls' school) three weeks ago. The girls' school has about 1000 students and 29 teachers, and the boys' school has 1500 boys and 27 teachers.

The schools are in very old buildings that are in terrible shape. Mirwais is working hard to fix things, but they don't have enough of anything.

Mirwais is also trying to support the girls. For example, the girls don't have a science laboratory for their science classes, while the boys do. The girls can't study at the boys' school, because Qabi Bay is a small village and some of the people are conservative. Mirwais doesn't want parents to stop allowing their daughters to attend.

There is also no library and Mirwais wants to fix this. With help to build learning resources, Mirwais believes that teachers will be able to give quality lessons, and the girls can do as well as the boys.

Sayed

45 year old man

Married

Father of 3 daughters and 6 sons

Sayed is an agricultural labourer who grows grains on a farm near the village. Unlike his wife, Sayed was allowed to attend primary school and learned to read and write. He and his wife make decisions together, although it isn't common in Qabi Bay for men to consult their wives.

Sayed has three daughters. His 14 year old daughter is eager to attend school, but his older two daughters are adults now and cannot read or write. Years ago, Sayed and his wife decided it was not safe for their daughters to attend school. The nearest school was far away, in another village, and the girls would have had to walk alone for hours each day to get there and back. The country is still at war, and Sayed knows that there are people who do not want women to be out in public. He sees girls' schools in other provinces being attacked and burnt down, and girls having acid sprayed at them.

Recently, a girls' school opened in Qabi Bay, close to Sayed's house. Now that students can easily walk to school, it is safer, so Sayed and his wife have let their younger daughter go to school. Sayed now notices his daughter teaching her mother and siblings to read some basic books, which makes Sayed very happy.

Zakia

47 year old woman
Widowed
Mother of 5 daughters

Zakia has five children. When she was a child, she was very interested in going to school. Unfortunately, her father would not allow it. When she was 12 years old, her parents decided to make her marry. A few years later, she lost her husband during the war in Afghanistan. Her five children were all small and they needed clothing, food and school. They were suffering. She had an image of a beautiful and comfortable life for her children, so she had to work to support her family.

She decided to take vocational courses to learn how to make clothes for people. As a tailor, she could make Afghan local clothing in the best styles, baby clothes, socks, shirts, hats, and so on. Many people would ask her to make dresses for them — even people from outside Qabi Bay would come to order clothes from her! Unfortunately, her business did not go well because she couldn't read and write. She would forget about someone who borrowed from her because she could not write down transactions.

Zakia knew that if she were able to read and write, she could easily count her money and take care of her business. Then, she could financially support her five daughters to continue their education. They tell her how, if she learned how to read in English, she could use her cell phone, Viber, Facebook and the internet to display her products!

Salma

14 year old girl
Lives with 2 sisters, 6 brothers, and parents

Salma is 14 years old and studies in the 7th grade at the school for girls. She started school at age 6. Her favourite subjects are the Dari and Pashto languages, and she likes learning about the poets and about the Prophet.

Salma has two sisters and six brothers. Two of her younger brothers go to school, but neither of her sisters went to school. They are 19 and 21 and they are illiterate. They could not go to school when they were younger because of the war. Now, they just stay at home. But Salma has been teaching them a little Quran and getting them to read this way. She does this in her spare time, and it makes her happy that she can help her family. They support her a lot, in going to school and with other things.

In the future, Salma plans to complete grade 12 and then study to become a doctor. Her younger brother has a disability because her mother was injured by the war during her pregnancy. Salma wants to help children with disabilities, and to serve her country in the future.

Overall, she likes her school and the conditions are good for girls, but they lack textbooks. The teachers work very hard to do a good job and Salma likes the principal at her school.

Zubaida

63 year old woman

Widowed

Lives with son, daughter-in-law and 4 grandchildren

Zubaida graduated from the Faculty of Science at Kabul University in 1978. For the past eight years, she has been teaching chemistry and biology at the girls' school. Prior to being a teacher, she held different positions in the Department of Women's Affairs and as principal of a girls' school in Kandahar. In any school Zubaida has worked in, she sees a lack of resources, such as libraries or books.

As an experienced teacher, Zubaida has lots of knowledge and skills, but sometimes has trouble transferring them to her students. She also lacks confidence in her teaching methods. She wishes she could attend a teacher training to learn how to help students to learn faster and better. For example, she would like to learn how to incorporate games, group work, and interaction in her teaching. Zubaida also wants her school to have a library with lots of books for the students.

For the future, she wants security in her country so that her students can study in peace, and not worry about war.

Canadian Women for Women in Afghanistan (CW4WAfghan)



Canadian Women for Women in Afghanistan (CW4WAfghan) was founded in 1998 to advance education and educational opportunities for Afghan women and their families and to educate Canadians about human rights in Afghanistan. CW4WAfghan's mission is that Canadians take action, in

partnership with Afghan women, towards improving conditions of human rights, ending women's oppression, and providing opportunities for Afghan women to live their lives with dignity, certainty and purpose. The organization has about 4,000 registered supporters from chapters in Alberta, British Columbia, Manitoba, and Ontario. In Afghanistan, a dynamic and talented team of Afghan professionals manage, implement, monitor and provide support services for CW4WAfghan's programs and operations.

Read more: <https://www.cw4wafghan.ca/>

Organization Response

CW4WAfghan works in partnership with communities all across Afghanistan, in large cities and remote rural areas, to address challenges faced by women and girls. This cooperative approach is important, because it means Afghan people can choose the solutions that work best for them, their culture and experiences. Although their focus is on the human rights of Afghan women and

girls, they believe this can only be achieved with the cooperation of men, boys and communities as a whole.

CW4WAfghan focuses on three Sustainable Development Goals (SDGs): Quality Education, Gender Equality, and Reduced Inequalities, but recognizes that sustainable development is best achieved when the Sustainable Development Goals are pursued alongside one another. Increasing literacy is a powerful way to promote sustainable development generally. Research from around the world shows that girls who are educated are safer, healthier, have more work opportunities, and greater participation in public life, including the economy and local and national government. Recovery from war is also more sustainable where women are directly involved. When women and girls are educated, whole societies benefit. Research has even shown that educating girls is a powerful way to fight climate change!

CW4WAfghan supports local communities in Afghanistan to enhance educational resources, and break down the barriers women and girls face in accessing quality education. They do this by developing and offering training and supports for teachers to deliver their classes in ways that are more inclusive for girls and accessible for students with disabilities, building libraries and sharing books and online resources, and offering literacy classes to women and girls who were prevented from attending school when they were children because of war in Afghanistan. They work to support an intergenerational culture of reading, because evidence from their own programs shows that literate mothers raise educated children, and this improves quality of life for all.

Rampur, Telangana, India
Centre for Affordable Water and Sanitation Technology (CAWST)
www.cawst.org

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Rampur, Telangana , India

The languages spoken in Rampur are Telugu and Urdu. The population is 5,277 and the life expectancy is 71.3 years. There is a bank in Rampur, and many people work in agriculture. However, this work is seasonal and dependent on crops and weather. There is also a regional bus, and it is a half hour bus ride to the nearest urban centre. Some are unable to afford the bus fare.

This close-knit community has been known to work together to find and implement solutions to their collective issues. People listen to radio programs, dance, play music, and play sports such as field hockey, soccer, and cricket. It's common to see a community leader inviting neighbours to dinner at their house!

The community is close-knit, but sometimes to the point that community members exclude and distrust those who are originally from other regions of India. Within the community, some men are resistant to listening to the ideas of women.

The Challenge: Nearly half of the people in rural India lack access to safely managed drinking water. In Rampur, unsafe water and sanitation is a significant challenge that affects everyone's daily lives. Many community members suffer from water-borne and water-washed illnesses. As a result, several people are unable to fully participate in work or school, and this can be very costly.

Sickness results in medical bills and reduced work time, leaving families without enough money to purchase the things they need. The illness persists, income depletes, and economic

poverty for many families becomes reality. Community members would like their lives to be better, but they are unsure of where to start.

Fluoride contamination in water can be another challenge in Rampur. It occurs naturally and can be very expensive to treat the contaminated water. People suffer from fluorosis as a result. However, new research is revealing that fluoride contamination can be countered by a healthy diet and by fighting malnourishment.

Glossary

Life Expectancy: The average age of death in a population. Life expectancies can reflect global inequalities. Higher income countries typically have high life expectancies and lower income countries have lower life expectancies.

Pit Latrine: The simple pit latrine is a toilet dug into the ground. It is the cheapest and most basic form of improved sanitation available.

WASH: An acronym for Water, Sanitation and Hygiene. These three words are combined because safe water, sanitation, and hygiene are all needed to benefit people and prevent the spread of disease.

- **Water:** Safe sources of water used for drinking, cooking, or personal hygiene that meet microbiological and chemical standards of water quality.
- **Sanitation:** The promotion of health through safe sanitation systems that ensure a hygienic separation of human excreta from human contact.
- **Hygiene:** The things people do to keep themselves and their surroundings clean in order to maintain good health. Ex: hand-washing, food hygiene, menstrual hygiene, etc.

Jaya

33 year old woman

Married

Mother of two children

Jaya is a woman in her early-thirties. She has lived in Rampur her whole life. She is married with two children; a ten-year-old son, Ramesh, and a twelve-year-old daughter, Ruchi. Sadly, she lost two children to sickness when they were babies.

Jaya takes care of the household duties and also has her own business: a fresh fruit stand at the local market. She understands the value of education and wants her children to go to school. However, when her business is busy, some days she has to ask them to help her with household duties. Jaya tends to ask her daughter, Ruchi, to stay home more than her son. She feels guilty about this, but it's very common for girls to take on more of the household responsibilities. Jaya also feels pressure from her husband to make sure their son's education is prioritized.

Kamal

39 year old man

Married

Father of two children

Kamal is a man in his late-thirties. Like many fathers in Rampur, he regularly travels to work in a neighbouring region to earn a modest income.

Lately, his earnings have decreased due to the economic uncertainty in the country. Job loss and unemployment has been rampant. Kamal is often saddened to be away from his family for long periods of time and wishes for a better life for his children. He often has to make tough decisions to stretch their limited resources.

Ruchi

12 year old girl

Lives with two parents and brother

Ruchi is a twelve-year-old girl. She was born in Rampur. She goes to school every day and is a very smart and attentive student. When she has her period and hygiene products are unavailable, she doesn't always attend school. Ruchi enjoys sports but doesn't usually have time to play because she helps her mom with household chores.

Ramesh

10 year old boy

Lives with two parents and sister

Ramesh is a ten-year-old boy. He was born in Rampur and enjoys school like his sister, Ruchi. However, he often feels a lot of pressure from his father to achieve academically. While he likes school, he doesn't tend to say so around his friends. Ramesh spends a lot of time playing sports with his peers, but it is challenging due to his uncorrected myopia (nearsightedness).

Prakash

48 year old man
Single

Prakash is a man in his late-forties. He has been a health worker for about twenty years, but has worked in Rampur for only two years. He has observed a seasonal pattern in Rampur: during the rainy season, the health centre gets overrun with people complaining about diarrhea. This is dangerous because if people don't get re-hydrated quickly they can die of dehydration.

Prakash tries to tell everyone who comes in the clinic to boil their water and wash their hands. He often feels like no one listens to his advice because of his regional accent, which is distinct from the accent of those from Rampur. He would like to engage the community to learn more about the health challenges they face, but he is busy at all hours at the health centre.

Lirthika

55 year old woman
Widowed
Mother of four children

Lirthika is a woman in her mid-fifties and a community leader. She has lived in Rampur since she was a little girl. She has raised four children. Her husband recently passed away unexpectedly.

Last year, Lirthika was trained by an NGO (non-governmental organization) that works in the closest major city on safe water, sanitation and hygiene (WASH). As a result, she bought a filter to clean and disinfect her water. She also built a latrine on her property and encourages others to wash their hands before sharing meals at her home. Lirthika finds that she is healthy all year round. She would like to bring more training on WASH to her community, but even as a community leader, she finds the men tend to be resistant to her ideas.

Centre for Affordable Sanitation Technology (CAWST)

Founded in 2001, CAWST is a Canadian charity and licensed engineering firm with a mission to provide technical training and consulting, and act as a centre of expertise in water and sanitation for the poor in developing countries.

Hundreds of millions of people worldwide are trapped in a cycle of poverty and disease because they lack access to safe drinking water and basic sanitation. The statistics are chilling: over 1.8 billion people are drinking fecally contaminated water, while 2.4 billion people lack access to basic sanitation.

CAWST addresses this global need for safe drinking water and sanitation by building local knowledge and skills on household solutions people can implement themselves.

Read more: <https://www.cawst.org/>

Organization Response

The community of Rampur is starting a club to find solutions. They will gather regularly to discuss, learn about, and address the problems they face. They receive water, sanitation, and hygiene (WASH) education from CAWST, covering topics such as: water contamination and treatment options, safe water storage, handwashing, and safe sanitation practices including promoting the use of latrines. The purpose of this training is to equip the community club to identify WASH challenges and develop creative solutions.

Working together, Rampur's community members could pool their money to afford technologies like water filters and latrines, and encourage and sustain positive behaviours for their health and wellbeing.



Sigilai Village, Uasin Gishu County, Kenya
Operation Eyesight Universal
www.operationeyesight.com

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Sigilai Village, Chuiyat Sub-Location, Uasin Gishu County, Kenya

The languages spoken in Sigilai Village are Kalenjin, the local dialect, and Swahili, Kenya's national language. Those who have attended formal schooling can also speak English. The population of the wider region, Chuiyat Sub-Location, is 7,444, and the life expectancy is 66.34 years. Many of Kenya's world-famous marathoners hail from this area!

Villagers mostly use wood fuel for cooking and use kerosene tin lamps or portable solar lamps for lighting. The majority of households have pit latrines, but some don't. Water is usually fetched from wells, and the water is not clean.

Youth play sports, such as volleyball and football, but there are no entertainment options for adults. Some youth in Sigilai Village recently noticed issues of deforestation due to dependence on wood fuel, and have set up tree nurseries to help replenish tree coverage.

Leadership positions in Sigilai Village are reserved for wealthy men. When women assert their right to compete for political office, they face intimidation, violence and harassment.

The Challenge: Most eye problems can be fixed easily and quickly through medication, surgery or a pair of custom prescription eyeglasses. However, if people do not have the resources to access these treatments, they continue to experience vision loss. Vision impairment that is preventable or could easily be treated is referred to as avoidable blindness.

There are high rates of avoidable blindness or vision impairment in Sigilai Village, due to lack of knowledge, access and affordability of eye health care services. Community members also deal with common colds & flu, skin rashes related to poor hygiene, and malaria.

Sigilai Village is a remote community, and it does not have a doctor or hospital. There is a pharmacy 4 km away and a hospital 18 km away, but neither offers eye care services. Villagers are forced to travel approximately 42 kilometers to reach the nearest urban centre, Eldoret, to access eye health care services.

Children with vision impairment have difficulty keeping up with the other children's progress because they can't read or write properly. They may also face social exclusion from their peers. It is rare that schools have ramps, reserved toilet facilities, or assistive mobility, sensory and learning devices for students with vision impairment and other disabilities.

There are few formal jobs in Sigilai Village. Most people in the village are smallholder subsistence farmers growing maize, beans, vegetables, alongside small scale dairy farming. A few families own lots of land and can grow plenty of food to eat, and even sell. The rest of the community have barely enough land to grow food to eat. Adults with visual impairment essentially lose the ability to support their families and earn an income through farming.

Glossary

Life Expectancy: The average age of death in a population. Life expectancies can reflect global inequalities. Higher income countries typically have high life expectancies and lower income countries have lower life expectancies.

Pit Latrine: The simple pit latrine is a toilet dug into the ground. It is the cheapest and most basic form of improved sanitation available.

Kerosene Lamp: Lanterns that burn kerosene by pulling it up through a wick. They can be dangerous to use, cause respiratory health issues, and produce harmful carbon emissions.

Subsistence Farming: A system of farming that provides enough for the family, but no significant surplus for the family to sell.

Julia

45 year old woman

Married with 6 children and 1 grandchild

Mother of Mercy and Linus

Julia is a mother of six children. Four of her children and her one grandchild have lived with blindness since birth. Julia lives in poverty and she can't afford to take her children to a doctor. She wanted them to have opportunities for a bright future, and she knew their struggle to learn would limit their opportunities. But she didn't know how to get help for her children.

Julia took her children to a local health centre when they were younger, but these facilities often don't have trained eye health care professionals on staff or the proper equipment to diagnose eye problems. She was told that her children's condition was genetic, and nothing could be done to treat it. She accepted this, because she didn't have the money to travel to a hospital for a second opinion. As a result, her children continued to live with blindness.

Mercy

20 year old woman

Single with 1 baby daughter

Julia's daughter

Mercy dreamed of becoming successful in life, but she struggled in school due to her poor vision. She wanted a better life for her baby, but when she found out her baby was experiencing blindness as well, she was afraid. She didn't know how she would be able to look after herself and her baby daughter, and she was worried that her daughter would have the same struggles with school that she had growing up.

Linus

12 year old boy
Julia's son

Linus is sad when his friends at school don't want to play with him because he can't keep up with them. He wants to help with household chores, such as fetching clean water, but he is afraid to travel to the well by himself, because he's afraid he'll fall in the well. He aspires to be an athlete.

Mr. Ruto

55 year old man
Julia's children's teacher

Mr. Ruto is a teacher at the local Sigilai Primary School. He was sad to see the problems these children faced in school. The children had difficulty keeping up with the other children's progress because they couldn't read or write properly. Mr. Ruto did his best to provide assistance, but he didn't know how to get them the help they needed. He also saw that other children discriminated against them, not wanting to play with them.

Dr. Ollando

45 year old man

Julia's children's doctor

When the children were referred to Dr. Ollando by the eye screening camp, he diagnosed them with bilateral cataracts – cataracts in both eyes. The cataracts were severely limiting their ability to see, but cataracts are easily treated through surgery to remove them. He scheduled for the children to have surgery to significantly improve their vision.

Operation Eyesight Universal

In 1963, a businessman from Calgary, Canada, named Art Jenkyns met Dr. Ben Gullison, a physician who worked at a mission hospital in Sompeta, India. Dr. Ben had come home to Canada seeking funding for his mission work helping vulnerable people experiencing blindness that could be treated or could have been prevented. After their meeting, Art was inspired to found Operation Eyesight Universal to raise funds for people needing eye health care in India.

Operation Eyesight developed into a partnership between generous Canadians and Indian eye doctors to address a backlog of cataract cases. Today, the organization works collaboratively with hospital and government partners to tackle the root causes of avoidable blindness in Ghana, Kenya, Zambia, Ethiopia, Liberia, Nepal, Bangladesh and India with a mission to prevent blindness and restore sight.

Read more: <http://www.operationeyesight.com/>

Organization Response

Operation Eyesight provides eye health screening in areas where a large proportion of the population are not able to access health care. If an eye problem is detected, Operation Eyesight arranges a referral to an eye clinic or a hospital, and transportation if necessary. If the patient can't afford medical treatment, it is given to them free of charge, ensuring everyone has access to quality care. Operation Eyesight carries out eye screening through door-to-door house visits, centrally located eye screening camps, and school screening programs.

Update

As of the spring of 2020, the children each had surgery in one eye in July 2019 to remove cataracts, and in the other eye in early 2020. Their quality of life and opportunities for education have improved as a result of the surgeries, but if Julia had access to eye health care for her children when they were younger, they would have had a better outcome. The doctor wanted to see the children for a check-up six months after the surgery, but this has not been possible due to restrictions to eye health care services with COVID-19.

Watch this video to meet the community members introduced in the profile cards: <https://operationeyesight.com/mercy/>



San Andrés, Bosawás Biosphere Reserve, Nicaragua
Change for Children Association
www.changeforchildren.org

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San Andrés, Bosawás Biosphere Reserve, Nicaragua

Designated a Biosphere Reserve by UNESCO and rich in biodiversity, the Bosawás is the largest tract of tropical rainforest outside the Amazon. This remote rainforest is home to Miskito and Mayangna, two Indigenous groups who are stewards of the land. There is a growing issue of Nicaraguan farmers encroaching and illegally clearing the forests, making it difficult for the Miskito and Mayangna to preserve the land. The life expectancy in the Bosawás is 67 years; this number is considered the longest a person can live in Bosawás.



Located along the banks of the Coco River, San Andrés is accessible only by boat and has about 1,800 inhabitants. There is a small health centre in San Andrés, but the nearest hospital is 8 hours by boat down the Coco River. Miskitu is spoken in San Andrés but the official language of Nicaragua is Spanish, which is the second language for most people in San Andrés. When the government sends materials for schools or posters about Covid-19, they are written in Spanish.

Most people in San Andrés can't afford lights at home. No one has running water in the home, and instead use water from wells or the Coco River. Most households are multi-

generational, with grandparents, parents, and children living together. It's common to see men playing in a baseball league, teenage girls playing soccer, or families attending dances at the community centre!

There is no formal employment in Bosawás. Instead, residents of San Andrés earn incomes through subsistence farming, domestic animal husbandry, hunting, fishing, small-scale mining, and panning for gold. To find formal employment, men are forced to leave the community and work in manual labour jobs.

The Challenge: Education in the Bosawás continues to be the poorest in the country, due to the Nicaraguan government often failing to provide school supplies, funding, and teacher training. Teachers are underpaid or not paid at all, and schools lack basic resources. While primary school education is available in San Andrés, to continue education beyond grade six, students have to leave their families to attend school in a larger town. Due to responsibilities within the family, many students do not leave to continue their studies. It is even less likely that girls continue their education due to their domestic and family responsibilities, cultural norms, and safety concerns with leaving the community.

Girls have less access to education than boys do, yet as women they later become responsible for the health, hygiene, nutrition, education and personal development of their households. As men are forced to travel to other communities for employment opportunities, women also take on roles of leadership within the community. However, having been unable to access education, these women leaders aren't as well educated as they may be.

Glossary

Animal Husbandry: A branch of agriculture concerned with the production and care of animals.

Life Expectancy: The average age of death in a population. Life expectancies can reflect global inequalities. Higher income countries typically have high life expectancies and lower income countries have lower life expectancies.

Subsistence Farming: A system of farming that provides enough for the family, but no significant surplus for the family to sell.

Maria

12 year old girl

Has two siblings, parents, and grandparents

Maria is the daughter of humble peasant Miskito farmers. Every afternoon she helps her parents in the work of their small farm growing taro (similar to yams) and yucca. Maria also helps sell some of the modest harvest within her community and on the banks of the river to boat traders traveling to the city.

Maria is keenly interested in her sixth-grade studies and pursuing secondary school next year despite her parents' reluctance to send her to a neighbouring community to attend given her considerable responsibilities at home and concerns for her safety. But Maria has big plans! Despite how impossible it seems, Maria dreams of being a doctor. While her community has a government health centre, it is frequently unattended and unmanned as doctors from other areas travel in and out of San Andrés, leaving her community vulnerable for months at a time.

Maya

34 year old woman

Married

Mother of three children

As a child, Maya attended primary school and can read and write. She never attended secondary school, since she helped her father in the fields as soon as she was old enough to, and started her own family when she was just 16.

Maya washes clothes in the Coco River and makes several trips a day to and from the river to collect water for drinking, for washing, and for cooking. She doesn't work outside the home, but cares for her three children, her husband, and her ageing parents. She has a small vegetable garden and tends to chickens and a milk cow.

Maya wants her daughter to receive further education, but worries about the danger she may face in traveling to a larger community. She also relies on Maria to support the work of the family farming and the income she makes selling some of their harvest, and worries about the impact this loss of income may have on the family.

Profe Lorena

25 year old woman

Married

Mother of two small children

Profe Lorena is Maria's sixth grade teacher. She is paid a small stipend for teaching, but her job is challenging. She lacks resources and teaching materials because her community is so remote. She grew up in the Bosawás and does not have a formal teaching degree.

Profe Lorena has two small children who also attend the primary school where she works. Having grown up with limited opportunities, she works passionately to include and engage boys and girls equally in her classroom. She sees immense value in continuing the education of students in the community, and encourages them to pursue secondary education, as best they can. She knows Maria is a very bright pupil, and hopes she will be able to achieve a college education one day.

Jorge

40 year old man

Married

Father of three children

Although the family lives a mostly subsistence farming lifestyle, Jorge works outside the Bosawás to further provide for his family. Jorge can read and write but he did not attend school as a boy.

With limited economic opportunities in the Bosawás, he travels outside the Bosawás to work part-time as a plantation laborer. When he is away, it is often for long stretches of time, commuting by boat 8 hours along the Coco River to first reach the nearest city and then the rural area where he works. As Jorge travels for work, he relies on Maya and Maria to take care of the family in his absence. He wants Maria to be successful, but must balance the needs of the family with her desires for further education.

Daniel

18 year old man

Has two siblings, parents, and grandparents

Daniel is Maria's older brother. Having been sent to live in a neighbouring community to pursue secondary education, Daniel has recently completed his studies. He now works as a boat driver to save money to attend college in the nearest city. He wants to become one of only a handful of people in the Bosawás who hold a college degree.

He was raised to respect the forest and the land and wants to return from his studies qualified to occupy a position of responsibility to make intelligent and informed decisions for the people and the forest of the Bosawás. His time in secondary school has greatly helped him already, and he is eager for other members of his community to receive higher education. Daniel knows his sister wants to pursue a career in medicine, and he is very supportive of her goal. He is aware of the risks in travelling to receive education, but since he isn't in the community on a routine basis, he isn't able to support her pursuit of further education.

Change for Children Association

Change for Children was founded in 1976 by a small group of people in the Edmonton area who were convinced that concerned Albertans could make a positive impact in the fight against poverty and injustice, internationally and in their own communities.

The organization's mission is to build civil society capacity in the global south and Canada to promote health, human rights and create solutions to poverty through sustainable development. They implement programs in Central America, South America, and Africa. Their programs focus on education, technology in schools, access to clean water, food security, maternal and child health, and HIV prevention.

Read more: <https://change4children.org/>

Organization Response

In response to the lack of continuing education opportunities in the Bosawás, Change for Children is working to remove barriers to education to increase enrollment for all children, boys and girls.

The organization has built 7 secondary schools in the Bosawás, and one of them is in San Andrés. By constructing secondary schools in communities, education becomes more accessible, specifically for girls who often must also balance domestic responsibilities. Campaigning for girls' education also means changing attitudes to ensure girls are treated equally by promoting gender equality in teaching practices and raising community awareness of the gender gap. Educated girls grow

up to be educated women with increased autonomy and self-esteem, increased participation in community leadership, and increased economic empowerment. Educated women are more likely to send their own children to school, creating a ripple effect of poverty reduction for future generations. Change for Children is also introducing technology, remote digital libraries, as schools don't always have educated teachers. They have even brought solar technology to schools, so schools have power.



One of the high schools built by Change for Children.

Hamburg, South Africa
Keiskamma Canada Foundation
www.keiskammafoundation.ca

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Hamburg, Eastern Cape, South Africa

Hamburg is a small, rural community of 1,300 on the banks of the Keiskamma River, with one small corner shop and a rough dirt road through the town. The life expectancy is 63.4 years. Xhosa, one of South Africa's 11 official languages, is spoken in Hamburg. The unemployment rate is 80%, so many earn income through social security grants. Most people in Hamburg use pit-latrines outdoor toilets, harvest rainwater, and use kerosene lamps for lighting. There is some fishing and tourism in Hamburg.



From 1948-1994, South Africans lived under apartheid, a system of segregation which left a legacy of severe racial inequality in the country. The majority of those living in poverty in Hamburg are Black. South Africa also has the highest HIV rates in the world, and rates are highest among Black South Africans. For years, the government denied HIV/AIDS was an issue and refused to provide treatment for South Africans diagnosed with HIV. In that time, more than a third of a million people in the country died due to AIDS. Many grandparents in Hamburg are the guardians of their grandchildren, as almost an entire generation of younger adults has died due to AIDS.

Schools in Hamburg are chronically understaffed and underfunded, and the majority of students drop out or fail before graduating high school. Due to teacher shortages,

classes are mixed with students of different grades. Some students also struggle when the language of instruction switches from Xhosa, their first language, to English. Local activist groups are actively pushing the government to better support schools and teachers.

The Challenge: Hamburg has extremely high rates of HIV/AIDS, and for those living with HIV/AIDS in poverty, managing their health can be very challenging. There are also high rates of tuberculosis, hypertension, and diabetes in Hamburg. This can present serious health complications, since people living with HIV typically have weakened immune systems. ARVs are now largely available at health centres. There is a clinic near Hamburg and a hospital 60 km away, but both are under-resourced and understaffed, and many people can't afford the transportation costs to get there from Hamburg.

A key component to managing health when living with HIV is proper nutrition, yet many Hamburg residents are unable to afford food, let alone healthy food. There is no grocery store in town, so people have to pay high transportation costs to travel to a nearby city to grocery shop.

Women in Hamburg face high rates of gender-based violence. Young people are not taught consent, sex education, or HIV prevention. Many men in the community feel that they are entitled to sex, and don't respect a woman's wish to abstain from sex or practice safe sex. Partly due to gender-based violence, young women in South Africa are almost four times more likely to become HIV positive than young men.

Glossary

AIDS: Acquired immune deficiency syndrome. This syndrome happens if someone has had HIV for many years without access to the proper medicine. With AIDS, the immune system is severely weakened. Serious infections and health problems happen.

Apartheid: A system of laws that forcibly segregated different racial groups in South Africa. Laws included the forced relocation of Black South Africans, the prohibition of marriage between non-white and white South Africans, ‘white-only’ urban areas, and ‘white-only’ jobs.

ARVs: Acronym for antiretroviral drugs, which keep HIV under control and protect the immune system, allowing people to live long and healthy lives.

HIV: Human immunodeficiency virus (HIV) is a virus that attacks the immune system, which is the body’s germ fighting system. The immune system becomes weaker, making it harder for the body to fight off infections and some kinds of cancers. Most people who get treatment early and take medicine regularly for HIV can live long, healthy lives. Most young children who have HIV got it as babies from their mothers who are HIV positive, as HIV can be transmitted through breast milk. Older people can get HIV through unprotected sex or sharing needles.

Kerosene Lamp: Lanterns that burn kerosene by pulling it up through a wick. They can be dangerous to use, cause respiratory health issues, and produce harmful carbon emissions.

Pit Latrine: The simple pit latrine is a toilet dug into the ground. It is the cheapest and most basic form of improved sanitation available.

Ntombi

16 year old girl

Lives with grandmother and three younger siblings

Ntombi is a 16 year old girl living in Hamburg. She likes watching videos of her favourite singers on her phone. She would like to learn to play an instrument but doesn't own any.

Ntombi lives with her grandmother because her mother passed away due to AIDS when they were young. Her grandmother has many health issues, so after school Ntombi takes care of her three younger siblings. Taking care of her siblings means she doesn't usually have time to finish her homework. At home, no one is there to help her if she has questions with her homework. At school, her teacher doesn't have time to help her either.

She hopes to graduate high school next year but isn't sure what she'll do after that, career-wise. She knows that she will probably have to leave Hamburg if she wants to find a job.

Nko

8 year old boy

Lives with his mother

Nko goes to school and is in grade three. He has trouble with his English class, but his teacher doesn't have much time to help him. Sometimes, he will show up to school and his teacher won't be there, so he and his friends play soccer all day. His school doesn't have enough teachers so his class is mixed with older and younger grades. This year at school, his teacher has started teaching in English after years of teaching in Xhosa, the language Nko speaks at home.

Nko lives with his mother. Most of his friends' parents are unemployed, but his mom works for a white South African family who vacation in Hamburg. She barely makes enough money for her and Nko to survive on.

Nosisa

54 year old woman

Widowed

Guardian of two grandchildren

Nosisa is the guardian of her two grandchildren whose mother - Nosisa's daughter - passed away due to AIDS. She is still dealing with the loss of her daughter. She works hard to take care of her grandchildren in honour of her late daughter.

Once a month, she has to travel to the nearest hospital with her grandchildren to receive ARVs for the two children who are living with HIV. The trip is one hour away by car, but Nosisa doesn't have a car. Hamburg doesn't have public transportation either, so Nosisa and her grandchildren rely on hitchhiking to get to the hospital, hoping someone picks them up and doesn't charge them too much money for the ride. The instructions on the medication are difficult for Nosisa to follow. She is unable to read because Black South Africans were not allowed to go to school when she was growing up under apartheid.

Lindiswe

38 year old woman

Single

Mother of three children in elementary school

Lindiswe has three children in elementary school. She has been unable to find a job and struggles to pay for groceries. In her relationships with men, she does not feel that she has much say or choice. Lindiswe became HIV positive in her teens, and had never learned about HIV prevention or safe sex practices before then. Her children are also HIV positive, and Lindiswe spends the little money she has to pay for rides to the nearest hospital to receive ARVs.

Lindiswe wants her children to do well in school and become successful, so she makes sure they attend school. She would like to teach her daughters about consent and safe sex, but doesn't know how to go about it.

Themba

26 year old man

Single

Father of a son in Hamburg, lives in East London

Themba is HIV positive and recently moved away from Hamburg. After struggling in school in Hamburg for years with no support, Themba dropped out one year before high school graduation. He spent a few years unemployed in Hamburg, unable to find work. In that time, any boys he went to school with moved away from Hamburg.

He has just moved to a nearby city, East London, to find work. In East London, he finds occasional work in construction. The low wages he is paid barely cover his rent, let alone healthy groceries. However, in East London, it is easier than in Hamburg to get ARVs.

He has a son in Hamburg that he doesn't see anymore, as he can't afford to travel back and forth.

Keiskamma Canada Foundation

Because the South African government was refusing to provide ARVs, in 2004, The Keiskamma Trust was formed to provide the medicine to those in Hamburg. After massive public outcries and the advocacy work of non-governmental organizations like the Keiskamma Trust, the government began providing ARVs, but barriers remained for Hamburg residents struggling to access health care and basic services.

In 2006, Edmonton writer Annette Wentworth became involved in the work Keiskamma Trust. In 2008, along with a group of friends, she began The Keiskamma Canada Foundation in Alberta. The Keiskamma Canada Foundation raises awareness and funds for the Trust, and provides opportunities for Albertans to purchase the beautiful handmade embroideries made by artists from Hamburg.

Read more: <http://keiskammacanada.com/>

Organization Response

Today, the Keiskamma Trust continues to provide support to community members in Hamburg, particularly the most vulnerable - grandmothers, mothers, and children, many of whom are orphans.

The Health Programme's health workers provide home-based care and help patients manage their HIV treatment. They regularly create awareness campaigns about HIV prevention. They also provide emergency transportation services.

The Art Project provides income for women artists living in Hamburg. The women specialize in beading, felt-making, embroideries, ceramics and printmaking. Their work often tells their stories of loss due to HIV/AIDS. The artists often receive commissions. In 2020, they worked collaboratively with scientists to create a science-themed art installation!

The Education Programme reaches over hundreds of children from Hamburg and surrounding villages, offering after-school care, tutoring, and daily meals. The Vulindlela Centre provides high school aged youth with technology training, career guidance, academic support, and numerous life-skills clubs.

The Music Academy teaches committed students aged between the ages of 8 and 17 and provides recorders to kids if they come to each lesson. The music students have garnered acclaim across the country for their unique sound and style.



*Tapestry embroidered
by Nombulelo Paliso
and directed by Cebo
Babalwa Ndonga, two
artists from Hamburg.*