



**ANNUAL REPORT OF
MEDICAL AID ABROAD NEW ZEALAND
2004**

INTRODUCTION

MAANZ, a non-government organisation (NGO), has continued with its work of supplying pharmaceuticals and equipment to third world countries on specific requests. This work has been carried out by a small band of volunteers who have dedicated a great deal of time to dealing with the matters that have arisen. The work has been greatly appreciated by recipients of the medical items as it fills a gap not always met by the health authorities of the various countries. As in previous years, the majority of items supplied have gone to Pacific countries.

Except where indicated, the following applies to the Auckland Branch of MAANZ.

ACHIEVEMENTS

- The countries to which orders have been sent and the number of cartons delivered are noted in Table 1. The majority of MAANZ's shipments are to Pacific nations (77% of all orders, 85% of all goods).
- Very large orders have gone to Fiji and particularly Taveuni Island. Good transport facilities were made available using containers supplied by Mr Geoffrey Amos of Taveuni. Much has also gone to Tonga, a country with which we have had a long-term association.
- Increasing numbers of 5th year Medical students now approach us before they travel on their electives and we are usually able to give to them a parcels of medical items to take. Often these go to African countries.
- This year we were able to help with urgently needed supplies for the Tsunami and these went to Sri Lanka. These were supplied in response to a request from NZAID. We are not well placed to always provide items for such requests and we may need to up-grade this area of our work.
- Supplies of dental goods have been co-ordinated by Dr Arun Praji and in association with the funds from the NZ Dental Association Trust, it has meant that often new equipment has been made available.

Table 1 Details of goods supplied Jan-Dec 2004

	No of orders	Cartons ** of goods despatched	Dental cartons
Fiji	14	193	11
Tonga	10	100	2
PNG	6	28	4
Vanuatu	8	66	1
Samoa	2	28	2
Niue	1	8	
Solomons	3	43	6
Pakistan	2	2	
Sri Lanka	2	48	
Cambodia	2	8	6
Indonesia (Bali)	1	8	
Zambia	3	11	

Nigeria	1	1	
Uganda	1	5	
Malawi	1	1	
Sierra Leone	1	5	5
	58	556	37*
			Included in second column

**A carton may be large or small but usually of a size easily handled by one person. Cartons also include items such as wheel chairs, walkers and other medical items including refrigerators, incubators etc.

SPECIAL PROJECTS

1. **The development of a community pharmacy** in Tonga under the supervision of Dr Glenys Mafi has been a major event . We applied to NZAID for a supporting grant and eventually we received this through an application to VASS. This pharmacy may be a model for other countries as funds raised from this venture are used for an allied charitable medical clinic thus providing medical care for the poor at lower costs.
2. **Taveuni project.** As noted earlier we have supplied many goods for this Island in Fiji. Also we participated in a project to assess the parasitic load in school children in the island and also carried out haematological assessments . Many health problems were identified and either treatment given or referrals made. The results of the study are to appear in the NZ Medical Journal. The project was carried out with the major support of the Newmarket and Kumeu Rotary Clubs in and the Auckland Medical School.



3. **Fiji Health Festival.** This new innovation, developed by the Rotary Cubs of Fiji, was assisted by MAANZ not only with medical equipment but by the contribution of Dr Gordon Nicholson. Gordon and his wife traveled with the medical team to various centres of Fiji.



4. **Networking.** During the year we held a preliminary meeting with a number of other organisations in Auckland including the Rotary Donations in Kind (DIK) and Oneness-Hearts Tears and Smiles (OHTS) programmes that also provide medical assistance overseas. The

aim was to try and make each group aware of what groups were doing and promote co-operation. It seems that there are a variety of ways in which rationalisation of medical assistance can be given and further exploration of the possibilities are planned for the future. Already some help and co-operation has been achieved particularly with the OHTS.

5. **OPAL.** A number of meetings were held with the Australian organisation OPAL and the Auckland based ZEROWASTE to assess if there were ways by which an income stream for MAANZ could be developed. This has not yet resulted in any useful outcome.
6. **Collection of drugs.** Due to the efforts of a new pharmacist member of the MAANZ Executive, Mr Murray Ker, we have been able to develop an improved method of drug collection from pharmacies particularly with HSL (Health Support Services Ltd). This has greatly improved the inflow of drugs and although some refinements of the procedures are now required, the system works well and we hope to expand it in the forthcoming year.

ROOMS

We have been most grateful to the NWH/GLH hospital administration for the use of rooms at the now ex National Womens' Hospital. Although these rooms are not entirely convenient, they have allowed us to continue our work at low cost. Recently 3 further rooms near the main room have been allocated to us and although one of these may be used by a telephone company, it has relieved the space problem to some extent. There are continuing negotiations with the administration at GLH a to see if a much larger space can be made available. If we obtained this, we might wish to share it with some other selected medical aid organisations. The move of NWH beds to Auckland Hospital means the infra-structure of the hospital is now decreased and this affects the work of MAANZ in so far as incoming and outgoing goods is concerned.

CANTERBURY BRANCH OF MAANZ

This branch has been active as noted below. The formal relationship is in the process of being finalised. Christchurch has been able to supply Auckland from time to time with urgently needed drugs. Mr Claude Sissons reports:

“ In working to re-establish Medical Aid Abroad in Canterbury, we have concentrated on the following areas.

1 Premises

We were first housed in a Canterbury District Health Board unused dispensary, a convenient location and custom built for sorting packing and recording re-cycled medicines. With the sale of this hospital site we were fortunate to be offered rent free space in a building occupied by a Christchurch food bank. The sorting of pharmaceuticals from pharmacies, our only source of medicines, a labour intensive task is done through the generosity of retired Pharmacists, John Tavener, Malcolm McCann, Maurice Stone, Jean Richardson and Alister Douglas. The results of this work equates to an average stock holding of approximately \$50,000 and the sending overseas of around \$30,000 worth of in date useful medicines.

2. MAANZ Charitable Trust.

We hope this union will bring about improved co-operation especially in areas on policies, standards and researching those areas in the Pacific in need of medicines. In Christchurch we need to do more work on looking at the medicine regulations as they apply to donated medicines, improving communication with the recipient countries, with the purpose of developing long term relations, funding and working with the pharmaceutical manufacturing industry in N.Z

Our hope is that we will be able to work together on these and other issues to more effectively assist those countries in need.

Christchurch would prefer to be represented on the Trust by co-trustees. That is two trustees with one vote only. If this is acceptable to Auckland the co-trustees would be John Tavener and Claude Sisson.

3.The NZ Pharmacy Council

The above body has made contact with us, and require a copy of our Standard Operating Procedures and Policy for their July meeting.

We are working on producing these documents and will send you draft copies for you comments.

We have also had contact from Med-Safe who believes our premises should be licensed in the same way as pharmacies.

4. Funding

We have been fortunate in receiving two donations one for \$1000 from an anonymous donor and \$300 from the Canterbury branch of the Pharmacy Guild.

We also wish to thank Ian Sheerin, our contact with the District Health Board, for his help during the year, Medical Aid Abroad Auckland, and Peter Cooke for their valuable input and the Pharmacy Guild.”

TRUSTEES

The Trustees (Table 2) have usually met with the Executive and we thank them for their interest and involvement. However, with resignations now received, there is a need to appoint new members to keep the numbers at 4 members. With the Charities Act now being law, MAANZ must ensure it adheres to its constitution and create an adequate paper trail of its activities at all levels.

During the year, Dr Newton Wickham, a dentist who has worked for many years has resigned from the Trustees. He has made a major contribution and we will recognise this by awarding him a life membership of MAANZ, the first we have ever awarded.

With two other resignations received, the need to replete the Trustees membership is urgent and this is being arranged.

Table 2 Trustees of MAANZ

<i>*Dr Pat Alley (Chairman), *Dr Elisabeth Smythe, Dr Robin Briant, *Dr Newton Wickam</i>

**Resigned*

AUCKLAND EXECUTIVE

This has met regularly and as required. The members are listed in Table 2. A great deal of work has been done by Drs Chris Bullen and David Morris and the input of Dr Gordon Nicholson as advisor and practical support person has been appreciated. We would like to have more non medical members of the Executive and particularly those with business or financial experience that we at present lack.

Table 2 Executive members of MAANZ

<i>Dr Graeme Woodfield (Chairman), Dr Chris Bullen (Secretary), Dr David Morris (Treasurer), Dr Arun Praji, Dr Glenys Mafi, Dr Bernie Brenner, *Dr David Innes, Dr Gordon Nicholson, Mrs Lily Kwok, Mr Murray Ker.</i>
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**resigned*

INCOMING AND OUTGOING GOODS

The pharmaceuticals are sorted by a team of pharmacists who meet as required to carry out this work. Members are listed in Table 3.

Table 3. Pharmacist Team

<i>Mrs Lily Kwok (coordinator), Mr and Mrs Digby and Jan Nelson, Mr Clive Watkins, Mr Murray Ker, *Ms Libby Boyd, Ms Joanne Amies, *Ms Sharon Cochrane, Ms Amber Gates.</i>

**Resigned*

Other goods are sorted by a number of Medical Doctors, led by Dr Gordon Nicholson and the names of some contributors are listed in Table 4.

Table 4 Medical Team

<i>Dr Gordon Nicholson, Dr Graeme Woodfield, Dr Peter Doak, Mr Allan Ker Dr David Caughey</i>

Packing is usually performed by the Doctors although others assist with this . Special thanks are due to Jocelyn Nicholson and Annabell Woodfield for much help. Quite commonly, persons or organisations come to the store rooms and select and pack their own goods.

The work involved in this area is considerable as it includes the answering of many queries by telephone, fax or email, the reception of incoming items and their transfer to the top floor of NWH, the packing , labelling and documentation of parcels and then arranging for despatch through a variety of means. This often requires trips by car as as far apart as Whenuapai and South Auckland.

One very useful addition to our goods this year was the availability of a large number of in-date textbooks from the Philson library. Most of these have now been distributed.

MAANZ is exceedingly grateful for this help. It is not possible to effectively function without it but more volunteers are needed as this reduces the load on individuals.

Numerous letters of appreciation are received and we are always grateful for this input.

COMMUNICATIONS

Our website at www.maa.org.nz has been reviewed and updated with the help of Mr Larry Robbins. However more work on this is needed to upgrade its content.

We also have started an approximately monthly email list to overseas centres to advise them of what we have in stock at the MAANZ rooms. This comes from maa@clear.net.nz .

Furthermore, news to supporters has been sent out by email from time to time, although disappointingly, feedback has been minimal.

We do need a volunteer to help with our publicity aspect as most of our printed material now needs revision and there is not a general awareness of our organisation.

FUTURE PROJECTS

1. We intend to improve aspects of our governance as outlined in our Deed.
2. Recruit if at all possible some younger members to the Executive.
3. Continue and upgrade our relationship with the Christchurch branch of MAANZ
4. Be involved with a project developed by Dr Bernie Brenner to supply a laser for ophthalmology use in Swaziland.
5. Develop our relationships with other NZ based organisations that are supplying medical aid.
6. Upgrade our emergency response to major disaster appeals

CONCLUSION

A productive year but the work is still too dependent on a relatively small number of workers. The work done is worthwhile but there is a need for new persons to take over more of the formal positions of MAANZ.

Over the year, we have met up with a number of highly committed persons working overseas in humanitarian roles. These unsung heroes deserve our active support and we intend to continue supplying this.

In conclusion, we would like to particularly thank the staff of Smith and Nephew Ltd for supplying many useful items, Allied Medical for special help with mobility aids, The Textile Centre for use of space, and the RNZAF for assistance with transport.

Dr Graeme Woodfield
Chairman
Auckland Executive MAANZ

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