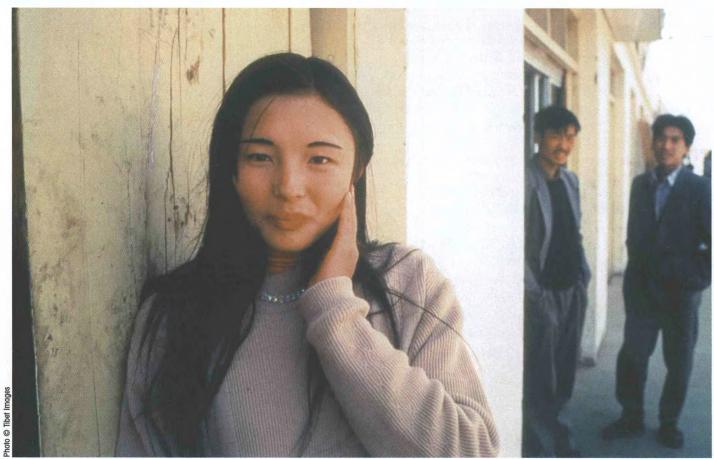


## and healthy babies

English-born FRANCES HOWLAND, a health care provider who works at the American Embassy in Kathmandu, Nepal for six months a year, also spends part of each year working in Tibet. She tells NANCY PATTON of her work with a few of the many international non-governmental organizations (INGOs) working in Central Tibet.



A recent article in the "Sunday Times" puts the figure of commercial sex workers in Lhasa at between 3,500-9,000.

oday there are 20 INGOs in Central Tibet alone working on projects as varied as healthcare, education, water and sanitation, eco tourism and environmental protection, and poverty alleviation programs including small loans for rural people," Frances Howland explained.

"Because of my background," (she is a trained nurse and midwife with a Master's Degree in Public Health,) "I have spent the past two years working on a training program for rural health care workers in safe childbirth methods. and mother and infant health. Deaths during childbirth and infant death are common in rural Tibet. Health workers often have to work alone in very remote and difficult situations, so we bring them into a hospital environment for two months. There we can make sure they receive both practical and theoretical training that will be useful to them in their rural setting. When they complete the training they return to their clinics with a full set of medical equipment."

he urban areas of Tibet have a different health care problem, which is growing at an alarming rate.

"There are increasing numbers of commercial sex workers, both Tibetan and Chinese, in the city. It's hard to estimate how many sex workers there really are. They are usually young and, in the case of the Tibetans, are more often than not illiterate farmers or nomads. Poverty and the wish for a better life drive them to the city; when they are unable to find work they end up as sex workers rather than return home. Their families have no idea what they are doing. The majority of them have never heard of HIV or AIDS, and many of them don't know what a condom is.

"When they do seek medical attention for a sexually transmitted infection, they don't want to go to a hospital so they go to one of the many small private pharmacy clinics where no one will know who they are. There they get charged lots of money for inappropriate intravenous antibiotic treatment; they don't get any



Maternal Child Health Care for women in the rural areas

better and they just carry on working," Frances said.

"This year I coordinated the setting up of a clinic to treat sexually transmitted infections, aimed primarily at sex workers and their clients. The clinic will provide the right treatment at an affordable price and will also provide free condoms and health educa-

tion on HIV/AIDS and safe sex."

rances has been assisting with another INGO project, which involves the harvesting and drying of herbs to be made into traditional Tibetan medicine, the sale of which provides income to nomads.

"The area is in Eastern Tibet, in Kham. It is really remote, an area where only nomads and their animals live, and it takes many days of driving to get there. The altitude is very high, and most of the year it is snowed in. My role is to train the students of traditional Tibetan medicine in concepts of Western medicine. They have to train as traditional doctors for many years and it will be useful for them to have some Western medical knowledge regarding maternal and child health, infectious diseases, and so on. It is a three-year project so I will have to keep returning to this area."

Frances Howland was a participant in the Kopan Lam Rim course in the Spring of 1980. She has lived in India and Nepal for over 20 years. She ran the FPMT Tushita Centre in Delhi in the early 1980s, before moving permanently in 1986 to Nepal, where she was director of the Himalayan Buddhist Meditation Centre in Kathmandu for 10 years. She was a member of the FPMT Board from 1996 to 2001.

## WHO'S HELPING TIBET

By Nancy Patton

In Central Tibet, called the Tibet Autonomous Region by the Chinese, there are about 20 international nongovernmental organizations (INGOs) with offices there. In Kham and Amdo – located in the Chinese-named provinces of Sichuan, Yunnan, Gansu and Qinghai – there are hundreds more INGOs that also work throughout China.

Not all of these INGOs have a permanent presence in Tiber. Many of them visit about twice a year; for example the organizations involved in eye care come into Tiber to run cataract surgery camps for a few weeks and then leave. Others, like an organization based in Beijing that funds tuberculosis treatment in Tibet, visit only once a year.

The well-known INGOS, such as Save the Children Fund, run education programs. Médecins Sans Frontières (Doctors Without Borders) run health programs, and install water pipes and wells to provide clean drinking water to rural areas. Recently Handicap International started working in Tibet – they have set up the first factory making prostheses for people crippled with polio and other handicaps.

Then there are individuals who have come to Tibet and established their own organizations. These include a Spanish group that runs a home for street children and an orphanage for 30 children; and a blind German woman who has founded a home for the blind and instigated the development of Braille in Tibetan. There are groups who sponsor schools; others who provide small loans to rural people who have business ideas; and those who introduce Tibetans to appropriate technology. Some of the INGOs are Christian missionary groups who run a variety of programs mostly in area of health and education, and use the opportunity of being in Tibet to spread their message.