2000 The second trip was in January 2000 when I accompanied the Boston-based Physicians for Human Rights to exhume the remains of Ken Saro-Wiwa. This was not successful as the regional government did not permit access to the interment site.

The third visit was made in April 2000, for the symbolic burial of Ken Saro-Wiwa. The fourth trip was in September 2000, which coincided with the visit of President Obasanjo to Ogoni.

These visits also provided me with the opportunity to observe the changes in the Ogoni ecology after a “Shell-free” seven years; to interact with other communities in the Niger Delta; and to analyze, what it means to end corporate dominance as well as to observe the manipulative machinery of a transnational corporation as it tries to break the resolve of the Ogonis.

Brief flashback
The impact of the practices of oil companies on the Ogoni people are a destroyed livelihood. In the early 90’s, the life expectancy of the Ogoni people was 48 years, which was six years less than the Nigerian national average.

It deprived the Ogoni people of their basic human rights. When the Ogonis complained of this deprivation, the corporation, using corrupt practices, seduced the military dictatorship of Nigeria to deprive the Ogonis of their civil and political rights. Denial of free speech and the right to associate, illegal detention, torture and other dehumanizing practices on the Ogoni people by the security agents were rampant. Also hundreds of Ogonis including the Ogoni 19 were held illegally in detention without trial until 1998 when General Abacha died and a transition to civilian rule started. In addition there were constant violations of their economic, social and cultural rights leading among other things to ill health and malnutrition.

The Ogoni Nationality and the present Nigerian Democracy
One of the cardinal demands of MOSOP was the issue of self-determination of the Ogoni people within Nigeria where we can control our environmental resources and maintain our identity.

The Ogoni want their own political arrangement within Nigeria like other ethnic groups have. This is necessary because we are a minority in a multi-ethnic country where issues of minority rights are not embedded in the constitution.

MOSOP is working with different groups in the Nigeria civil society and is calling for a Sovereign National Conference which will look into the issue of devolution. So far, one of the major opposition political parties has given support to this view, but the present leadership is against it.

While appeasement measures, like ordering the release of the bodies of the Ogoni martyrs to their families (though yet to be fully complied with), and a visit by President Obasanjo when the President asked for a one minute silence for the Ogoni martyrs who he referred to as “Prisoners of Conscience” have been made, the Ogonis noticed these were just symbolic gestures. None of the points in the Ogoni Bill of Rights or the eight itemized political, environmental or economic issues which were put forward in 1993 for negotiations have received any response.

The Environment of Ogoni
Since my return I also noticed that the vegetation is presently more full and green, the air fresher, and the streams and rivers are less painted with oil slicks and colours. The rural Ogonis said that their farm yield has increased since the end of gas flarings and that there is a reduction in the frequency and quantity of oil spills. The land in some sites, where smaller oil spills had occurred, has started to regenerate and farm crops or wild shrubs with fruits have started growing again.

However, poisonous gases are still emitted into the environment from leaking wells and oil spills still occur intermittently. The company has made no effort to stop or to remove the hazards. Meanwhile the Ogonis continue to demand that Shell should clean up the areas affected by oil spills and pay compensation for the destroyed natural resources, besides accepting some responsibility for the human rights abuses.

Shell and the Ogoni People
Following the execution of the Ogoni leaders, the Ogonis, have held both Shell and the Abacha regime responsible. While Shell has not tried to deny responsibility or to explain the roles they might have played, the company engaged in secret alliances with some leaders, most of whom are opposed to MOSOP ideals.

Unfortunately, this divide and rule tactic resulted in the killing of five Ogonis and the displacement of about 30 families in April of 2000. On October 18, 2000, Shell announced that they were going to reopen their facilities in Ogoni. This has led to a lot of tension in Ogoni.

Owens Wiwa, 250 College Street, Toronto, Ontario M5T 1R8, Canada. E-mail: wiwa@camh.net
USEFUL PUBLICATIONS

Global Water Supply and Sanitation Assessment – 2000

This book – complete with maps, graphs and tables – reports about the global assessment of the water supply and sanitation scenario in 2000.

Prepared by the UNICEF and WHO joint monitoring programme, it gives an authentic breakdown of the situation, both country and region wise. By focusing on the users rather than the providers, it enables us to track the local initiatives that are central for sustained improvements.

LETTERS

Checklist to be checked

As a reader of Contact and a dietitian, I was disappointed to see the Health Habits Checklist on page 15 of the Issue 169. There is no evidence that vitamin and mineral supplements have health benefits, except to correct specific deficiencies and in the case of folic acid supplementation during pregnancy. They are expensive, and money is better spent on food.

Apparently the body uses vitamins and minerals in food more readily than those taken as supplements and sodium an essential mineral, is needed for those who do not eat processed food. Also those who live in hot climates, should add salt to their food.

‘Avoid fats’ is a dangerous recommendation. We all need essential fatty acids, and people who eat little or no meat products need to add fat to their diet to meet their calorie requirements. Children under five years of age should have fat in their diets as a concentrated source of energy, as they need a lot of calories for their size and cannot eat enough low fat bulky food to provide it.

I hope that no damage has been done by these recommendations and suggest that in future people with relevant knowledge check such articles. Many people have little access to health information, so Contact has a responsibility to provide evidence-based advice.

Eleanor McGee, Dietitian and Community Health Educator
25 Lightwoods Road, Smethwick, B67 5AY, UK

The Health Habits Check List published is used within the context of Jamaica and is appropriate according to the local medical standards. Contact Editor agrees that this list should be adapted in other contexts such as climate, local food habits and food availability, besides taking into account factors like whether the population is generally under-nourished or well-nourished. It should also be in accordance with target groups, eg. elderly, children, adults and pregnant women.

As you do, the check list does recommend the consumption of ‘good fats’. Use of vitamin supplements, salt intake and an annual medical check-up continue to be controversial, and local choices tend to influence decisions. We included this check list because aspects of diet and behaviour were equally emphasized.

Editor

Contact Solidarity Appeal

Contact is expanding, rising to the challenges of regionalization and strengthening the network of health workers.

Will you help us in this? A donation of just US $10/British Pound 8/SFr 18/Rs. 460 will enable one more health worker to receive Contact free of charge.

You can send your contribution to the Contact Solidarity Fund, to (please mark ‘Contact’ in your covering letter):

1. World Council of Churches
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SB 17999, Indian Bank A-3 Local Shopping Centre, Janakpuri New Delhi 110 058
Susan Cole-King

Susan Cole-King’s life spans the history of Christian health care over the past forty years. Completing her medical education in England, she started her career in Malawi in 60s and early 70s, developing the principles of primary health care, and becoming increasingly concerned with the challenge at village level of ensuring that women, children and marginalized groups had access to quality health care.

After doing post-graduate work at Sussex University, she joined the staff of WHO, and became a chief medical adviser to UNICEF. Utterly committed to community generated health care, she began, in the early eighties, to have serious misgivings about the direction UNICEF was taking, with its increasing obsession with targets and outcomes. Finally, in 1983, she resigned, feeling unable to continue working in an environment which she saw as violating her belief in the principles of health for and with the people.

In 1984, when she entered Union Theological Seminary in New York, her second career began. She was ordained a priest in the 1987, and went to work with homeless people in New York. She returned to a parish in England, and her priesthood was finally recognized by the Church of England in 1994. She ‘retired’ in 1997, and became committed to exploring the links between prayer and justice. Then the Anglican Bishop of Southern Malawi invited her to return to Malawi, and to advise on the implications for the church of the HIV/AIDS epidemic. In 2000, Sue spent four months in Malawi, holding retreats, workshops and conferences on AIDS with clergy, teachers and women’s leaders. This work had a profound effect on her, and she was looking forward to returning in 2001 to extend this work to other dioceses and churches.

For her four children, and for those of us who were her friends, Sue’s death is a huge loss. Struggling with some of the most difficult issues of our time, she was always willing to listen to other people’s concerns and to help. She was fascinating, entertaining and extremely widely read. On our final meeting, shortly before she died, we went together to an exhibition of paintings in London. Over lunch, she spoke of her passionate belief in the need for transformation in the Christian churches, and the creative challenges to which AIDS is exposing them. She died in her sleep, quite unexpectedly, on February 8, 2001, while on holiday in Australia with her son Michael.

Gillian Paterson
Free lance development consultant

Nancy-Jo Peck

Nancy-Jo Peck was one of the founders of the ‘GIFA girls’ in Geneva, together with Annelies Allain and Judith Philipona in 1979. GIFA (Geneva Infant Feeding Association) soon became the centre for the breastfeeding movement internationally and the base for the IBFAN network and Nancy-Jo was always at the centre of it. I got to know Nancy-Jo when I came to Geneva in 1987 to work for the WCC. The protection and promotion of breastfeeding was one of the issues on my desk and the group soon became close friends. Many lunches were spent discussing possible options and strategies in the struggle against the marketing of baby food companies. She was always there to protect children from the second best nutrition and mothers from being cheated into expensive artificial feeding. While her crusade on the Right of the Child to be breastfed often led her into confrontation with baby food manufacturers, EU–bureaucrats, and WHO staff she remained undeterred. For her, the child’s welfare came first and she was often the ‘conscience’ at meetings, reminding the rest that they had forgotten the breastfeeding issue.

All of us who worked with Nancy-Jo miss her and regret the loss her death is to a very important cause, that is far from won. Her example is a challenge to all of us working for the wellbeing of children, for justice and for ethical marketing practices.

Nancy-Jo fought her cancer for several years and only a few months before her death we met in Geneva. She was not too well, but was full of energy and commitment as ever. She died on February 23, 2001 peacefully and at home. Please remember her husband Bob Peck and their two daughters Sarah and Amy in your prayers.

GIFA has set up a Nancy-Jo Peck Fund so that her work can continue. All are welcome to support this fund and thereby the continuation of her work.

Birgitta Rubenson
Former Programme Secretary, WCC
Geneva Infant Feeding Association, PO Box 157, CH-1211 Geneva 19, Switzerland
ANNOUCEMENTS

Contact's new editor

We would like to take this opportunity to introduce Reena Mathai-Luke who takes over from Darlena David as the editor of Contact.

Reena is a professional journalist and has worked with some of the leading newspapers in India. Before joining Contact she was with The Sunday Observer for close to a decade covering health and development issues. Her interests which includes gender and justice, environment, community health, human rights and international relations are already reflected in this issue of Contact. The Contact Editorial Board and the Regional Language Groups of Contact are looking forward to a smooth and fruitful collaboration with her.

Good luck

We would like to inform readers that Darlena David is leaving us as Contact editor. We thank her for all her efforts the last three years with regard to continuing the production of Contact from New Delhi after it had to be discontinued from Geneva. She coped with many difficult logistic problems but ensured that Contact survived and reached readers all over the world. We wish her well in her new position with the Hesperian Foundation in the USA.

Christina de Vries

The Pharmaceutical Advisory Group (PAG) Meeting

The annual PAG meeting is scheduled from October 3-4 at the Ecumenical Centre, Geneva. This year’s topic is Massive Efforts on Malaria, TB and HIV/AIDS. With most international agencies and donors committed in various ways to the “Massive Effort” to fight infectious diseases on a global basis, this meeting will be focusing on how the ecumenical body can help in accessing existing drugs, vaccines, treatments, besides making preventive measures more universally available and affordable.

UN World Conference Against Racism

The World Conference against Racism, Racial Discrimination, Xenophobia and Related Intolerance is to be held at Durban between August 31 to September 6, 2001. The slogan for 2001 conference is “United to Combat Racism: Equality, Justice, and Dignity”. Organized by the United Nations High Commission for Human Rights, the aim of this conference is to ensure that international standards and instruments are applied in efforts to combat racism, besides helping to formulate recommendations for further action to combat bias and intolerance.

Racism has been a concern of the ecumenical movement for more than 70 years and the WCC’s Programme to Combat Racism (PCR) has been relentlessly campaigning against discrimination. The WCC is helping churches and its partners to prepare for this conference, besides gathering information on how churches and church-related organizations experience and respond to this problem. The WCC is currently completing an ecumenical study on racism, the results of which will be presented 2002 WCC Central Committee meeting.

Contact deals with various aspects of the churches’ and community’s involvement in health, and seeks to report topical, innovative and courageous approaches to the promotion of health and healing.

Contact, magazine of the World Council of Churches is published quarterly in English, French, Spanish and Portuguese by a partnership of the World Council of Churches (WCC); Christian Medical Association of India (CMAI); German Institute for Medical Mission in Tübingen (DIFÄM), and Medical Coordination Secretariat of the Netherlands (MCS). Present circulation is approximately 15,000. Articles may be freely reproduced, providing that acknowledgement is made to: Contact, the publication of the World Council of Churches. A complete list of back issues is published in the first annual issue of each language version.

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Contact is also available on the World Council of Churches’ website: http://www.wcc-coe.org/wcc/news/contact.html