



AIDE MONDIALE ORPHELINS RECONFORT

AMOR

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ABOUT TASHA de VASCONCELOS

« For country not self »

Founder AMOR Association (Aide Mondiale Orphelins Réconfort)
Supermodel and actress
Ambassador of the Pasteur Institute

Africa in her heart

Tasha de Vasconcelos was born in Beira, in Mozambique, the daughter of engineer, Fernando João de Vasconcelos Mota e Cunha, a descendant of King Alfonso III de Leão, member of one of Portugal's oldest families, and her British mother, Jacqueline, a descendant of a King of Scotland of the XI century, and of a family from the north of France. Grand-daughter of a former Governor of Angola, Tasha and her sister Pamela – two years her junior – enjoyed a idyllic life by the side of the ocean, in one of Portugal's oldest colonies. They grew up amongst the animals of her grandfather's farm: not least the horses - a particular passion of this highly accomplished horsewoman.

However at only 8 years old, Tasha had to face the cruelty of the civil war and revolution, which tore her country apart, followed just five years later by that of Rhodesia – now Zimbabwe – where they had fled. At 13 she and her family moved first to Portugal, and then on to Canada.

There she embarked on a new life. She joined the University of British Columbia where she studied international relations. She was spotted at 19 and quickly signed up by Elite Models, and subsequently joined the Marilyn agency in Paris.

A humanitarian to the core

With a natural generosity, Tasha has always had a heart for helping and supporting others. She has been to many charity galas, but it is on the ground that she finds her true calling, her *raison d'être*. Born herself in Africa she has always been involved in supporting children, and has a ten-year record in humanitarian work. Like her inspiration, Audrey Hepburn, Tasha knows how to use her contacts and reputation in the cause of humanitarian concerns. Alongside her physical resemblance to this 50's icon, she shares her altruism and generosity of heart, especially for children for whom she has a particular affection.

In 1996 she decide to reacquaint herself with her roots, by going back to the land of her birth, and found herself in South Africa working for the **Nelson Mandela Children's Fund**, followed by a further visit the following year.

1999 saw her working as a **UNICEF Goodwill Volunteer** supporting children suffering from malnutrition in Bolivia. This was followed by a further mission in 2001 to Algeria helping childhood victims of war.

As **Special Campaigner for Children** she worked in 2005 in Mozambique with **UNAIDS**, campaigning against HIV/AIDS in Africa, and in recognition of her humanitarian work that same year she received a special **UNESCO** award.



ABOUT THE AMOR ASSOCIATION

In 2006, she created her own organisation **AMOR – Aide Mondiale Orphelins Réconfort** supported by Prince Albert II de Monaco. She received particular support from the American actor Paul Newman.

The AMOR Association is comprised of five permanent members of the Board of Director AMOR has no paid staff members and all projects are decided by a council of administration to be agreed by the board.

AMOR's aim is to see significant reductions in global infant and maternal mortality rates, through working both with trusted local agencies and international partners. In achieving this AMOR has two particular goals: to provide medical services to mothers at risk, and appropriate care for orphans across the world.

On the 15th April 2009 Tasha opened AMOR's first project, a maternity unit in Malawi, financed, built and equipped entirely by **AMOR**.

THE AMOR KASESE MATERNITY CLINIC

“One of the best guarantees for getting countries on the faster track to less poverty and more opportunity is investing in maternal health and reproductive health programs.”

Joy Phumaphi, Vice President for Human Development, World Bank.

The AMOR Kasese Maternity Clinic is making a high impact difference in Malawi - a country caught in the epicenter of the HIV/Aids pandemic and suffering a maternal mortality rate that is one of the worst in the world, almost 1,000 per 100,000 live births.

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

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

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



ABOUT MALAWI

Situated inland in Eastern Africa, the small country of Malawi is known as “The warm heart of Africa” for the genuine warmth of its people. These very people however live under the enormous multiple burdens of poverty and disease. The poverty and health statistics of Malawi are some of the world’s worst:

- Malawi’s population is just over 13,500,000
- Malawi has a national average HIV/AIDS infection rate is over 14%
- Of Malawi’s 1 million orphans, 500,000 have lost one or both parents to AIDS.
- 70% of these orphans are in some form of child labour
- About 1 in 100 women die during childbirth / compared to 1 in 15,000 in the West
- About 1 in 8 children will die before their fifth birthday
- 64% of nurse posts remain vacant due mostly to HIV/AIDS-related death.
- 83% of Malawians live in rural communities
- The gross national income is just \$690.00
- 52% of Malawians live in deep poverty with annual incomes less than \$200.USD

In addition to deep and widespread poverty, the country’s development challenges include high population growth, food insecurity, malnutrition, and a high incidence of malaria and other diseases. However, in the face of these constraints, there is hope emerging in Malawi as important partnerships in health intervention form to take aggressive action to institute change.

DR. CHRIS BROOKS FOUNDER & PRESIDENT, LIFELINE MALAWI

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

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

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

Dr. Chris Brooks