

The Rejoice care unit travels to homes and communities to serve the medical and emotional care needs of poor people suffering from HIV/Aids infection. The programme provides free, on-going care to communities which lack adequate medical services. Fully operational since January 1998, Rejoice today serves a population of very poor, sick and underprivileged people living in urban slums, impoverished villages and the surrounding hill tribe areas. ([see map of Chiang Mai Province](#))

The direct beneficiaries of our projects are the poor, women, children, sex workers, drug users and other marginalised groups such as local hill tribe communities. These are the people most affected by HIV/Aids, suffering from a high rate of transmission and few resources to cope with the many problems associated with the disease. Rejoice serves over 1,000 families in Chiang Mai Province who otherwise would have little or no access to basic health care, little or no education about how to improve their own health standards and very few social and emotional support systems to help cope with the consequences of HIV/Aids.

## BACKGROUND

- ♦ **Rejoice Charity provides medical, social and educational support to communities infected with and affected by HIV/Aids**
- ♦ **Rejoice has no religious or political affiliation and does not discriminate on the basis of race, gender, socio-economic status, sexual orientation or ability.**
- ♦ **Based in the city of Chiang Mai, Rejoice makes weekly visits to communities as far afield as Fang in the north to Chom Thong in the south.**



Afternoon Nap at See-Un Muang Day Care Centre

- Rejoice makes weekly visits to over 15 clinics in more than 10 locations and is the only NGO in Chiang Mai Province making regular, weekly outreach calls to HIV families. We have recently started working with Chiang Dao Hospital HIV clinic helping with transportation and supplies on Home Care visits. We are hoping to start something similar with the HIV clinic in Sankampeang, which, until recently had to temporarily close because of lack of funds.

- the milk programme is progressing very well. All pregnant Thai women are now all tested for HIV. If positive, they are given ARV drugs and the baby will be fed on formula milk for the first 6 months after birth. This has been extremely successful.

Unfortunately, we have two young children under the age of 8, both born to migrant women, who were not tested for HIV, and subsequently breast fed their babies, and consequently have contracted HIV. Rejoice distributes formula to babies and children for nutrition purposes and is normally stopped when the child leaves primary school (if not before).

- the child sponsorship scheme is doing very well thanks mainly to a very active group of individuals in Singapore. Currently we have more than 70 school children and babies seeking and receiving sponsorship. Each sponsored child has a PDF file (which can be linked to the spreadsheet) in which correspondence letters and photos between sponsors and child are placed.
- there is so much that could be done in terms of counselling - we are talking to local ethnic NGO's in Chiang Mai who may wish to come on Rejoice Outreach from time to time and give counselling sessions in the ethnic language of the community and perhaps persuade people that HIV/Aids is no longer a death sentence if early diagnosis is made.



Neat and Tidy

## Chiang Dao Home Care.....



Gee with Duan, Kanda and Chaleow

We have recently joined forces with the Chiang Dao Hospital HIV clinic and their volunteer health workers who run a patient home care scheme. There are three health workers, themselves HIV positive, who work at the Chiang Dao hospital on a volunteer



Arm and Kanda outside a Lahu house

basis assisting the doctors with the HIV patients. They receive a small allowance which hardly covers their expenses. Two days a week they make visits to patients' homes to check whether they are following the stringent regime of their HIV medication, to see if the side effects are not too severe and give a counselling and advisory service to the patients and their family. These visits are usually made by motor bike which severely limits the radius of coverage. Occasionally they have access to a truck and can make longer journeys to visit the more remote communities.

The rural population in this general area comprises over 3,000 families from three main ethnic groups: Chin Haw, Lahu and Tai Yai. The Lahu people are at a particular disadvantage because of their lack of Thai language and general education.

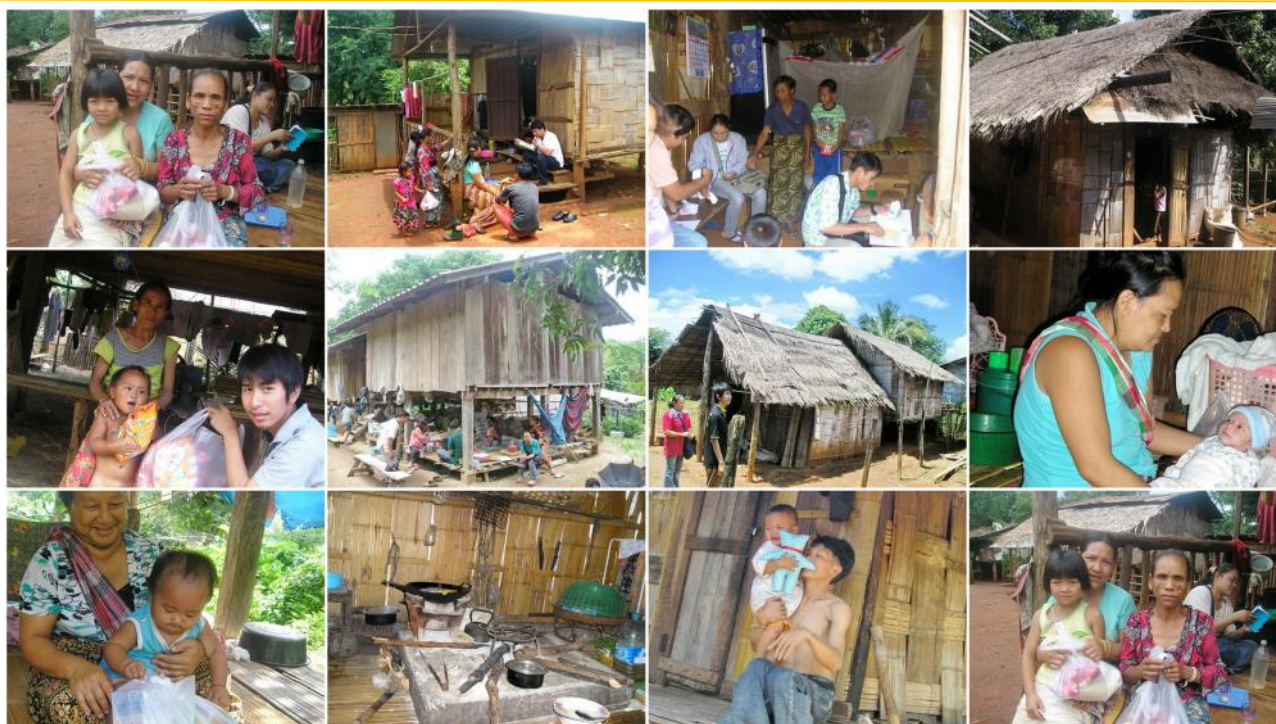
The majority work on small agricultural farms growing crops such as rice, corn, green vegetables, garlic, etc.

There are several families who take HIV anti-retroviral (ARV) medicine. A major problem they face, apart from the language, is the journey to the hospital in Chiang Dao, where they must go regularly every two or three months to receive their check-up and ARV medicine.



Typical Lahu indoor kitchen

The journey is often made by motor cycle and the entire trip takes a full day. The patients not only have the difficulty of negotiating the poor roads, especially in the rainy season, but they also lose a day's wages. The villagers say 'it is good the medicine is free BUT we can't afford to go and get it'.



Collage of Lahu families living with HIV. Home Care visits made together with Chiang Dao Hospital.



## Counselling, Language and Trust



Reproductive Health Brochures printed in Burmese, Shan and Lahu languages  
Courtesy of MAP Foundation

Rejoice not only distributes formula milk and palliative medicines, it also offers counselling services to patients and to families affected by HIV. One major difficulty is the long held belief that HIV is a death sentence. Most people in these rural areas have watched friends or relatives slowly die resulting from HIV/Aids – nothing could be done and medicines were unaffordable. To convince them otherwise, especially if their native language is not Thai, can be quite daunting. Some do not want to be tested for fear of finding that they are HIV+.

“What is the point, I feel fine, I only see a doctor when I don’t feel well. If I am tested positive I will die – you can’t tell me – I

have seen it happen before – no one will talk to me, I shall have no friends, what is the point – I don’t want to know.”

By means of the regular visits together with the health care workers (themselves HIV+) from Chiang Dao hospital, trust can be built up in the community and in due course there will be a tangible benefit in the reduction of stigma and discrimination amongst families and communities such that people living with the virus can, with regular screening and ARV medicines, live active, healthier and happier lives.

Language is a major barrier to efficient communication on matters concerning sex and reproductive health. Many of the rural communities speak their own language and have only basic knowledge of Thai language especially the written language. There are large communities of Lahu (Muser) living in the rural areas of Chiang Mai province many of whom have migrated across the border from Myanmar. There is a very large population of Tai Yai who have fled the fighting in Shan state and now live and work here to earn money to send to their families back home. The Tai Yai have a slight advantage since the spoken Shan language is quite similar to the Northern Thai dialect so verbal communication in Thai is possible for them. However the Shan script is completely different from the

Thai script so much so that the Tai Yai have difficulty reading and writing Thai.

The Migrants Assistance Programme (MAP) is a foundation to help migrant workers in Thailand. They have produced various publications in the Burmese, Shan, Lahu and other languages including one which concerns sex and reproductive health. Rejoice carries these publications and distributes them to the local communities.

Email;

[contact@rejoicecharity.com](mailto:contact@rejoicecharity.com)



Two patients died recently. Jasae, a 58 year old Lahu man and Loto, a 39 year old Tai Yai man from Shan State. May they rest in peace

## Sponsor a Child's Education....

Poverty and HIV are common partners, particularly in the rural communities. It is not uncommon to see children being cared for by elderly grandparents or relatives. Many are orphaned, many have one surviving parent usually infected with HIV. Desertion by the father is often a factor. The upshot is abject poverty.

Sponsorship can often allow the child to grow up in the village community rather than in an orphanage.

Education while being a basic right for children in many parts of the world, is a rare privilege for the poor rural children in



A wonderful way to help is through educational sponsorship

Chiang Mai Province. While the government provides free tuition, families have to buy

school uniforms;- regular uniform, gym and sports uniform, scout or guides uniform.

Over and above uniforms and clothing, school bags, books, writing materials etc. have to be bought - without these the children cannot attend school; moreover travel and meal expenses have also to be found. Rejoice encourages potential donors to sponsor a child's education by contributing to these expenses (please see below).



## ....Sponsor a Child's Education

Rejoice encourages donors to support a child to go to school for one year. We do this by proving a sum of money to go towards the cost of sending a child to school. The actual amount required varies considerably and depends on level of education – primary, secondary or college. The costs increase with the level, but in all cases will exceed 5,000 baht per year.

We must emphasise that this is not the primary activity of Rejoice but it is a wonderful way to support the needy and poor families.

This is why we ask potential donors to inform us if they would like to contribute part of their donation to sponsor a child for a year. Of that donation 5,000 baht

(or 7,000 baht) would go directly to sponsor a child's education for one year and the remainder would go to support the Rejoice outreach visits.

Since the needs and expenses grow as the child grows older we have introduced a two tier system of sponsorship based on age and/or level of education, thus;

- Children (students) at high school, college or university we ask 7,000 baht (about \$230 US Dollars)
- Younger children we continue to ask 5,000 baht (about \$165 US Dollars). Also, we now include pre-school children and babies

If you would like to sponsor a child please let us know by sending an email at the time you make your donation. We can either select a child for you from our ranking of most needy **OR** you can specify which child based on gender, age etc. and we will select a child accordingly.

**A wonderful way to help is through educational sponsorship**



**You can also sponsor pre-school children**

### Database of Children Sponsored

The screen-snip is a part of the Microsoft excel (XLS) master file which shows all the Rejoice children— from infants to college students. The headings are self explanatory although of note is the child's age which is automatically calculated on a daily basis from the date of birth. Also a column showing HIV status of child/mum/dad. We currently have over 70 children on the database and we are keen to add more.

### Correspondence

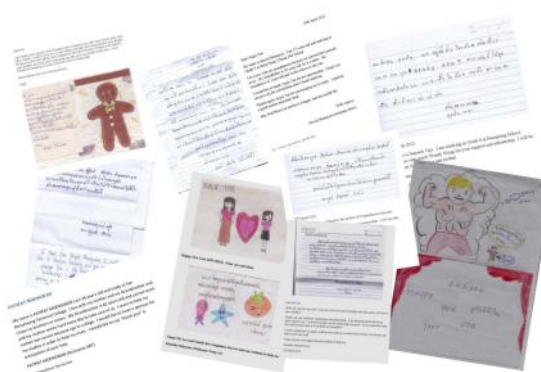
Once sponsored the child (or guardian) will write a "thank you" note which Rejoice will translate and email to the sponsor. Similarly, if the sponsor wishes to write to the child or (send photos) this can be done by an email to Rejoice which we can translate and pass on to the child. The collage on the right shows some of the past correspondence between child and sponsor.

This has proved to be very successful and can be a great motivator for the families.

Email;

**[contact@rejoicecharity.com](mailto:contact@rejoicecharity.com)**

R	Sl	Sex	D.O.B	Age	District	address	HIV Status	Renewal	Not sponsor	School	Comment
29	F	03-Jul-09	3	6	Sankampaeng	1/29/09 70.12/11	-ve/-ve/-ve	16/Oct/13	f	Ben Thunglekorn S	
30	M	10-Nov-09	3	2	Chiangdao	249 11/11 2 0.1/11	-ve/-ve/-ve				
31	M	07-May-09	3	8	Sanpathong	126 11/11 5 0.1/11	-ve/-ve/-ve		m		
32	M	26-May-10	2	8	Sanpathong	182 11/11 4 0.1/11	-ve/-ve/-ve		j		
33	M	15-Mar-04	8	10	Chiangdao	217 11/11 2 0.1/11	-ve/-ve/-ve	16/Oct/13		Ben Chiangdao Sci	
34	F	06-Oct-08	4	3	Sereep	338 11/11 4 0.1/11	-ve/-ve/-ve	5/Apr/13			
35	F	08-May-02	10	8	Chiangdao	313 11/11 12 0.1/11	-ve/-ve/-ve	16/Oct/13		Ben Nongkiew Sci	
36	F	06-Aug-02	10	5	Chiangdao	234 11/11 16 0.1/11	-ve/-ve/-ve	16/Oct/13		Jaofa Aubonrat Sci	
37	M	25-Jun-96	16	7	Chiangdao	00110 0.1/11	-ve/-ve/-ve	27/Mar/13		CHIANGDAO SCH	
38	F	31-Mar-02	10	10	Sankampaeng	115/1 11/11 10 0.1/11	-ve/-ve/-ve		6	TERDTHAI SCHOOL	
39	M	04-Feb-95	17	11	Sankampaeng	601/1 11/11 4 0.1/11	-ve/-ve/-ve	5/Jun/13		SANKANPHAENG TI	
40	M	10-Mar-06	6	10	Chiangdao	186 11/11 5 0.1/11	-ve/-ve/-ve	20/Apr/13		BANTAM SCHOOL	
41	F	04-Jan-92	21	0	Sankampaeng	1001/1 11/11 0.1/11	-ve/-ve/-ve	20/Apr/13		SANKANPHAENG TI	
42	F	21-May-04	8	8	Sanpathong	110/1 11/11 0.1/11	-ve/-ve/-ve	15/Mar/13		DONGPARINGIWI SC	
43	F	03-Apr-00	12	9	Sanpathong	74 11/11 11 0.1/11	-ve/-ve/-ve	8/May/13		WATHUJIN SCH	
44	F	17-Oct-01	11	3	Sanpathong	9 11/11 4 0.1/11	-ve/-ve/-ve	16/Oct/13		SANPATHONG SCH	
45	M	22-Dec-98	14	1	Sanpathong	92 11/11 7 0.1/11	-ve/-ve/-ve	15/Mar/13		TOONGFARBO SC	
46	F	29-Sep-96	16	4	Chiangdao	229 11/11 3 0.1/11	-ve/-ve/-ve	20/Apr/13		CHIANGDAO SCH	
47	M	31-Dec-99	13	1	Sanpathong	110/1 11/11 1 0.1/11	-ve/-ve/-ve	15/Mar/13		BANPHANG SCH	
48	M	05-Nov-97	15	2	Chiangdao	117 11/11 4 0.1/11	-ve/-ve/-ve	17/Jul/13		CHIANGDAO SCH	
49	F	07-Dec-06	6	1	Phrao	85 11/11 10 0.1/11	-ve/-ve/-ve	25/Apr/13		SANSAIPATTANA SC	
50	M	28-Feb-94	18	11	Phrao	29 11/11 5 0.1/11	-ve/-ve/-ve		8	PHRAO SCHOOL	
51	F	27-Feb-01	11	11	Phrao	90 11/11 5 0.1/11	-ve/-ve/-ve	8/May/13		BAN JAENGKURU	
52	F	06-Jan-98	15	0	Phrao	85 11/11 10 0.1/11	-ve/-ve/-ve		4	NONGPID SCHOOL	
53	F	27-Jun-02	10	7	Phrao	90 11/11 5 0.1/11	-ve/-ve/-ve		5	THAMKANG SCH	
54	M	16-Nov-07	5	2	Chiangdao	202 11/11 2 0.1/11	-ve/-ve/-ve	10/Apr/13		JOMKEEREE	
55	F	18-Jul-02	10	6	Chiangdao	98 11/11 1 0.1/11	-ve/-ve/-ve	25/Apr/13		BAN MUANGNAGI	
56	M	04-Jan-97	15	4	Chiangdao	00 11/11 1 0.1/11	-ve/-ve/-ve	25/Apr/13		BAN MUANGNAGI	





In another effort to win the battle, the Thai government launched a five-year campaign last year named, "Zero new HIV Infections, Zero Discrimination, Zero Aids-related deaths.

- **Zero New HIV Infections**
- **Zero Aids Related Deaths**
- **Zero Stigma and Discrimination**

#### Arunotai aka Nong Ook

A shootout in a Thai town on the Burmese border is a reminder that the illegal drug trade is thriving in northern Thailand, despite efforts to crack down.

"Two policemen were shot by drug dealers in the noodle shop over there," said a Swiss volunteer teacher, pointing across the road to where the clash occurred the day before.

Welcome to Arunotai, aka Nong Ook, a dusty little Thai town whose one main street leads to a narrow country road that ends abruptly at the closed Burmese border 3 kilometers away...[more](#)



Multi-tasking

## World Aids Day at the Burmese border



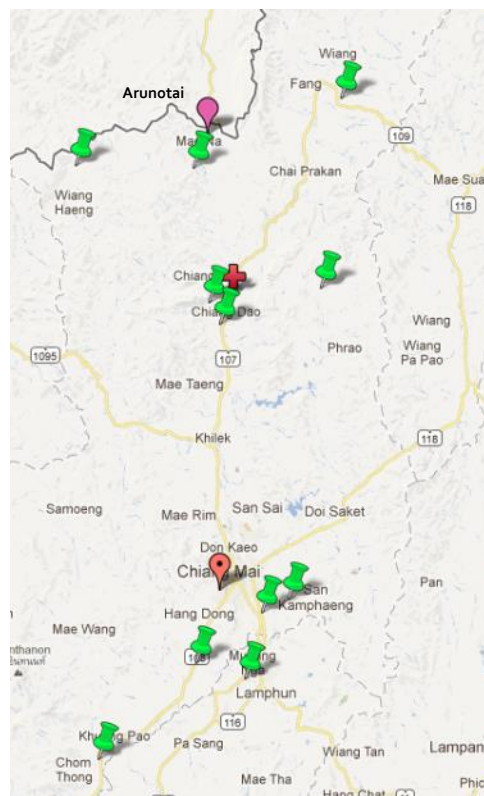
.December 1<sup>st</sup>. is World Aids Day. Rejoice was invited by Chiang Dao Hospital to attend a jamboree in Arunotai (Nong Ook) a sprawling frontier town on the Burmese border.

We departed from Chiang Mai at 6 o'clock in the morning for the 2½ drive to the Border. We arrived at Arunotai High School to find that stalls had already been laid out, a stage set-up and students both young and old from all parts of Chiang Mai Province, together with soldiers, border guards and local police lined up on the sports field. Most of the children wore school uniform but some were dressed in their traditional tribal costumes.

The stalls around the perimeter were provided by various groups including ones from injecting drug uses, Men who have sex with Men, religious groups, ethnic groups etc. There was also a good turn out by the local police, army, and border guards giving free haircuts to children. There were art and writing competitions for the children with the common theme of HIV, what it is, how it is transmitted and how it can be prevented.

The various schools provided entertainment in the form of traditional songs and dance – everyone was having a jolly good time.

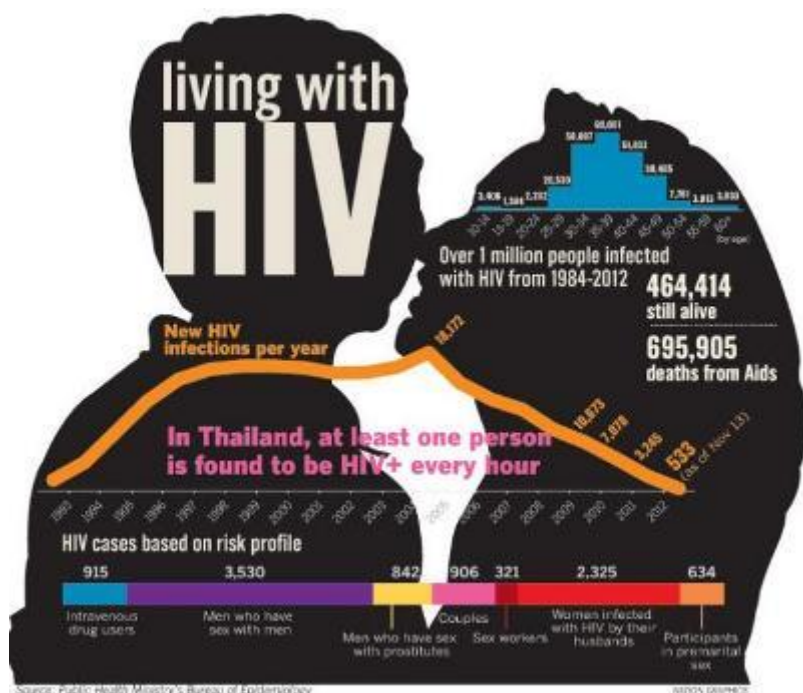
We left Arunotai in the early afternoon and stopped for lunch at "The Chiang Dao Nest" on our return to Chiang Mai. We had a very happy day re-assured in that the young were receiving a good grounding and awareness of the HIV virus.



Map showing Rejoice Outreach Coverage

Similar events are held all over Thailand on World Aids Day; let us hope that the lessons learnt today will be remembered as the children grow into adulthood.

## Country in Crisis



This article appeared in "The Nation" English language newspaper. It serves as a reminder not to become complacent concerning HIV.

Follow the links below for more recently published original articles;

- [Country in Crisis](#)
- [Stigma is worse than the disease itself](#)
- [Migrant workers have most to lose when tested positive](#)
- [Seeing the light](#)
- [The Aids Access Foundation](#)

In Thailand, at least one person becomes HIV-positive every hour, joining a million others who have been infected with the Aids virus in the country over the past two decades.

Despite the national campaign launched more than 20 years ago, HIV infections have been growing steadily. The Public Health Ministry estimates that more than a million people have been infected over the past two decades, and only about 464,414 of them are still alive. The key reasons for this increase are that many people still indulge in unsafe sex and not many undergo tests.

It is estimated that about 80 per cent of new cases are caused by unprotected sex and about 300,000 people are carriers of the virus.

"They never think that they will be at risk if they don't use condoms," said Dr Pornthep Siriwanarangsarn, director-general of the Disease Control Department.

In addition to these alarming facts, Thais have been starting to have sex at a very young age. A recent survey on teenage sexual behavior found that about 20 per

cent of girls lose their virginity at the age of 12, while 40 per cent become sexually active at 16.

"This shows that teenagers are at high risk," Pornthep said, adding that eight out of 10 teenagers admit to not using condoms. "This is a reality that we have to accept. Our girls are no longer young virgins. In fact, many get married when they are merely 13."

The Aids Access Foundation reported that between July and September this year, 3,000 of the 4,000 people who called its hotline asked if they were at risk of contracting HIV after having unprotected sex. "They still don't know that they can get infected through a single sexual experience," Nimit Tian-udom, a representative of the foundation, lamented.

Despite major government efforts, like distributing more than 60 million condoms, the number of new infections has hardly dropped. Nimit blames this on the government's lack of interest in the sub-

ject and inadequate allocation of cash for HIV-prevention. Even simple public messages on safe sex lose their power because only allows them to be broadcast after 10pm.

*Perhaps, the only day this issue comes to people's attention is on December 1 - World Aids Day.*

*"Our country is in a crisis," Nimit warned.*

**In order to be more effective in cutting down the number of new HIV infections, Nimit is calling on the government to start providing rapid HIV blood tests for people in the high-risk group. Currently, it takes at least three days to get blood-test results and many people don't bother returning to hear the results "The earlier people find out about the infection, the earlier they can start being treated," he said**



## From Gamekeeper to Poacher

Thank You

### 2012 MILES FOR PROSTATE CANCER CHARITIES



Alastair Gordon is the Chairman of SDL Foundation, the principal sponsor of Rejoice. Together with the trustees of the Foundation he decides which charities SDL sponsor. For the past two years, thanks to the recommendation of SDL's country manager in Thailand, Winston Wong, Rejoice Charity has been a beneficiary of SDL's support. Alastair describes this position as "Gamekeeper". So when he raised

£56,000 by cycling 2,012 miles in aid of 'Prostate Cancer Charities' he described himself as "Poacher"

Below are a few of Alastair's reflections;

*Huge thanks to everyone who supported me in many different ways on my 2100+ mile odyssey through the sporting world to raise money for Prostate Cancer –*

*SDL plc. for my light weight bike, fellow cyclists, hospitality and contact providers, sponsors – both monetary and auction items – but most of all my other half, Felicity, who had to put up with all the issues as lone support crew.*

*I thoroughly enjoyed the experience, bike and body surviving despite the wettest*

*April on record! Met many interesting and generous people (e.g. the tea lady outside Stoke City's ground who insisted on giving me back the 50p for my cuppa and then giving me her last fiver) and visited some iconic and contrasting grounds (e.g. Accrington Stanley in the morning and joining 75,000 fans at Old Trafford in the afternoon).*

**Well done Alastair!**

More about Alastair can be found at; [Alastair 2012 miles](#).

Also a big THANK YOU to Winston and everyone at [SDL plc](#).



## Friends of Rejoice

Thank You

A big THANK YOU to Wight Wong and all Friends of Rejoice in Singapore.

Your help and support has been consistent throughout the year and from all at Rejoice and from all the families and children who have benefited from your generosity THANK YOU!

Special thanks to Wendy and friends for the lovely craftwork you have sold to help Rejoice.

Carol and Family for sponsoring the education of five children and providing nutritious provisions to the day care centres at See-un Muang temple.

Also to Anna and Family, Janice, Janet and Mr Chia and all who have helped and contributed throughout the year.

Special thanks to everyone who supplied clothing and toys for distribution;

Connie Low from Singapore, Nelly André

Béon, from France, Sylvie Ulas from Chiang Mai (via France), Karine Ruquios also from France and not forgetting [The Buddies Society of Ipoh](#), Malaysia.

## ขอบคุณมาก

Thank you very much

## Corporate Donors

Thank You

[SDL Language Services](#) based in Maidenhead in the UK have been our principal donor for the past two years. With the initial help of SDL, Rejoice has emerged from "Survival Mode" and entered into "Revival Mode". Something which, at the time of the death of Steve Hallam (Rejoice Founder), was thought to be highly unlikely.

The British Embassy under the auspices of [British Community in Thailand Foundation for the Needy](#) (BCTFN) have renewed their donation for a further period of six months.

BP (British Petroleum), under their matching scheme, whereby employees of BP who donate to a registered charity can have their donation matched by BP.

Frank and Wendy Claes who have donated to Rejoice for several years, and are also sponsors of the "Twins" Bank and Bow, will have their donations matched by BP.



Twins Bank and Bow

## *Please Support Rejoice....*

- **By direct bank transfer;**

Donations can be made either direct to the local (Thai baht) account in Chiang Mai, Thailand or, alternatively to the account in London, UK. Account details are shown in the tables below.

### Thailand Account

Account (Thai baht):	Rejoice Charity
Bank name:	Bangkok Bank PLC
Bank Address:	Thapae Road T. Chang Klan A. Muang Chiang Mai 50100 Thailand
Account No.	251-4-767678
Swift Code:	BKKBTHBK

### London Account

Account:	Rejoice Foundation UK
Bank Name:	HSBC Ltd
Branch:	Canary Wharf
Bank Address:	London E14
Account No:	41466879
Sort Code:	40-02-44
Swift Code:	MIDLGB22
IBAN:	GB89MIDL40024441466879

- **By Credit Card via PayPal**

If you want to make a donation via PayPal, [go to Rejoice website and click on the "Donate Today"](#) button in the top right corner.

- **Create a Standing Order**

If you would like to make a regular contribution /donation, of whatever size, please print out and complete this standing order form with your bank details and amount pledged, then return it to Rejoice Foundation UK (not your bank) at the address below;

*Nigel Haunch, Chair, Rejoice Foundation UK, 119 Dundee Wharf, Three Colt Street, London E14 8AY*

- **Gift Aid**

If you are a UK taxpayer, Rejoice can reclaim tax on your donation from the Inland Revenue at no extra cost or inconvenience to you. This currently makes your donation (at basic rate) worth an extra 25p for each £1 given.

If you pay tax at the higher rate, you can claim further tax relief in your Self Assessment return.

**For us to benefit in this way when you donate, you can download and print this [PDF form](#), sign it and send to the address below OR, alternatively, you could email your home address to [contact@rejoicecharity.com](mailto:contact@rejoicecharity.com) and we will post the Gift Aid form to you to sign and return to;**

*Nigel Haunch, Chair, Rejoice Foundation UK, 119 Dundee Wharf, Three Colt Street, London E14 8AY*

- **Send a Cheque**

If the banks are still accepting cheques and you wish to make a one-off or intermittent donation to Rejoice, please make your cheques payable to 'Rejoice Foundation UK' and send them to;

*Nigel Haunch, Chair, Rejoice Foundation UK, 119 Dundee Wharf, Three Colt Street, London E14 8AY*



## *Notes for Donors*

Please let us know about your donation by sending a short email to; [contact@rejoicecharity.com](mailto:contact@rejoicecharity.com). So that we may contact you and thank you directly.

If you would like part of your donation to go towards sponsoring a child's education (5,000 baht) please let us know whether we should select a child on your behalf or you would prefer to select a child yourself, in which case we will send the Excel file 'Children Seeking Sponsorship' to help you decide.

**Thank you all for your generous support.**

Please visit our website; [www.rejoicecharity.com](http://www.rejoicecharity.com) and let your friends and relatives hear about us by forwarding this newsletter or better still printing it and use it as a discussion topic.

Your help and constructive criticism will be gratefully received so please send all your comments to;

[contact@rejoicecharity.com](mailto:contact@rejoicecharity.com)

### Rejoice Foundation UK Trustees

The international fundraising arm of Rejoice based in the UK was started by Nigel Haunch who, after living and working in Asia for some years, returned to London to run his own media consultancy business. Having learned about the work of Rejoice on the internet, Nigel made a visit and was moved by the scale of the HIV/AIDS crisis in northern Thailand. At the same time, he was impressed by the extraordinary achievements of Rejoice in helping those infected and affected by the epidemic, particularly in outlying rural communities.

The Trustees of Rejoice Foundation UK are as follows;

Chairperson Nigel Haunch

Vice Chair Dr Darrall Higson—a Consultant in Pharmaceutical Medicine and formerly a medical director of GlaxoSmithKline

RFUK honorary Secretary Prof Philip Evans, Director of Research for the University of Westminster,

Dr Martin Huddart is a General Practitioner in East London and also a tutor at the UK's Royal Free and University College Medical Schools

Alan Wheeler, a retired petroleum petrophysical engineer who now lives in Chiang Mai



[Alan Wheeler](#)

January 2013



