

# THE PEANUT

*official newsletter of...*

Issue 5, September 2014



## New staff in Ghana



Help us welcome Jeff and Tini Maier to the fabulous existing PPB Ghana team.

1-2

## Sierra Leone passes audit



We are so proud of our hard working Sierra Leone team!

2

## Production in the Philippines



Read about how we help the Payatas Orione Foundation, Inc. produce RUTF.

3-4

## Malawi clinic photos



Check out these beautiful shots by Kim Hedge of our partner Every Child Fed.

4

Follow ProjectPeanutButter on Instagram to see more photos from the factories & field.



Above: PPB Ghana Director of Quality Control Tini Maier learns how to pound fufu, a staple of the Ghanaian diet made of cassava and plantain (left). PPB Ghana Country Director Carly Edwards poses with her husband Isaac Akwabeng (right).

## Ghana team welcomes two new staff from Portland, Oregon

Jeff and Tini Maier leapt into their new roles as Director of Operations and Director of Quality Control, respectively, at Project Peanut Butter's Ghana facility on August 1, 2014.

Jeff comes to us with 25 years of experience: 15 years of facility operations and management, followed by 10 years as a registered nurse. For his first career, Jeff ran the maintenance department for all the cable lines in the city of Portland, Oregon. Jeff then worked in the trauma recovery unit at a busy urban hospital in Portland.

Tini comes to us with 25 years of children's literature expertise and organizational experience. In the States, Tini runs a middle school library half-time and spends the other half at a public alternative school for highly (Ctd. on pg. 2)



Above: Tini and Jeff Maier prepare to travel to Ghana.

Tini shares, "One day after a sudden wind followed by heavy rain, Obed and Isaac returned dripping wet and laughing with lunch for all of us from the market stalls where they'd taken shelter. We four ate together and listened to these men tell their life stories. It was quite extraordinary. We showed them photos of our families and the PPB video, which they'd never seen. They were both quite familiar with 'kwashiorkor,' the bloated belly and reddened hair that are the warning signs of starvation. Obed had kwashiorkor when he was a toddler. So did Isaac's brother. Both were taken to doctors, survived, and grew up strong and healthy, for which we are most thankful."

## Sierra Leone passes audit

A huge congratulations to the Sierra Leone factory staff (pictured opposite), who passed their factory inspection by Doctors Without Borders with flying colors! We are very proud of our team. Unfortunately, we had to make the difficult decision to suspend our clinic operations indefinitely in one of the epicenters of the Ebola virus outbreak, Kenema district, because it was no longer safe for our health workers. Please keep all of our local staff in your thoughts and prayers as Sierra Leone copes with this international public health crisis. Thank you for your support during this challenging time.

(Ctd. from pg 1)

gifted students, where she teaches technology and research skills to students in grade 1-5.

Jeff and Tini have been in Ghana a little over one month now and are adapting to life in Kumasi, where they will spend one year before returning to their jobs and families in Portland. Along with parents, brothers, sisters, nieces and nephews, neighbors and friends, Jeff and Tini count among their blessings three grown children: Alaina, age 24 and twins Ian and Adam, age 22.

"The Project Peanut Butter staff have all been so wonderful," reports Tini, "providing support and shared humor as we navigate our way. We count on our connection with the USA staff, our Country Director Carly, her Ghanaian husband Isaac, and our one chief employee Obed."

Interestingly, Kumasi has been in Jeff and Tini's plans for a long time. Jeff was born in Kumasi, in a small doctor's office by lamplight in a neighborhood called Kwadaso Estates. Jeff's father was starting a church in Kwadaso, one that is still thriving and now boasts an excellent school as well. Jeff's middle name is actually "Kwame," which is given to a boy born on Saturday in the Ashanti tradition. Jeff returned to the States when he was six years old and has always planned to go back to Ghana when he had the skills to help in some way. Now Jeff and Tini are helping get our PPB Ghana factory up and running so that we are able to meet international safety standards and produce the RUTF that will save children's lives. ♦







Above: Nurse and Project Coordinator Kris Tuppal orients a group of mothers to therapy with ready-to-use therapeutic food.

## Project Peanut Butter partners with a group in the Philippines to produce lifesaving food for acutely malnourished children

In late August 2014, PPB USA staff member Margaret Loehnig returned from a trip to Quezon City, Philippines, where Project Peanut Butter partners with the Payatas Orione Foundation, Inc., (PAOFI) to produce enough ready-to-use therapeutic food (RUTF) to treat 1,000 acutely malnourished children annually. PAOFI is a Catholic nonprofit organization that implements several programs in the areas of health, nutrition, and education in impoverished communities.

Though it was Margaret's first trip to the Philippines, an island nation located in Southeast Asia, the collaboration between PPB and PAOFI is not new. The partnership began in 2010, when PPB assisted PAOFI with the production of RUTF for malnourished tuberculosis patients, both young and old. Based on the success of this endeavor, PPB and PAOFI decided to extend the existing RUTF program to treat children suffering from moderate and severe acute malnutrition. In 2012, former PPB employee Mr. Zachary Linneman traveled to the Philippines to assist with this transition.

In 2014, PAOFI requested that PPB send another representative to assess the ongoing RUTF program and provide suggestions for improvement relating to both the production and distribution of

the therapeutic food. Accordingly, Margaret spent her time observing the current practices of the PAOFI team, improving protocol where needed, and helping the team purchase needed supplies.

Margaret shares some experiences from the field: "Day to day operations in the Philippines look a lot different than they do in one of our PPB factories in Africa. In the Philippines, the whole production operation takes place in one room, and they use an industrial sized, bakery-style mixer to produce the food—small scale production at its finest. There are only two women who produce the food three times a week and one 23-year-old nurse coordinator, Kris Tuppal, who supervises the production and measures all the kids to check for malnutrition with the help of local volunteers."

Margaret was impressed with the dedication and hard work of each local staff member. "When the PAOFI vehicle was being used for a different program, Kris would load all of the clinic supplies, including the scales, height boards, and jars of peanut butter, onto a tricycle [a popular form of public transportation in the Philippines], and then she would tell the driver where to go. This got even more impressive during rainy season!"

The PAOFI team is in the process (*Ctd. pg. 4*) <sup>3</sup>

(Ctd. from pg 3)

of moving their production room to a new location so that it can be closer to the majority of the kids they treat. Speaking of this transition, Kris comments, "Change is the only permanent in the world. But if change is the key to improve the PPB project here in the Philippines, it would be best for the malnourished children here. And for the new production room, I'm so excited to work in a new environment with a new production staff."

The RUTF feeding program in the Philippines is on track to continue into 2015 and beyond, which is good news for children in this nation whose lives are disrupted by acute malnutrition. ♦



Above: A production worker in the Philippines pours RUTF into a jar, which will later be distributed at a mobile clinic.

## Snapshots from Project Peanut Butter's mobile clinics in rural Malawi

All photos were taken by Kim Hedge, Vice President of Every Child Fed (ECF). PPB and ECF have joined together to address child malnutrition in Zambia by establishing local production and distribution of RUTF. Please support this wonderful partner by visiting [everychildfed.org](http://everychildfed.org).



Left: Portrait of a mother and her son eating RUTF.

Below: A child samples RUTF for the first time. The average child takes 4-8 weeks of RUTF therapy to fully recover.



Left: Mother waits for her daughter to be assessed for acute malnutrition. Three measurements are taken: height, weight, and mid-upper arm circumference.



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