Altogether you sent us 142 photographs from 18 countries. Your entries, along with the descriptions of diarrhoeal disease control work in different settings, provide a unique record of the fight against diarrhoeal diseases at 'grass-roots' level. As we had expected, it was extremely difficult to select a winner and runners-up as the standard of entries was very high. These four pages contain the photographs and project descriptions from the runners-up. The winning entry from Dr A.A. Iliya from Zimbabwe is featured on the front of this issue of Dialogue on Diarrhoea.

In alphabetical order, the runners-up are: Arif Ahamed, Bangladesh; Denice Douwel, Burkina Faso; Ole Hetta, Tanzania; K. Indirabai, India; M. U. Khan, Bangladesh; Marie-Christine Lux, Peru; Rodrigo Manuel, the Philippines; Folasade Oyeladun, Nigeria; Nalini Shakya, Nepal and Sonam Togbey, Bhutan. Since we were so impressed by all the entries, as well as using them to illustrate future issues of DD, we have decided to put together a special publication containing all the photographs and project descriptions. When this is available we will publicize it in Dialogue on Diarrhoea. Thank you to everyone who sent photographs to us — we learnt a great deal about your problems and successes and hope that other readers will enjoy sharing this information as well.

**Nigeria: nutrition training for mothers**

This photograph shows part of a training programme on nutrition for breastfeeding mothers with particular emphasis on the types of food to use during weaning. Role-playing helps to make the training more realistic and easier to understand. Six specific roles are played: carbohydrate, protein, vitamins, fats and oil, water and minerals.

The woman playing the role of 'protein' introduces herself as the body-builder, and explains that she replaces body tissues as a child grows and wards off infection. She then shows the mothers examples of local foods that can supply protein such as bran, meat, eggs, cowpeas, akara and moin-moin.

The woman playing the role of 'carbohydrate', explains that she supplies energy to the body and helps to keep it warm. Locally available foods containing carbohydrates include: eba, amala, iyan, yam, cocoyam, rice and bread.

The main problem for local people is lack of money, so they are encouraged to start small-scale gardening, and fowl-rearing so that they can have vegetables, fruit, chicken and eggs.

MRS FOLASADE OYELADUN, State Health Education Unit, P.M.B. 4365, Osogbo, Oyo, Nigeria.

**Bangladesh: ORT for adults too . . .**

Oral rehydration therapy is the cheap, safe and effective method of preventing and treating dehydration caused by diarrhoea. Children in particular need prompt treatment because they dehydrate faster than adults — but ORT is equally effective in adults and should always be encouraged. This woman with diarrhoea is drinking oral rehydration solution.

MD ARIF AHAMED, c/o Studio Famous, Station Road, Sirajganj, Bangladesh.

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Nepal: breast to family diet

Breast is best for infants, but not enough for those over six months of age. After six months children need other food as well as breast milk. This photograph shows a malnourished child who was receiving only breast milk at 15 months of age. Only two weeks before the mother had started to give weaning food, consisting of soyabeans and wheat and corn, taught by a village health worker. Unfortunately she did not have enough soyabeans and pulses to feed the child over a long period so she started giving only corn porridge. It was a problem to encourage her to make the more nutritious mixture, especially when she explained that although after two weeks feeding the child was much better, she had no pulses at home. A non-formal education facilitator from the CDAP suggested that she could obtain soyabeans from him. The combined efforts of the village health worker, reinforcing the feeding messages, and the CDAP have ensured that the child's life is not endangered.

Nalini Shakya, Community Development Assistance Project (CDAP), UMN Post Box 126, Kathmandu, Nepal.

Philippines: better family health

Clean water and good sanitation are essential components of any programme aiming to prevent and control diarrhoeal disease. In this photograph latrines are shown sited by the side of a river that is used by the local population for bathing, washing clothes, fishing and water collection. Without health education, these people are unaware that they can pick up diarrhoea pathogens while bathing in and through drinking the water that contains faeces from the latrines.

Mr Rodrigo Manuel, Regional Health Office No. 12, ORC Compound, Cotabato City, Philippines.

Bangladesh: health education essential

Clean water and good sanitation are essential components of any programme aiming to prevent and control diarrhoeal disease. In this photograph latrines are shown sited by the side of a river that is used by the local population for bathing, washing clothes, fishing and water collection. Without health education, these people are unaware that they can pick up diarrhoea pathogens while bathing in and through drinking the water that contains faeces from the latrines.

Dr M. U. Khan, International Centre for Diarrhoeal Disease Research, Daca 12, Bangladesh.

The competition judges were the DD editorial team and Ms Stephanie Simmonds, Coordinator of the Refugee Health Unit at the London School of Hygiene and Tropical Medicine, currently Senior Health Co-ordinator at the UN Office for Emergency Operations in Addis Ababa, Ethiopia.
Tanzania: community participation

The Community Participation Health Education Project (CPHEP) is run jointly by the Tanzanian government and NORAD and motivates villagers to participate in the development of and to pay for village water schemes and sanitation programmes. The project arranges village workshops and produces health education material suitable for use at village level. This photograph shows women colouring flash cards, illustrating the causes of diarrhoeal diseases, during a village health education workshop.

Ole M. Hetta, CPHEP, P.O. Box 192, Sumbawanga, Tanzania.

India: clean water supplies reducing diarrhoea

In the picture above, a young mother is drawing water from a well in a rural area of Tirupati, Andhra Pradesh and tipping it into her bucket. Another mother is waiting to collect water. The availability of clean water supplies, and proper collection, storage and usage of water can do much to reduce high rates of diarrhoea.

Professor K. Indirabai, Royal Commonwealth Society for the Blind, NAB Rustom Alpawiwala Complex, 124-127 Cotton Depot, Cotton Green, Bombay 400033, India.

Burkina Faso: using visual aids

The Saboba Family Project includes many aspects of maternal and child health care, including health education, growth monitoring, nutrition, gardening and tree planting and animal raising. In this photograph villagers participate in a health education session on malaria prevention, using visual aids prepared in Ghana.

Denice Kelin Douwel, s/c Les Peres Blancs, B.P. 5563, Ouagadougou, Burkina Faso.
Photographic competition: Peru and Bhutan

Peru: integrated community development

'PROESA' is an innovative community development programme in the Peruvian Andes. It focuses particularly on the improvement of local food supplies and the regular employment of villagers near their homes in work such as weaving and carpentry. In Hualqui village there is no safe drinking water. The photograph on the left shows children collecting water from a polluted source. PROESA is encouraging the community to introduce various measures to improve the quality of available water. Health promoters in Hualqui (see photograph above) are trained in hygiene, first aid and disease prevention. Emphasis is placed on improved nutrition using available resources.

Marie-Christine Lux, Apartado 8, Cajamarca, Peru

Bhutan: positive practices

Yebilapcha hospital in Shemgang, Bhutan, has 20 beds. The hospital runs a monthly mother and child care clinic where the importance of oral rehydration therapy during diarrhoea is stressed. Sometimes, children are admitted to the hospital with chronic diarrhoea. Sonam Tobgye works as a laboratory assistant and is responsible for examining stool specimens. These two photographs from Bhutan show a mother feeding her baby in front of the family altar, and another mother giving oral rehydration therapy at home. The mothers are shown how to make up the solution using boiled water. Luckily, Bhutanese women do not starve their children when they have diarrhoea.

Sonam Tobgye, Yebilapcha Hospital, Tingtingbhi P.O., Shemgang, Bhutan

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