

Indonesia –The 10th Year of PHJ Projects in Banten Province & Bali Province

PHJ has been carrying out the Strengthening Healthcare System Program in Tirtayasa Sub-district, Serang District, Banten Province and Medical Follow-up Program in Gianyar District, Bali Province for 10 years. PHJ Indonesia Director reports on the first program and St. Marianna University Hospital Technologist who conducted the ninth training reports on the second program.

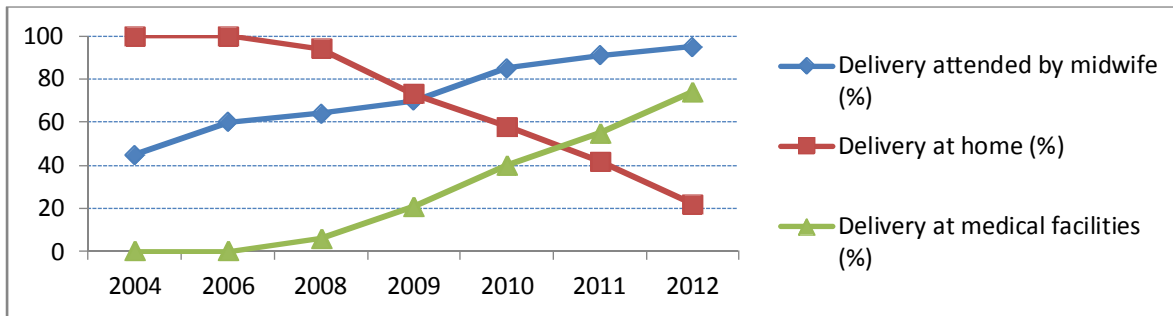
Strengthening Healthcare System in Tirtayasa Sub-District, Serang District, Banten Province

This program aims at reduction of child mortality (Goal 4) and improvement of maternal health (Goal 5) of the United Nations Millennium Development Goals at the program site. The site consists of 14 villages with the population of 50,000 persons. To achieve these goals, reducing risks in pregnancy and child delivery is very important. During the initial period, most child births were handled by traditional birth attendants (TBA) who have no special training on child birth but learned the skills from their mothers. Since they did not have any knowledge of medical equipment, they sometimes cut the umbilical cord with a bamboo knife.

We started to train the TBAs with picture books as many of them could not read and write, provided necessary medical equipment, and let them attend child births together with midwives. Then, we encouraged them to recommend the child births attended by a midwife at clinics to ensure safe delivery. Gradually, the villagers began to pay attention on safe childbirths. Accordingly, from 2006 we started to encourage child birth at medical facilities rather than the delivery at home.

We also supported the construction of a much needed health clinic (poskesdes) to enhance health and medical services at a local level. Until now seven health clinics have been constructed. In promoting the use of the clinic by expected mothers, we tried to raise their awareness through continued education and explanation. In other words, we expected the change in their behavior and the results are shown on the following graph.

Today, there are still child births attended by TBA and cases of infant and maternal mortality. It takes time to change people's behavior. Nevertheless, to improve the health and medical conditions and keep sustainable environments at the program site, our program is truly needed. It is our wish that the villagers recognize the true benefits of the PHJ program 10 to 20 years later. From now on, we will shift our emphasis on transferring the program to the local community.



Health education to expected mothers



Periodical examination at a health clinic

By Mika Ito, Director of PHJ-Indonesia

Computed Tomography (CT) Diagnosis Technical Training at Gianyar Hospital

St. Marianna University School of Medicine has been extending technical assistance on CT diagnosis to Gianyar Hospital by dispatching radiological technologists. The hospital recently replaced an old CT equipment and required training of local technologists taking over those who had received previous trainings but assigned to other hospitals. Our University accepted the request from the hospital to send lecturers to give the training on the CT diagnosis knowledge and technology, and dispatched Tatsuo Yoshikawa and myself (Yasuyoshi Ogawa).

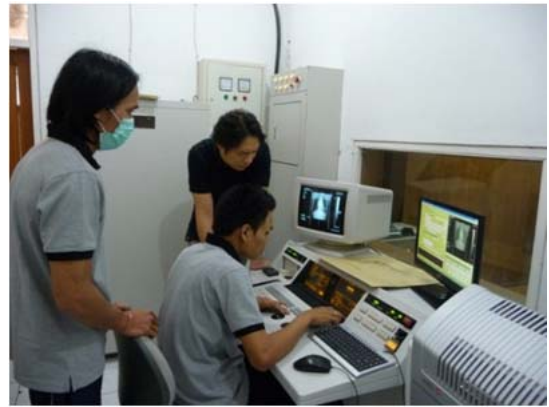


When we arrived at the hospital, we were surprised to see many patients waiting on corridors but the CT examination room was located on a quiet corner. On the first day, we analyzed what kinds of diagnosis are practically carried out and composed an effective training program covering five days. As the electric power at the hospital failed frequently, the image did not show up for diagnosis many times. Also it was challenging to conduct the diagnosis training in English and unfamiliar Indonesian language. Nevertheless, we worked together with the local

staffs to establish a theoretically acceptable and optimum diagnosis protocol and an appropriate diagnosis method meeting the specifications of the new CT and the hospital requirements. Having accomplished the initial objectives, we are confident that this training will be useful even when the equipment and the examination conditions vary. We owe thanks to Dr. Chandra and PHJ Indonesia Director Ito-san for arranging this training for us to achieve

these results.

We extend our thanks to PHJ and its staffs for giving us this valuable opportunity of technical training at Gianyar Hospital. We are also grateful for the Hospital staffs and Prof. Dr. Nakajima and staffs of St. Marianna University Radiology Department who gave us this opportunity despite their extremely tight schedule. We wish peace and happiness of the Indonesian people and progress of medical science there.



By Yasuyoshi Ogawa, Radiological Technologist, St. Marianna University School of Medicine

Thailand – International Interns and Volunteers Supporting PHJ Projects



PHJ is carrying out four projects in northern Thailand based on Chiang Mai. They are Pediatric Cardiovascular Surgery, Cervical Cancer/Breast Cancer Prevention Education, Support of Physically Challenged Children, and HIV/AIDS Prevention Education projects. PHJ-Thailand (PHJT) staffs have professional qualifications and experiences but they alone cannot carry out all of these projects effectively. The cooperation of medical doctors, nurses, staffs of health centers as well as health volunteers is indispensable.

Furthermore, PHJT has been fortunate to have students and professionals from USA, Canada, and Australia in health and medical fields as volunteers and interns. (These international students get to know PHJT through ProWorld that introduces intern and volunteer opportunities throughout the world, as well as from reports of previous volunteers and interns.)

The Australian volunteer, Kate Fisher, is a registered nurse with Master of Public Health and served at the PHJT office for one year until the middle of April. She mainly worked on the Youth HIV/AIDS Prevention (YHAP) Project. Kate made a significant contribution to the preparation of the Project Evaluation Report by writing research tools, developing a questionnaire for survey, conceptualizing the evaluation project, working with colleagues translating data and pulling the raw data into a report form, and writing a summary report. She also worked on the YHAP project proposal by writing log-frames for the new project with other staffs, preparing a concept paper, and collecting data and statistics on HIV/AIDS in Chiang Mai, Thailand.

Kate is a team player and would make a great asset to any organization. She will be missed.

“I have really enjoyed working in a public health organization with a committed staff that wants to improve the health of people in Thailand. I have learned a lot about HIV prevention in Thailand. Thank you for this opportunity and I wish you well with all of your health promotion projects”. Kate Fisher (third from left on the photo)

In addition to Kate, nine persons (seven female volunteers from USA, Canada and Mexico and two male volunteers from USA) have contributed to the PHJT projects in the past three years. Among them, there were three Masters of Public Health, two students in School of Nursing, one bachelor in Psychology, two Pre-Med students and another doctorate candidate in Physiology.

It is our wish that the time and efforts these volunteers extended to PHJT would be of valuable and memorable assets for their careers and future lives.

By Jeeranun Monkongdee, Regional Director of Thailand and Vietnam

Cambodia – Training of Community Care Worker for Mother and Newborn

Maternal and child health care issues are often analyzed with the Three-Delays Model. The model consists of delays in (1) deciding to seek appropriate medical help for an obstetric emergency (lack of understanding on importance of health examination, low status of women in decision-making); (2) reaching an appropriate obstetric facility (distance to the facility and lack of transportation means); and (3) receiving adequate care (shortage of medical equipment, pharmaceuticals, lack of staffs and skills).



The model explains that merely enhancing health facilities and health/medical staffs is not sufficient for improving maternal and child health care but it is truly needed to tackle the first and second delays indirectly affecting health behaviors and decision. These issues are even more difficult to handle as they are closely linked to culture and individual values, infrastructural conditions and so on. Under the circumstances, the role of village women as community care workers for mothers and newborns (CCMN) has been very important. They are expected to encourage and advise

mothers to seek help and receive services at health centers. PHJ completed the training of 84 new CCMNs in December 2012. The training consisted of 7 day curriculum on basic health care knowledge and skill needed to support pregnant and postpartum women and was provided by the specialists of the provincial health department.

All CCMNs were assigned to their respective villages to start their CCMN activities after completion of this training – the time has come to start self-training of their own on-site practical learning. For instance, as shown on the photo above, each CCMN is mutually learning with village women how to expect learning and how to start performing her responsibilities of visiting and giving advices to mothers before and after child birth, to build trusted and cooperative relationship with the mothers and improve their knowledge and skill for the ultimate purpose of enhancing maternal and child health knowledge in a village.

Although PHJ staffs always encourage the CCMNs and village women to learn from each other, it is even more important that they themselves are willing to do so. PHJ carries out quarterly follow-up monitoring of CCMN's home visits to promote learning and cooperation among



CCMNs and village women. Such follow-up of 84 CCMNs requires us much time and patience but that is where PHJ can contribute most.

Not by socially powerful “Men”, “Expert medical workers”, neither “NGO workers”, but quite ordinary village women who are not socially and economically powerful support the same ordinary village women. In respect with “generating mutual support system by women themselves, CCMN activity is deeply significant. Thus the CCMN activities are not only the key to solve the three-delays and issues relating the first and second delays but also the key to raise social change to empower women. The training of the CCMNs continues in our project site.

By Asako Hayashi, Director of PHJ Cambodia Office

East Japan Disaster Reconstruction Support – Tagajo Kidney & Urology Clinic

Tagajo Kidney & Urology Clinic in Miyagi Prefecture was damaged severely by the Tsunami in March 2011. Expensive medical equipment and dialysis equipment installed on the first floor were completely damaged. The head of the clinic and all staffs worked hard to resume the medical service by opening a new clinic on the same place on October 1, 2012. Sixty units of latest dialysis equipment and other facilities were installed in the new clinic. The clinic is operated as the central medical clinic of Tagajo, Miyagino Zone of Sendai City, Shiogama, Shichigahama, and Rifu receiving 200 patients daily.

In January this year, a generous philanthropist offered to donate through PHJ a body composition analyzer, extracorporeal shock wave lithotripsy, and endoscope sterilizer to the clinic. Thanks to this donation of the expensive equipment that the clinic wished to have, it is able to extend efficient medical care services and doctors, nurses and patients express their gratitude to the donor. The expenses for maintenance and renewal of these equipment will be born by PHJ with a designated donation trust of Sumitomo Mitsui Trust Bank the same donor entrusted. PHJ is confident that the clinic will continue to extend quality medical services.



The new clinic



60 units of dialysis equipment



The damaged equipment

Medical doctors, nurses, and patients expressed their gratitude as follows:

- We used to judge the dry weight of the dialysis patient by taking blood sample and waited for a few days for the result. The body composition analyzer shows the result immediately and saves our time to give appropriate instructions to the patient.
- Having an extracorporeal shock wave lithotripsy, we are resuming the operations.
- It took a long time to manually wash the endoscope. Thanks to the donation of the endoscope sterilizer, the expensive sensor is cleaned and sterilized quickly and safely. Patients are pleased to have the check without fearing infections and without waiting for reservations.

By Masaru Yokoo, PHJ Tokyo Office

Member's Voice – Itosugi School and PHJ's Charity Calendar Project

Since PHJ's Asian Fairy Tale Calendar Project launched, the students of Itosugi School have been participating in the calendar picture drawing. The teachers introduce the history of the School and their thoughts on participating in the PHJ's Calendar Project.

About Itosugi School

Itosugi School extends education to the children who are hospitalized at the Musashino Red Cross Hospital. The school is located on the second floor of a general hospital surrounded by many trees and 10 minutes walk from Musashi Sakai Station. In 1973 the director of the hospital and the president of the Kyonan Primary School talked about the education of the children while they were staying at the hospital. Since then many children hospitalized for injuries and illnesses have been studying at the Itosugi School, which presently consists of the Kyonan Primary School and Musashino No. Six Secondary School. The purpose of this hospital school is to provide adequate education for the children to prepare them for their school life after they leave the hospital. For this purpose, Musashino City Board of Education provides varied textbooks used in the primary and secondary schools in Japan, facilities to conduct chemical and biological experiments, cooking, art, and PC trainings. Participating in PHJ's charity calendar is one of such curriculum.

The Itosugi School celebrates the 40th anniversary next year. Although medical science has advanced steadily, the school wishes to keep providing happiness and joy to the children suffering from illnesses as the oasis in the hospital.

By Kimiko Motegi, Musashino No. Six Secondary School



Participating in PHJ's Asian Fairy Tale Calendar Project

When children join our school, we first extend a listening program, as many of them are unable to stand up or stay on a chair for sometime after hospitalization. Once they become stronger, they wish to express their ideas and feelings in drawing pictures. We are grateful that the PHJ's project gives the children the opportunities for interactive

communication. Both the children and teachers enjoy talking and drawing. We are very happy that the pictures of the Itosugi School students were selected for the PHJ's calendar consecutively for three years.

Although not all the participating children were lucky to be the artists for the calendar, many of them enjoyed participating in the calendar project, took drawing seriously and felt confident of themselves. I remember one child, who was rather isolated from the rest of the class, became confident and went back to her original school happily, after her picture was included in the PHJ calendar. Even the children whose pictures were not selected enjoyed the drawing session.

By Mieko Okayasu, Musashino City Kyonan Primary School

Note: The photo shows the Itosugi School Annual Report cover pages with the drawings the children prepared in the school for the PHJ calendars 2011, 2012, and 2013.

Condolences for Dr. Takashi Sugiyama, PHJ's First Chairperson



Dr. Takashi Sugiyama passed away on April 26. He served as the Chairperson of the Project HOPE Japan (the organization name was changed PH-Japan in 2006) for four fiscal periods, extending his management expertise and network in industrial, business, and academic circles during the initial years of the organization. All PHJ staffs express sincere condolences for his passing away.

By Shingo Oda, PHJ Chairperson

In Memory of Dr. Takashi Sugiyama

Dr. Sugiyama passed away on April 26 and he was 88 years old. I express my sincere condolences for this great loss.

When PHJ started its operations in 1997, many NPOs were also founded and the Japanese society was about to accept the emerging NPOs. Then it was vital to win the trust of society and so the Board of Directors consisted of the representatives of industry, government and academia. The following principles were adopted as the guidelines of the PHJ operations.

1. NPO is evaluated with the amount of the fund it raises. So PHJ should make its best efforts on fund-raising.
2. When deciding a program, the top priority is placed on the needs of the recipient.
3. Our fund comes from donations and so our expenses should be minimum.

Having served as a top management of various corporations, Mr. Sugiyama contributed to PHJ with his management experiences as well as his connections in varied industries and organizations. He was always at the front line of donation campaigns. In reviewing programs, he emphasized that the local needs come first. He also insisted on controlling the expenses at minimum and his idea stays as the PHJ's features even now. He formulated PHJ's program sites as South East Asia and to include Japan if major disaster occurs. Under the second direction, PHJ is implementing the East Japan Reconstruction program.

The photo shows Dr. Walsh, then Project HOPE Director, on the left and Mr. Sugiyama, on the right when the former visited Japan.

Mr. Sugiyama was very active and played golf without using a cart. In the fall of 2012, we celebrated his 88th birthday and everyone present expected to meet again at his 100th birthday. So we could not believe the report of his passing away so sudden. He will be missed by everyone. We extend our heartfelt condolences to his beloved family.

By Akira Sumi, Former PHJ President

Thank you for your support

One Copy of Asian Fairly Tale Calendar 2014 to Each PHJ Supporting Member

PHJ's calendar has been appreciated by the users who enjoy interesting tales of each country and children's drawings. PHJ is pleased to announce that one copy of the 2014 calendar will be sent to each supporting member to express our appreciation for continuous support. We

will be sending the calendar from October to November.

The donation for the 2014 calendar will be accepted on the PHJ website from August onward.



Drawing from Cambodian tale “A hermit reviving a tiger”

Drawing from Indonesian tale “Story of Lake Toba

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