

Cambodia – Health Referral System –The Current Usage and Achievements from 2012 to April 2014



In 2012 with the generous donation from Otsuka Pharmaceutical Co., Ltd., PHJ Cambodia Office launched the health referral system to smoothly transport an emergency patient to health facilities.

Under the system, villagers share a Tuk Tuk, a popular motor tricycle (see the photo on the left), as emergency transport means to carry patients from village to health center or referral hospital.

In many cases pregnant mothers and emergency patients face the trouble of delay in receiving health services on time because of difficulty in finding transportation and in driving on muddy road conditions. I did realize the difficulty when I was on the four wheel car heading a rural village in Kampong Thom for the first time. Even the four wheel car fiercely bumped along the unpaved muddy road with big holes.

Under these circumstances, staffs of three health centers and residents of 12 villages truly welcomed the generous donation of seven (7) Tuk Tuks from Otsuka Pharmaceutical. Once the Tuk Tuks were donated, key challenge in establishing health referral system in community was how PHJ would bring out villager's initiative for spontaneous management of the system. The health referral system committee of each village has been formed by villagers themselves and the pooled fund for maintaining the system has been covered by membership fee of 10 to 20 yen per villager per month. Although the system got started enthusiastically, various management issues gradually emerged, namely inefficient bookkeeping, disagreement among committee members, and delay in membership fee collection.

During the first year, PHJ fully supported the committees to lead the referral system to go on the right track. From the second year PHJ refrained from providing direct support help and let the health referral committee tackle issues independently even though they seemed easily solvable by PHJ's intervention. PHJ staffs kept working hard even suffering in dilemma between their pressures of building successful health system and patiently being stuck for months until the committee members solved the issues themselves.

Now that two years have passed since the first launch of the health referral system, the committee members have been equipped with ability of organizing monthly meetings and properly report their meeting minutes and bookkeeping to PHJ on time. The cumulative record shows constant usage of referral cases with two (2) to four (4) emergency referral cases recorded per village per

month. More than half of the referral cases are related to child births involving many of abnormal delivery cases referred to higher-level health facilities. We are glad that our efforts are contributing for increasing safe child births.

From the launch of the system in 2012 to April 2014, the referral cases have reached 207 cases with 316 persons transported in total. We are grateful that these figures mean that 316 lives have been saved. It is our sincere wish that the villagers sustain this valuable health referral system to be used for saving individual precious life.

By Asako Hayashi, Director of PHJ Cambodia Office

Indonesia – Starting a Healthy Sanitary Environment Promotion Project

PHJ has been implementing community health care service strengthening project in Tirtayasa



Autonomous Sub-District, Serang District, Banten Province over 10 years. In the project site, from early in the morning many people are gathered along the water for irrigation or farming. Some are bathing, washing hair, brushing teeth, using the water as toilet, washing cloth, washing dishes and rice as shown on the left photo.

The life style of the people in the sub-district has changed and many villagers now have mobile phones and motorcycles. Nevertheless, such sanitary and health conditions as use of water and trash disposal have not improved at all.



Intending to improve such health and sanitary conditions of the project site, PHJ selected one village and made a survey to find the actual sanitary situation by visiting each household. To our surprise the survey result was different from what we observe everyday. We thought that more than 80% of the villagers do not have toilets at home and use the irrigation water or outside their houses for this purpose. On the contrary, more than 70% of the villagers responded that they have toilets inside their houses.



It is the Indonesian people's custom to wash their bodies after going toilet. Using the irrigation water as toilet solves this washing process easily.

Although the irrigation water is an important lifeline for the villagers, many people throw away garbage and household trash to the water and other public space. We found 48 dumping grounds in the village. The photo on the above right is one of such dumping grounds.

PHJ is starting the project to improve the healthy and sanitary environment through awareness raising and behavior change education. As a practical step of this project, we will provide toilets and washing stands at public primary schools that presently lack such facilities, install dumping

grounds including boxes and incinerator, and organize healthy sanitary environment education toward primary school children and villagers.

Photos: Upper left: people use the irrigation water for many purposes

Right middle: one of 48 dumping grounds

Lower left: The toilet and washing water at a primary school

By Mika Ito, Former Director of PHJ-Indonesia Office

Thailand – Mobile Heart Screening in Rural Area

Every year in Thailand, nearly 8,000 babies are born with congenital heart disease and from this number, about 3,000-4,000 require life-saving corrective surgery. Unfortunately, only half of the children are able to receive the needed life-saving surgery because many are from impoverished families that cannot afford the surgeries necessary for their children to survive. PHJ recognized this challenging situation in Thailand and set out to make a change on Pediatric Cardiac Project to save the life of the children with a congenital heart defect in Northern Thailand. PHJ cooperates with Chiang Mai University Hospital and Lampang Hospital, both of which have specialist medical team staff.

Since its initiation in 1998 through April of 2014, the Pediatric Cardiac Project has successfully treated 345 such congenital heart disease patients. Moreover, this project also supports many activities aimed at assisting pediatric cardiac patients in numerous ways, such as: financial support for heart operation cost, mobile heart screening, support training for nurses, providing home visits, conducting the World Heart Day event in coordination with local hospitals and producing & distributing teaching materials etc.

In recent years, PHJ recognized the issue of low level of medical services in rural areas such as inaccurate diagnosis of heart diseases and delay in appropriate treatment. To cope with such situation, specialist medical teams of Chiang Mai University Hospital and Lampang Hospital are carrying out mobile heart screening bringing medical equipment with them in rural areas.

The mobile heart screening supports local health providers to organize regular screening campaigns 1-2 times a year and those children found to have heart disease are referred to the partner hospitals for treatment and surgery. This mobile heart screening provides medical doctors and nurses of rural hospitals an opportunity to have practical training from the specialist teams.



Ma Kai, eight months old, (photo on the left) was earlier examined by a rural hospital for extremely light weight and tiredness and diagnosed with an irregular pulse. During the mobile heart screening by Chiang Mai University Hospital team in November 2013 (as shown on the above photo), she was diagnosed with heart disease (patent ductus arteriosus) and received a surgery at the Lampang Hospital in December 2013. Thanks to the successful heart surgery, she is now well and happy.

This project is supported by Edwards Lifesciences Fund, Central Glass Co., Ltd. and Daiichi-

Sankyo (Thailand) Ltd.

By Jeeranun Mongkondee, PHJ Regional Director for Thailand and Vietnam

Vietnam – Breast Cancer Awareness and Prevention Project

Breast cancer (BC) is the most common cancer and a major cause of death among women worldwide. The BC incidence in Vietnam has increased steadily over the last decade but sufficient awareness and prevention education, examination and treatment have not been provided. PHJ implemented the BC awareness and prevention education in Hanoi in 2011 and 2012 in cooperation with CASCD, a local NGO under the Vietnam Red Cross. In 2013, PHJ implemented the three year project* together with the Vietnam Women's Union (VWU), a national organization comprised of 14 million members that work to improve the health and well-being of women and children.



The project aims to increase women's awareness of breast cancer and promote early detection of breast cancer by undertaking breast self-examination (BSE) and to refer all abnormal cases for further examination and treatment. Moreover VWU staff at all levels would have capacity to conduct BC&BSE session to target women in their communities. The main activities were training of trainers for key women's union staff and local health staff, development of appropriate training materials on breast cancer and monthly BC session etc.

The trainees will conduct BC&BSE training sessions toward the women in respective areas.

In 2013 ten (10) districts in Hanoi and Haiphong municipalities, Ha Nam, Hung Yen, and Thai Nguyen Provinces were selected as targets and conducted 100 education sessions. In total, 3,794 women received BC& BSE training and the BSE rate increased from 26% to 100%. As a result, 86 women had found breast lumps and were referred for further examination and ten (10) women diagnosed BC were treated.



Due to high capacity of VWU Hanoi City to run the BC project by themselves, in the second year, 2014, the city is not included in the target area but the project has expanded to Nam Dinh Province. The second year target is 5000 women in 10 new districts of five provinces including the new target of Nam Dinh Province .

This project is supported by Yokogawa & Co., Ltd.

By Jeeranun Mongkondee, Regional Director for Thailand and Vietnam

Photos: Above left: Ms. Mongkondee was a main trainer for the trainers training
Right: BSE training using breast samples

Member's Voice – My encounter with PHJ

Chihiro Niinuma (Participant of 2014 Cambodia Study Tour)



Serving as a nurse, I have been interested in public health and medical services in developing countries and have visited these countries several times. When I was thinking of visiting Cambodia next to find out the health conditions there, I came to know PHJ's Asian Fairy Tale Calendars. They were donated to cheer up the people of Kesen-numa who suffered from the March 11 Earthquake and Tsunami. I learned about PHJ's projects including very heart warming and valuable donations to Kesen-numa. Then I found that PHJ was organizing a Cambodia study tour late February to March and asked the head of my workplace for a leave to join the study tour. My boss

was fully aware of the PHJ's reconstruction support to Kesen-numa and immediately approved my joining the PHJ study tour.

During the tour, the participants learned the maternal and child health and public health situations in rural Cambodia and found that villagers do not have toilets at home nor clean water. PHJ is extending support of constructing toilets and health and sanitary education such as explaining the importance of washing hands. Finding that villagers were recently suffering from bronchitis due to dust, the participants proposed to introduce gargling with clean water to the villagers.

Looking at such situations and making the proposal, I reminded myself of the situations right after the March 11 disaster three years ago. Lifelines were stopped; no clean water was available; flash toilets were piled up with excrements and difficult to use. The land washed out by Tsunami was vacant and the wind raised dust affecting many people to suffer from pneumonia and bronchitis. Then the donation of water was most welcome. Medical facilities placed importance on gargling and hand washing to prevent spread of infectious diseases. I realized what is needed in the rural Cambodia was the same as in the Tohoku area in Japan right after the disaster.

During the study tour, I spoke about the popularity of the PHJ calendar among the people of Kesen-numa to a PHJ staff who kindly sent PHJ's Asian Fairy Tale Calendars to the second year students of the School of Nursing in Kesen-numa, my alma mater. The School learned of my encounter and communications with PHJ and asked me to give a special lecture on my experiences of PHJ's study tour and serving as a health volunteer in various countries this summer. I am amazed at this development of PHJ's donation expanding to my study tour, connecting me with the villagers in Cambodia, tour members, PHJ, and my alma mater. I will cherish this relationship and hope to expand it further.

Photo: Author is the third from right



Photo: A doctor car donated by PHJ is parked in front of the School of Nursing where I am studying now and is used many times daily.

Thank you for helping the Typhoon Haiyan Victims in the Philippines

In November 2013, the typhoon Haiyan hit the central Philippines causing serious damages. PHJ contacted Mercy Relief (MR), a Singaporean NGO for humanitarian aid, to extend support to the victims through MR and started the donation campaign on November 19. Many individuals and organizations responded to our call. We are grateful for their generous donation. When the campaign closed on April 30, 2014, we collected following amount and transferred funds to MR as shown below.

Total donation :	¥1,873,500
Support to MR :	¥1,734,000
GS Yuasa solar battery chargers (¥134,000)	
Monetary support :	(¥1,600,000)
Transportation, etc.	¥139,500

Thank you message from Masahiro Ishizeki, Senior Manager, International Program, Mercy Relief

PHJ supporting members and donors, I would like to extend my sincere appreciation on behalf of MR for your generous donation to the victims of Philippines Typhoon Haiyan.

In addition to the solar battery chargers sent to the NGOs, MR received 1.6 million yen from PHJ and the donation money was used as a part of the MR's humanitarian disaster relief operations worth S\$492,000 (approximately 40 million Japanese yen.) From November to December 2013, MR deployed seven relief teams to the disaster sites and distributed relief goods to about 80,000 victims. MR selected the target areas in consultation with the local partners so that the people truly in need could receive the relief goods like foods, soap and other sanitary goods,

water treatment systems not requiring electricity, tarpaulin , tools and materials to build temporary housings, and medical service from MR's medical mission teams.

Assisting victims in recovery and fight back to normalcy, now MR is promoting community based disaster risk reduction with our counterparts in the central Philippines.

Needless to say, Mercy relief's relief operation and disaster risk reduction projects would not have been possible without the support and assistance of supporters like PHJ. We really appreciate your supports. Thank you very much.



Photo on the left: Distributing emergency kits including foods at Panay Island in November 2013



Photo on the right: Teaching how to use water purifier at Palawan Island in November 2013

The 49th Steering Committee Meeting

PHJ's 49th Steering Committee Meeting (SCM) was held at 5:00-7:00 pm, May 21 (Wednesday) at All Japan Hospital Association Conference Room, in Suidobashi, Tokyo. The agenda included the explanation on a new project of promotion of healthy sanitary environment in Indonesia, handover of the existing project and starting new project in Cambodia, Cambodia study tour report movie, Myanmar project start up progress report, East Japan Disaster Reconstruction Support, and report on the donation to the Philippines Typhoon Victims.

Participating SCM members raised many questions on the background of each project to which PHJ staffs answered. Some of the SCM members gave us professional advices. The meeting was very productive for PHJ.



Obituary

PHJ's Director and President Toshio Kimura passed away on May 30, 2014 at age 64 from illness. He was greatly missed by all PHJ staffs, supporting member companies & individuals, friends and family members. His funeral service was observed by his family.

Shingo Oda, Chairperson of the PHJ Board of Directors; Yoshimi Nakata, Manager, Program Support Group; and Masaru Yokoo, General Manager for East Japan Disaster Reconstruction Support Group send tributes to the late Mr. Kimura in the following.

In Memory of the Late PHJ President, Toshio Kimura

By Shingo Oda, Chairperson, PHJ Board of Directors

All PHJ staffs were engulfed in sorrow on May 30 when I announced that Mr. Kimura who had been hospitalized since early April passed away at five in the morning.



Having found the jaundice symptom in March, he took a medical checkup. We were advised that he would receive an operation in May and come back to the PHJ office in July. All of us were looking forward to his recovery and working again with him on many projects. Under these circumstances, we were really surprised to the sudden news of his passing away. May his soul rest at peace.

Since I assumed the post of the PHJ Chairperson, Kimura-san and I have worked together and I have always admired his commitment to the PHJ's cause with strong sense of responsibility and never give up mind. His compassion and sincere attitude toward others won him trust from all persons and donors who came to know him.

Kimura-san took leadership in (1) review, formulation and sharing of PHJ's vision and mission, (2) emergency and reconstruction support for the East Japan Disaster of 2011, (3) introduction of vending machine donation, (4) exploring the new project site of Myanmar, and (5) promotion of sponsor projects. In all of these he was able to make significant progress by building a good team work. Thinking of his accomplishments, it is a great loss for PHJ that Kimura-san would no longer be with us. All of us at PHJ are determined to carry on what Kimura-san has left us to pursue our vision and mission.

We extend our sincere thanks to the PHJ supporters and donors for all the cooperation you have extended to Mr. Kimura up to now.

Photo: At Global Festa Japan 2012

**In Memory of Kimura-san Who was Looking for the Start-up
of the Myanmar Project**

By Yoshimi Nakata, Manager, Program Support Group

PHJ has been working for the establishment of a project office in Myanmar as the next step of our operations in Southeast Asia. Kimura-san had been a main promoter of this project and visited the country a few times to make a courtesy call to the Minister of Health, investigate the health and medical facilities and to study the local health and medical conditions. Returning from the Myanmar visit, Kimura-san enthusiastically reported what he had observed and learned to everyone concerned. He was truly enjoying the Myanmar visit.

We are about to enter into a Memorandum of Understanding (MOU) with the Ministry of Health to start the practical procedures of the establishment of the PHJ Myanmar Office. When I sent an e-mail to Kimura-san who had been looking forward to the news about the coming MOU signing event, he was already in a hospital but returned an e-mail saying “Congratulations” and expressed his gratitude to the persons cooperating with PHJ in Myanmar, donors, and PHJ staffs.

I am sorry that Kimura-san passed away before the establishment of the PHJ Myanmar Office. I will do my best to start up the PHJ Myanmar Office to meet Kimura-san’s last wishes.



Photo: Kimura-san (far right) meets the Minister of Health (third from right) in March 2014

Visiting the East Japan Disaster Sites with Kimura-san

By Masaru Yokoo, General Manager, East Japan Disaster Support Group

East Japan Disaster Support Project was the first PHJ project directed to Japan. Immediately after the disaster, Kimura-san proposed to All Japan Hospital Association (AJHA) to tie up in emergency support. As a result, PHJ was able to have the cooperation of Kesen-numa Medical Association in extending medical equipment and furniture for reconstruction of about 30 private clinics in the city suffering from the disaster.

In these support projects, Kimura-san and I visited the north east Japan many times. We left Tokyo early in the morning, drove to Ichinoseki on the Tohoku Highway to visit Kesen-numa. Then we went to Ishinomaki and Tagajo via Minami Sanriku and returned to Tokyo from

Sendai on the Tohoku Highway, the next day. We made these visits by car 20 times or so and enjoyed seasonal changes of the north east Japan, beautiful cherry blossoms in spring, rich harvest in autumn, and falling snow in winter. Moreover, we were always encouraged by the smiling faces of the doctors, nurses, medical staffs of disaster area and each time we were determined to come back to see these people soon. Kimura-san's compassion to the people in the disaster area was realized in extending the needed medical services to them.

PHJ staffs never forget Kimura-san's wish to deliver health and hope to the people suffering from the disaster.



Photo: Kimura-san with the doctor car of Ishinomaki Temporary Clinic

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