



Burma Children

Medical Fund operating to give
Burma's kids a future

July – September

2014

BCMF Quarterly Report



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Overview

This quarter has been a busy one for Burma Children Medical Fund (BCMF) with increased cooperation with organisations and community health workers working inside Burma, working with medical missions in Thailand, and a very significant increase in patient intake in this quarter from last quarter.

The political changes in Burma have added complexity to the work of community organisations working in health along the Thai-Burma border and this is also the case for BCMF. The opening up of the country's borders have meant increased numbers of people seeking our assistance and it has also provided an opportunity for BCMF to access some of Burma's most neglected populations long ravaged by war. However, with these opportunities we are also facing some harsh funding realities. Like many other organizations operating on the border, BCMF finds that many donors are shifting their priorities to funding programs working inside of Burma. Many international donors have stated that their funding to organizations on the Thai-Burma border will likely end or be significantly reduced after 2015. In anticipation of this shift of funding, BCMF is partnering with surgical missions operating in Burma to access international medical specialists and funding made recently available in Burma towards healthcare. This will allow BCMF to provide the best quality of care available to our patients while reducing program costs. In some cases patients will also have the opportunity to receive treatment closer to home rather than travel long distances to receive treatment on the Thai-Burma border. As such, this quarter has seen BCMF focus on creating strategic partnerships with clinics, hospitals and surgical missions working in both Thailand and Burma in an effort to reach more patients from rural areas in Burma and increase patient accessibility to life improving treatment. As a result of this BCMF is now scheduled to meet various NGOs and community based organizations (CBO) (including cardiac, cancer and plastic surgery mission groups) in Yangon and Hpa-An in October, 2014 to assess the potential for future collaboration and partnerships.

In this quarter BCMF has also had the opportunity to visit Eastern Burma where we have begun a pilot project in Burma, providing support to a clinic for displaced people in Karen State. BCMF has begun measures to improve primary healthcare in areas that have been long neglected in Burma and in September, BCMF brought much needed medicine and medical supplies to Ler Per Her clinic, located in Karen State, on the eastern border with Thailand. The area has been devastated by sixty years of civil conflict and is yet to benefit from government or NGO investment in healthcare. Supplies of medicine, vitamins, gauze and syringes were donated by philanthropic organization Sunshine Action, BETULA and long term supporters of BCMF in Bangkok. Ler Per Her clinic currently supports six medics who transport medicine and supplies to thirteen villages through the dense jungle, only accessible by foot. This donation will support 10,000 villagers for six months, the majority of who are subsistence farmers living on less than \$1 a day. The visit also provided BCMF with an opportunity to assess potential patients for our program and formalise a referral system. Our aim in expanding our reach into these areas is to access patients earlier in their illnesses and reduce the costs associated with their treatment.

BCMF Smile Journey

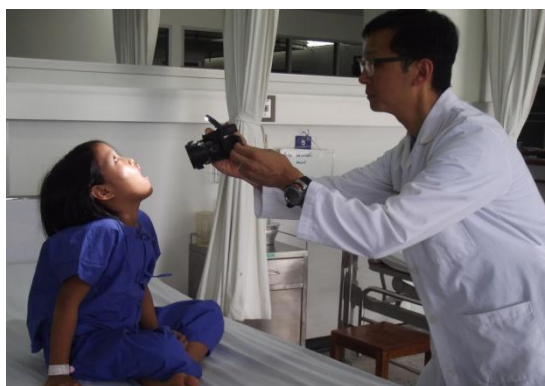
A highlight of this quarter occurred in August, when children's charity Smile Train and our Thai partner, Umphang Hospital, coordinated a surgical mission specialising in cleft lip correction surgery. Cleft lip is a major problem in developing countries where millions of children are suffering with unrepaired clefts. Many struggle to eat and speak which affects their performance and attendance at school and employment prospects later in life. BCMF linked up with the surgical group to bring cleft lip corrective surgery to three of our patients at Umphang Hospital located in one of the least accessible districts in Thailand.



BCMF staff accompanied three girls with cleft lip to Umphang Hospital in southern Thailand to receive corrective surgery. The trip begins with a three hour drive down winding roads.



The girls change into their hospital clothes and are screened to ensure they are ready for surgery. "I'm not afraid. I have been waiting my whole life to get surgery. I am ready for the pain. I want to be pretty like the other girls."



Dr. Paul takes photos and comforts the girls before surgery. He has performed over 750 cleft lip correction surgeries.



Anaesthesiologist Dr. Chan checks on the progress of the narcosis induced by general anesthetic, sensors monitor Ma Aye's vitals. All three girls are operated on the same day.



Ma Htun and Ma Aye smiles say it all.

As for the total number of patients served in this quarter, BCMF saw a remarkable increase of 47% in patient intake in comparison to the last quarter. We have registered 75 new patients into the program (up from 51 patients in the last quarter). The increase in patients requiring our assistance reflects the current state of healthcare in Burma. Burma continues to rank among the lowest countries in the world in terms of health expenditures. There are still few Burmese hospitals that are able to provide treatment for complex cases, and at the facilities that do offer care, treatment continues to be cost-prohibitive.

September proved to be the busiest month for patient intake for the year. This was due to a joint collaboration between Lampang and Mae Sot Hospital which saw hundreds of patients living on the Thai-Burma border with suspected heart disease receive free echocardiograms – a diagnostic test that uses sound waves to create pictures of the heart. Social support organisations, refugee camps and hospitals referred 14 congenital heart disease patients to BCMF as a result of the screening. Cardiac surgery continues to make up the majority of cases BCMF treats. It is also the most costly of treatments, averaging \$3,600 USD per case. Until Burma has the expertise, physicians, and equipment to serve people in need of cardiac and other complex medical care at affordable costs, it is essential that BCMF continue to help patient's access life-saving treatment in the Thai hospital system.

Volunteer Spotlight: Zar Yi Hlaing Oo

Interviewer: Can you tell us a little about yourself?

Zar: I'm interning at the Mae Sot office for five months while also studying a Bachelor of Sociology at the Southern University of Denmark. I'm originally from Mon State, Burma but immigrated with my family to Denmark fifteen years ago.

Interviewer: Can you tell me about that experience?

When I was three years old my father was forced to flee Burma. He was an activist during the infamous 1988 uprising. It was dangerous for him to live with us so he sought refuge in Thailand and Malaysia. He would send money home to support me, my brother and sister. While in Malaysia he was granted political asylum. My mother told me that we would meet up with our father again in Thailand and start a new life together in another country. At the time we didn't know where we would go but we were very excited.

Interviewer: What brings you to BCMF?

Zar: Mae Sot brings up a lot of good memories for me. It was where I was reunited with my father after being apart for 11 years. I knew there were a lot of Burmese people living in Mae Sot and I wanted to volunteer at a place where I could help my people.

Interviewer: What is your role at BCMF?

Zar: I assist with translation during patient interviews as well as fundraising. In Denmark I provided translation to Burmese patients at a hospital for over eight years. It feels very natural for me to do this kind of work.

Interviewer: What surprised you about BCMF?

Zar: It's not your normal 9-5 job. The work is sometimes unpredictable and challenging, but everyone remains very positive.



Patients

This quarterly report highlights two patients who have experienced particular difficulty accessing treatment in Burma as a result of the high costs of treatment or lack of appropriate medical care. For these patients, BCMF continues to be one of the only options to receive complex medical treatment for otherwise life threatening, or debilitating conditions.

Patient Spotlight: Ei Nandar



14-year-old Ei Nandar was referred to BCMF with a congenital heart disease. She lives with her two younger siblings, mother and grandmother in Mandalay. Her mother is a shop vendor and her grandmother cleans at a local hotel. Ei Nandar's mother came to BCMF asking for help for her daughter.

Ei Nandar's mother first discovered there was something wrong with her daughter's heart when she was only one year old. An echocardiogram at Mandalay hospital revealed that she had a congenital heart disease. Doctors said Ei Nandar couldn't be operated on until she was 10-years-old.

Over the next 10 years, Ei Nandar has experienced frequent attacks of fever, shortness of breath and her lips would turn blue from exertion. Her mother would take her to a clinic that could make her better for 1-3 months, but the fever and difficulty breathing always returned. In 2012, Ei Nandar began to feel very sick so her mother took her to Mandalay hospital. Staff performed an echocardiogram again and the doctor said she could be admitted straight away for surgery, if her mother paid 2 million kyat (\$2,000 US) upfront. Even if the family had put away every cent they earned, it would still take years to raise the money for surgery, even at the discounted price.

Affordable treatment for Ei Nandar in Burma appeared an impossible reality for the family. Ei Nandar's grandmother got talking to a co-worker and discovered that her colleague's grandson received heart surgery with the support of BCMF. Full of hope and excitement Ei Nandar and her mother travelled to the Thai-Burma border seeking support for her surgery.

According to Ei Nandar's mother, "the cost of healthcare services in Burma is very expensive. It might look cheap compared to other countries but it is expensive for people who live in Burma. Hospital staff are friendly and helpful, but without money, the care they provide is limited."

Ei Nandar and her mother were transferred to Chiang Mai in July and after routine tests she underwent heart surgery later that month. She was scared the night before the surgery

however her mother calmed her down by saying; "Do not worry, it's the right time for you. Here you have a good hospital with good doctors."

Ei Nandar said the hospital staff treated her very well, they checked on her condition hourly and were very professional. Ei Nandar said everyone at the BCMF patient house in Chiang Mai treated her like family. She made a lot of friends who suffered from different illnesses. Her mother added, "At first it made me sad but then I told myself we all have difficulties. We are lucky to get this opportunity to be treated. This kind of healthcare doesn't exist in Burma; in Burma they don't even give you a scoop of rice."



When asked how Ei Nandar feels since receiving surgery she replied "before surgery I couldn't breathe. I wasn't able to have a conversation with someone - I would just sit there and listen. Now I can have proper conversations and play with my friends. I feel like I'm floating!"

Ei Nandar wants to be a successful business woman, "I want to work with clients all over the world, importing and exporting grains."

Patient Spotlight: Maung Win



Maung Win came to BCMF in September 2012, after sustaining severe contracture burns on his hands, legs and perineum five months earlier. He was playing with two children near a fire when his clothes caught alight. The fire spread quickly up his legs and buttocks. He tried to put the flames out with his hands, causing serious burns to his hands and fingers. No adults were present when the accident occurred, but a neighbor saw what happened and screamed out to his mother.

His mother took him to a health worker in their village who cleaned and dressed his wounds. He was then prescribed medicine and given an IV line; his parents also used traditional ointments and holy water on the burns. When he arrived at MTC, scarring and skin contractures had already developed. He couldn't walk or stand straight as his knees were fused by scar tissue at 90 degree

angles. His fingers and hands were also disfigured and he couldn't grab hold of objects correctly.

Maung Win's treatment took two years of traveling back and forth to Chiang Mai. He has undergone numerous surgeries to release the skin contractures, the most significant was separating the fused skin between his legs enabling him to stand upright and walk unassisted. The fingers on his right hand were fused together so he also received surgery to separate the little finger and the index finger allowing him to grab onto objects.



His father works as an agricultural day-laborer and his mother takes care of Maung Win's and his five siblings. Treatment proved to be a very challenging for the family and they are now delighted that Maung Win and his father home again.

His father is delighted with his son's treatment and now he and his wife do not need to keep an eye on him all the time. Today Maung Win can run around and eat by himself. Maung Win is much happier now. When asked how happy? He gave a thumbs up – now he can move his fingers! Maung Win likes to play football and cane ball, but most of all he really likes going to school. To the donors, his father would like to say, "I am very grateful for all the help that I have received for my son's treatment, this has made us very happy.'



**BCMF Program Statistics
July – September 2014**

	3rd Quarter	2nd Quarter	1st Quarter
Total number of new cases across the program	75	51	73
Children- BCMF	25	9	23
Children- CDF	17	16	21
Adult- BAMF	16	10	23
Gynecological cases – BWMF	17	16	6
Diagnoses			
Cardiac Disease	26	14	17
Obstetric/Gynecological Condition	17	16	8
Gastrointestinal Condition	2	6	5
Eye Condition	2	2	4
Neurological Condition	8	2	5
Benign Growth/Benign Tumor	6	2	8
Congenital Musculoskeletal Deformity	2	2	4
Urological/Kidney Condition	4	2	4
Cancer	1	1	4
Severe Burns	0	1	3
Blood Disorder	3	1	3
Other	2	2	8
Patient's home state/division			
Karen State	29	26	26
Tak Province	25	11	25
Bago Division	3	5	1
Mon State	13	4	8
Mandalay Division	2	2	1
Shan State	1	1	5
Ayeyarwady	1	1	0
Sagain	0	0	2
Yangon	0	0	1
Rakhine	0	0	1
Thailand	1	1	3