



# Biennial Report 2019-2020



**Burma Children**

*Medical Fund* operating to give  
people a future



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Dear friends,

As we embark on a second year of living with COVID-19, I look back at 2019 and 2020. The last two years have been filled with exciting achievements as well as challenges. 2019 was largely marked by the expansion of our outreach projects in Burma and Thailand. With over **37** outreach missions held in Sagaing Division, down to Ayeyarwady Division and Mon State in Burma, to Isan in northeast Thailand, we were able to reach more communities. Furthermore, 2019 saw the establishment of our latest outreach project, providing custom 3D printed prosthetic arms and hands. With prosthetic limbs often too expensive or inaccessible in Burma, as well as for migrants and refugees in Thailand, accessible prosthetic arms and hands give back recipients some of their independence and improves their quality of life.

While 2019 kept us busy, 2020 brought new challenges

following the outbreak of COVID-19 and the closure of the Thai-Burma border in late April. Most outreach projects were postponed except for those we could carry out safely in Thailand. Despite these barriers, we continued to support patients' access to surgical treatment in both Thailand and Burma, enrolling **120** patients into our surgical program and helping **80** patients complete their treatment. Our new partnership with Malteser International Thailand, also allowed us to support refugee patients in northern Thailand.

As the economic effects of COVID-19 are increasingly felt in Thailand and Burma, creating access to surgical care for patients is as critical as ever. In the coming year we aim to continue supporting patients in both Thailand and Burma, while resuming outreach projects for migrant communities in Tak Province, Thailand. We also aim to support partners, as well as sister organisation HFA's outreach projects in Burma.

With your continuous assistance and our BCMF team's dedication, we will be able to support patients and communities despite COVID-19. By working together with partners, community leaders and supporters, we can reach more people in need.

Sincerely,

Kanchana Thornton



# Our Vision

For all individuals to have access to quality health care.

# Our Mission

Improve lives by facilitating access to health care and human rights for vulnerable communities in Burma and along the Thai-Burma border.

# Who We Are

Burma Children Medical Fund (BCMF) is a non-profit organisation that facilitates access to secondary and tertiary medical care for children and adults residing in Burma and along the Thai-Burma border. Established in 2006, BCMF supports these individuals through the provision of medical costs of treatment and necessary diagnostic tests, in addition to other social support services. BCMF also builds the capacity and improves access to medical care in vulnerable communities through an increasing number of health-related outreach projects.

## Health Care in Burma

After the civilian government the National League for Democracy (NLD) party won elections in 2016, it set out to improve public health in Burma by expanding basic services, increasing national health budgets, and reducing infant and maternal mortality. One of priorities of the government was to bring universal health coverage to the entire population by 2030, ensuring that basic health services were available and accessible to everyone.

However, the consequences of decades-long neglect of the public health system under a military regime continues to manifest itself in poor health outcomes. In Burma, life expectancy at birth is 67.1 years, the lowest among ASEAN countries, and nearly 10 years less than neighbouring Thailand. Although the government's new policies strive to address socioeconomic disparities in accessing health care by reducing out-of-pocket (OOP) costs for patients, overall health expenditure remains low. With only 3.49% of the general government expenditure allocated to public health care in 2018, OOP costs continue to be one of the highest in southeast Asia at 76.4%. Often, families in Burma, where 24.8% of the total population lives below the national poverty line compared to 7.9% in Thailand, will have to pay expenses by borrowing large amounts of money or

selling their assets, such as land used to grow crops for an income, to cope with covering health care expenses.

As a result, 14.4% of households have reported spending more than 10% of their household's total expenditure on health care, whereas in neighbouring Thailand, only 2.2% of households did so. Hence, many patients delay seeking treatment, resulting in high expenses for severe conditions by the time they do seek care.

Regarding the number of trained physicians per capita, Burma's 0.68 per 1,000 people in 2018 is significantly lower than the World Health Organization's (WHO) recommendation of at least 2.3.<sup>1</sup> For the physicians that are available, the majority are positioned in urban centres, creating barriers in accessibility for the 69% of the population that lives in rural areas. This is especially challenging for ethnic populations, located primarily in border states in Burma, who often have to travel long distances to reach specialised hospitals and care centres located in Yangon, Mandalay and Nay Pyi Taw. In addition to this, not all patients can communicate in Burmese, the language used in specialised hospitals. These barriers then deter some patients from seeking

timely treatment in Burma.

Although the number of government hospitals within the country have increased from 0.6 for every 1,000 people in 2006 to 1.04 in 2017 (World Bank), local hospitals still face many challenges, including a lack of contemporary facilities, insufficient supplies and equipment, and resources constraints. At the same time, the limited number of specialised hospitals and specialists create long waiting times. As such, many households with higher incomes seek medical treatment at private hospitals or outside of the country, especially in Thailand, India, and Singapore.

The outbreak of COVID-19 has demonstrated just how fragile health care systems are, especially in countries that already face underfunded health care. In Burma, where only 3.5% of the general government expenditure in 2018 went towards health expenditures, compared to 11.2% on military expenditure, the health care system was already severely underfunded before COVID-19 placed an added burden on the system. Although Burma recorded cases as early as 24 March 2020 (WHO), an official increase in cases were only reported during the second wave in September 2020. This may be due

to underreporting because of limited testing facilities and tests, and the disregard for cases reported from remote and ethnic areas, in addition to internally displaced persons camps, areas not counted towards the national tally.

In an effort to control the outbreak, travel restrictions and self-quarantine measures were imposed locally, and quarantine centres run by volunteers hosted returnee migrants from neighbouring countries. Patients seeking treatment for COVID-19 however, were only able to access care at designated hospitals. With only 1 intensive care unit bed per 141,000 population and 1 ventilator per 217,000 population spread out between 25 central level hospitals and 24 regional or state level hospitals as of March 2020<sup>5</sup>, access to care remained restricted for much of the population outside of urban areas. By the end of 2020, officially 124,630 cases had been confirmed with 2,682 deaths.

While the Burma government aims to launch its vaccination drive in 2021, starting with government health workers, remote and ethnic communities have been left to fight the pandemic with minimal support from the government. Non-governmental



organisations and community-based organisations have aimed to fill this gap, although the closure of the Thai-Burma border in April 2020, following the outbreak of COVID-19 in Thailand, has affected support levels – many organisations receive supplies and funding through this border.

As the Burmese health care system struggles to cope with the pandemic, patients are left with the burden of managing costs amid a worsening economy. With the official unemployment rate at 1.6% in 2019, compared to 0.8% in Thailand, it rose to 1.8% in 2020 before the pandemic hit, compared to 1% in Thailand<sup>6</sup>. With rising unemployment within the country, and over 140,480 migrants returning from only Thailand between March and December 2020 (IOM)<sup>7</sup>, it is expected that increasingly more households will face the prospect of falling below the national poverty line, which stood at 24.8% of the total population in 2017<sup>6</sup>.

Facing these challenges, it remains to be seen how the Burmese government will continue to manage the pandemic in face of the economic downturn resulting from COVID-19.

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Thein is a 33-year-old man who lives with his wife and daughter in Yangon, Burma. He and his wife work as vendors at the bus station. However, he stopped working in March 2020 when his condition worsened, and his wife in August 2020, when Yangon was put under lockdown due to a spike in COVID-19 cases. Currently, they have no income and live off savings and borrowed money.

In the middle of 2017, Thein felt exhausted, had difficulty breathing and a rapid heartbeat. His wife took him to a nearby clinic and was told that his heartbeat was dangerously rapid. The doctor immediately referred him to a private hospital in Yangon. There he was given multiple injections and was

referred to Yangon General Hospital when he could not afford to pay for treatment. Thein was admitted at that hospital, where he underwent diagnostic tests before being told that he has a heart condition. He was given oral medication and instructed to purchase more from a shop before being discharged.

Thein took his medication regularly but felt unwell and was admitted at Hlaingtharya General Hospital in July 2018. He was told that his heart valve was not working properly, causing blood to flow back through the valve. He was also told he would eventually need surgery and was discharged with oral medication. During his follow-up appointment in January 2019, he was told that he would need surgery soon. Knowing that it would cost a lot, Thein stopped going back for his appointments. He continued to take his medication and went back to work.

In March 2020, Thein felt exhausted even when he was sitting and stopped working. Between July and October 2020, he was admitted at North Okkala Hospital twice for his condition. While

admitted the second time, Thein met a patient's carer, who gave him the phone number of a nurse at Pinlon Hospital. After making contact, Thein went to Pinlon Hospital on 4 November 2020. He was admitted straight away as his condition was severe. Upon checking his medical records and determining that he has tricuspid valve regurgitation with mitral valve regurgitation, the doctor told him that he needed surgery urgently, costing 9,000,000 kyat (approx. 9,000 USD). When Thein told the doctor that they could not afford to pay so much, the nurse referred him to BCMF for financial assistance.

With BCMF's support, Thein had surgery to replace one of his heart valves and repair another on 13 November 2020. He was discharged on 29 November 2020 and was told to come back if he felt unwell. Thanks to his surgery, he no longer has difficulty breathing and no longer feels exhausted. "I'm very happy now," he said. "My surgery was a success and I feel better. In the future, I will try my best to support my family and I would like my daughter to complete her education."





Ma Kham is a 14-year-old girl who lives with her father and extended family in Kachin State, Burma. She is a student in grade nine. Her father looks after her while her mother is a domestic worker in China. Their monthly income of 280,000 kyat (approx. 280 USD) is just enough to cover their daily needs and pay for basic health care.

Ma Kham was born underweight at a hospital. She was admitted for a month before she was referred to Mandalay General Hospital, where she was admitted for six to seven months. But her parents were never told why. After this, Ma Kham often had a fever and difficulty breathing and was frequently

absent from school.

In August 2019, her symptoms worsened. Her mother even came back from China to look after her for a few months. During this time, she met her friend, who is the mother of a BCMF heart patient. Her friend told her to take Ma Kham to BCMF's office in Thailand. Ma Kham, her father, and her mother's friend travelled all the way to Mae Sot, where BCMF's office is located. When they arrived on 15 October 2019, BCMF staff recommend further medical investigation at Mae Sot Hospital. With the help of Mae Tao Clinic staff, Ma Kham and her father went to the hospital, where they learned for the first time that she was born with a hole in her heart, a condition called ventricular septal defect. When BCMF staff learned about her diagnosis and that her parents could not afford to pay for her surgery, Ma Kham was registered into BCMF's referral services program.

Since Ma Kham's family lives in Kachin State, it was easier for her to receive surgery at BCMF's partner hospital in Burma. Ma Kham and her father met the

cardiologist at Pinlon Hospital in Yangon on 11 January 2020. They were told that she would receive surgery in July 2020. However, her surgery was postponed when she had tonsillitis in July 2020. When she returned for her follow-up appointment on 23 August 2020, the doctor saw that she had recovered from tonsillitis and admitted her for surgery. Two days later, she had the hole in her heart closed surgically, and she was discharged on 3 September 2020.

Thanks to her surgery, Ma Kham no longer suffers from frequent bouts of fevers or difficulty breathing. She has more energy and is now able to help out with cooking and household chores. "Thank you so much to the donors for paying for my daughter's surgery. Without their help, even if we sold our house, we would have never been able to afford it," said her father.

"I want to become a teacher," Ma Kham added. "When I become a teacher, I will tutor children for free who cannot afford to pay. Once I receive wages, I will build a house for my parents."



# Referral Services Program

Since the establishment of BCMF in 2006, BCMF has supported **3,288** patients' treatment costs for advanced medical care. Patients are referred to partner hospital in Thailand and Burma, with BCMF supplying other support services, such as transportation, housing and meals, while undergo treatment in Chiang Mai and Lampang, Thailand. For those undergoing treatment at Mae Sot Hospital (MSH), Mae Tao Clinic (MTC), a partner organisation in Mae Sot, Thailand, helps patients navigate the Thai health care system at that hospital.

In 2019, **327** patients were enrolled into our referral services program, a slight increase from 2018. This was due to the number of outreach programs carried out in Burma, stronger ties with our partners there and an increase in referrals from our previous patients. In fact, after our partner Mae Tao Clinic (MTC), most patients were referred to us by other BCMF patients and their families.

From the total number of patients enrolled, **82** were under our children's fund, while another **82** were referred to Child's Dream Foundation (CDF), our partner in Chiang Mai. CDF funds children 12 years old and under with congenital conditions such as



Shine is a six-month-old boy who lives with his parents in Tak Province, Thailand. His father is a day labourer, and his mother is a homemaker. Their monthly income of 7,000 baht (approx. 233 USD) is not enough to cover their daily expenses. Therefore, they often have to borrow money from friends.

Shine was born at Mae Tao Clinic (MTC) with meningocele, a condition in which a small fluid-filled sac protrudes from his spinal cord. The medic put bandages

on the sac in order to prevent injury and suggested that they bring Shine to Helping Children Hospital in Yangon, Burma for treatment. His parents followed the medic's advice and took Shine to that hospital in early 2019. Shine received a computed tomography (CT) scan, which revealed that he is also suffering from hydrocephalus, a condition in which an accumulation of cerebrospinal fluid occurs within the brain. The doctor told Shine's parents that he would need to undergo surgery to insert a shunt into his head at Yangon Hospital, before he received surgery for the meningocele. The cost of surgery was such a large amount that they did not think they would be able to pay for it. Therefore, they went back home without seeking further treatment.

In April 2019, Shine's parents took him to MTC because he was sick and the sac on his spinal cord began to leak. A medic treated Shine's sac and referred him to BCMF for assistance accessing further treatment. BCMF then referred Shine to Maharaj Nakorn Chiang Mai

Hospital, where he was admitted on 25 June 2019. He received surgery to repair his meningocele on 27 June 2019. After surgery, the doctor saw that fluid was seeping out of Shine's surgical wound. Shine received a CT scan, which confirmed he has hydrocephalus. He underwent a second surgery on 1 July 2019, to have a shunt inserted into his head to help drain the excess fluid on his brain. He was discharged from the hospital on 14 July 2019.

Before treatment, Shine could not sleep very well, and his parents found it hard to carry him due to the sac protruding from his spinal cord. The neighbours would gossip about Shine, and they never picked him up like they did with the other babies in the village. However, now Shine can sleep well, and his mother is very happy. She hopes that the neighbours will no longer gossip about him. She said, "I would like to thank everyone who were involved in the process of my son's treatment. Shine is only alive because of their support, especially the donors' [support] who paid for his surgery."



heart conditions, anorectal malformations, and simple spina bifida. A further **139** patients were enrolled into our adult fund while **24** were enrolled into our women's fund, supporting patients with gynaecological conditions.

Of the total number of patients, **180** completed their treatment in 2019, while **17** still had post-operative care appointments. A further, **86** patients had commenced their treatment process but were still waiting to receive surgery. **120** patients were enrolled for treatment of a heart conditions, with over half born with a heart defect. Some **69** patients received treatment in Burma, a **97%** increase from 2018. This is due to stronger ties with partner hospitals in Burma.

In 2020, patient enrolment decreased by **63%**. This was due to the outbreak of COVID-19. The closure of the Thai-Burma border at the end of April 2020, travel restrictions and lockdowns within Thailand, in addition to the postponement of nonurgent surgeries at Thai and Burmese partner hospitals, all contributed towards fewer patients being able to access support from BCMF. Despite this, **80** patients completed their treatment in 2020, while **29** patients commenced their treatment but were still waiting to receive surgery.

In addition to this, thanks to the expansion of a health insurance scheme for undocumented migrants around Mae Sot, Thailand, launched in 2018, increasing numbers of patients were able to access health care in Mae Sot without requiring support from BCMF. Furthermore, the requirement of employers to provide access to employee health insurance, a law reinforced in 2017, has resulted in fewer migrant patients in Thailand needing direct support from BCMF. The impact of this can be seen by the decrease in gynaecological patients requiring assistance from BCMF to access treatment.

In 2020 BCMF established a new partnership with Malteser International (MI) Thailand. MI provides access to health care as well as other services in two northern Thailand refugee camps. This new partnership has helped BCMF support **12** refugee patients referred by MI in need of surgical treatment at Maharaj Nakorn Chiang Mai Hospital. In the coming year, BCMF plans to support similar MI referrals access to surgical treatment at Mae Sariat Hospital. This will allow patients to receive care closer to the refugee camps, with only patients needing complex treatment required to make the six-hour journey to Maharaj Nakorn Chiang Mai Hospital.



Mu is a 45-year-old woman who lives in Myawaddy Township, Karen State, Burma with her husband and daughter. She and her husband are semi-subsistence farmers, selling any additional harvest for income. In total, Mu and her husband were able to earn a profit of 8,000 baht (approx. 267 USD) in 2018. This income is enough to cover their household's daily expenses.

In March 2019, Mu began to experience pain and discomfort in her lower abdomen. She noticed that the pain intensified during her period. When she touched the lower left side of her abdomen, she discovered a

solid mass. Although the pain subsided once her period ended, the mass remained. In an attempt to get rid of the mass, Mu purchased an ointment made from traditional medicine and applied it to her abdomen regularly. When the mass did not disappear or reduce in size, she went to Mae Tao Clinic (MTC) on 4 May 2019. At the clinic, an ultrasound revealed that she had a mass on the left side of her uterus. Mu was given three weeks of oral medication and returned home.

After taking the medication for three weeks, her pain diminished, but Mu could still feel the mass in her abdomen. She returned to MTC for her follow-up appointment on 21 May 2019. That same day, MTC staff took her to Mae Sot Hospital for further investigation. While there, she underwent several diagnostic tests. She was told that she needed surgery, but the doctor did not tell her why. When she later told MTC staff that she could not afford to pay for surgery, a medic referred

her to BCMF for assistance accessing further treatment.

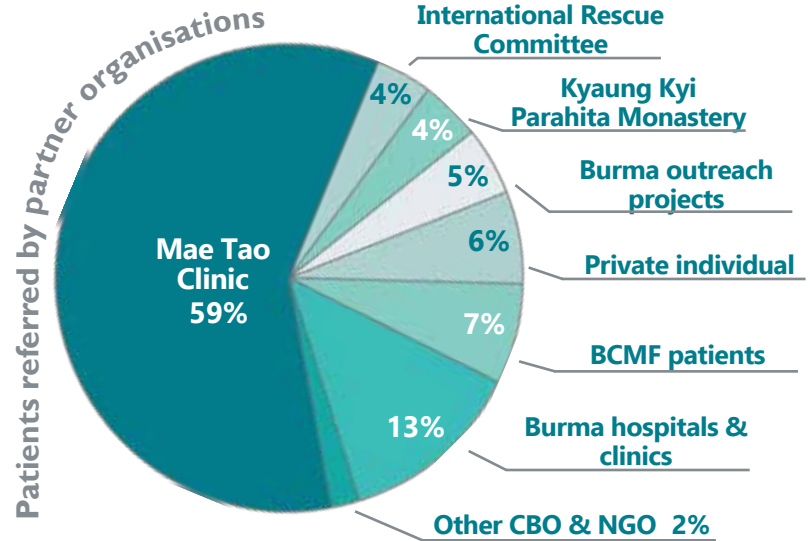
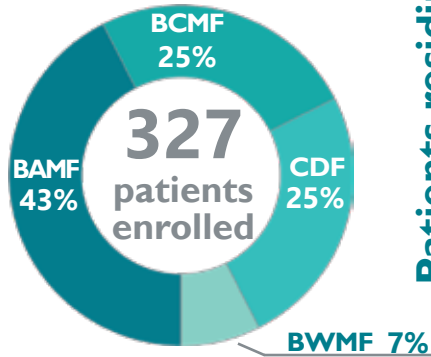
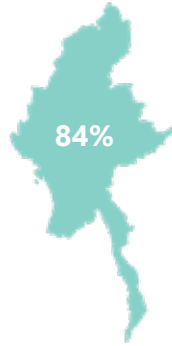
Mu was admitted at Mae Sot Hospital on 10 June 2019. With the help of a translator, the doctor told her that she had an ovarian cyst and that she would need to undergo a total hysterectomy. As she consented to the procedure, the next day she underwent surgery before being discharged on 14 June 2019.

Since her surgery, Mu feels much better. She is no longer in pain, has regained her appetite and can sleep well. "I am very thankful to the donors and everyone else who helped me receive this treatment. I could never afford to pay for my surgery without the help of donors," she said. "I cannot wait to see my family! I am very excited to go back to my village after my successful treatment."

# 2019

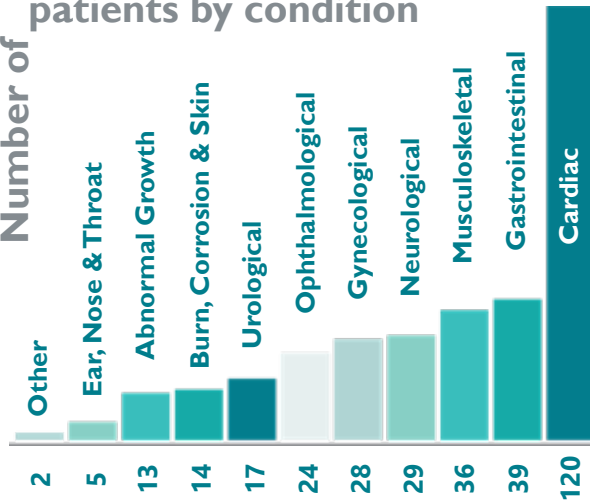
in Burma

Patients residing

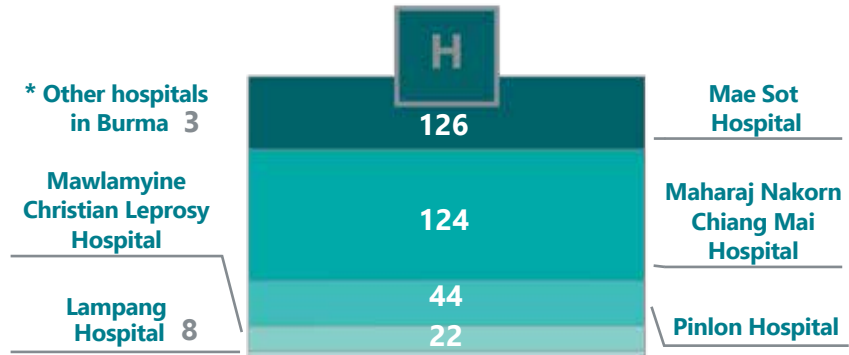


patients by condition

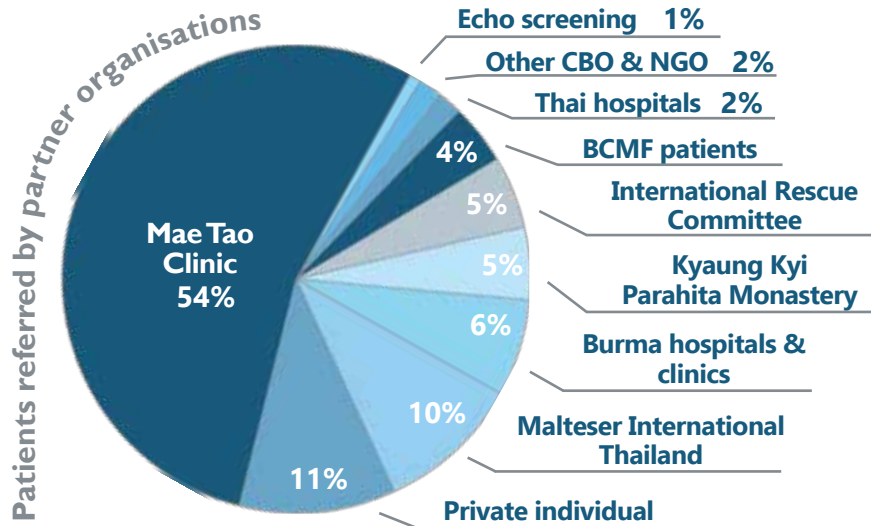
Number of



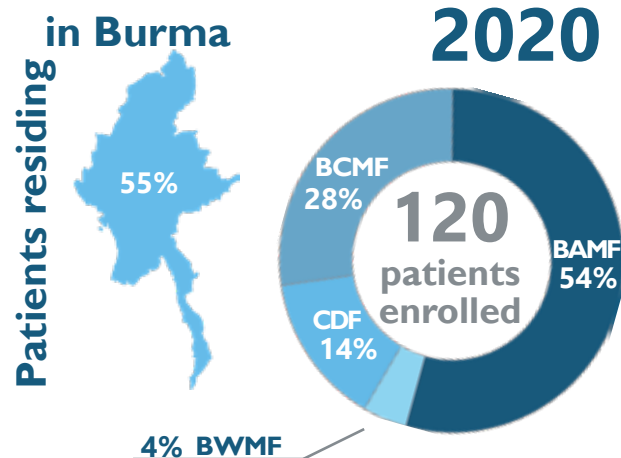
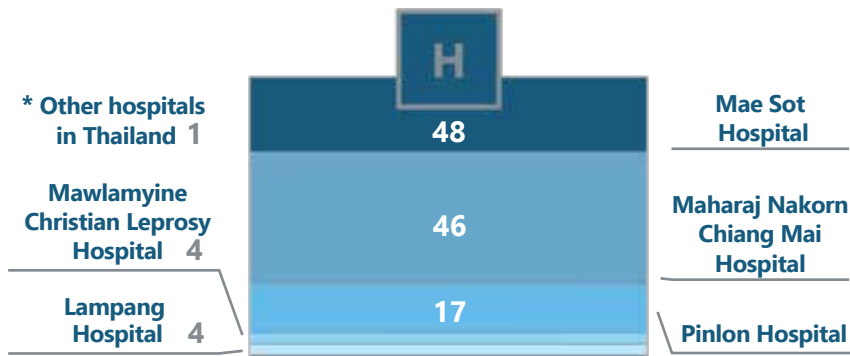
Number of patients by treatment center



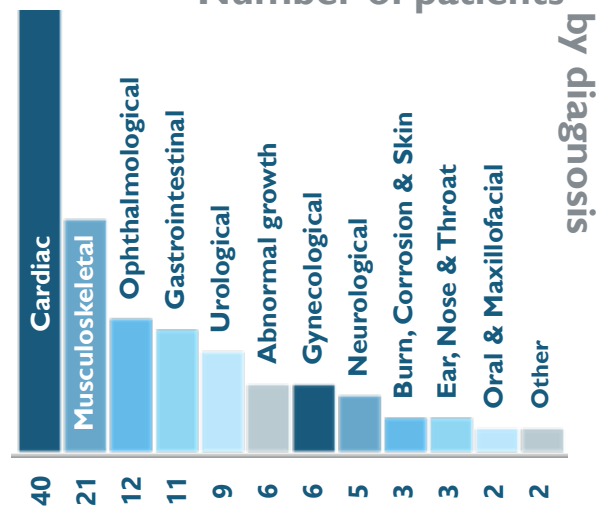




Number of patients by treatment center



Number of patients by diagnosis



## BCMF - B.K. Kee Patient House

P a t i e n t s  
who require  
t r e a t m e n t  
for complex  
cases that

cannot be performed at other partner hospital in Thailand and Burma, are referred to our partner hospitals Maharaj Nakorn Chiang Mai Hospital or Lampang Hospital. These patients and their caregivers are transferred to Chiang Mai on a weekly van trip.

Transferred patients who are supported by our partner Child's Dream Foundation (CDF) are housed at CDF's Safe House, while BCMF patients stay at BCMF-B.K. Kee Patient House.



*Patient house staff and residents gardening*



*Patient house staff and residents sort donated clothes to repurpose*

Established in 2013, the patient house is run by two staff who live on site and offer support to patients, accompanying them to their appointments at the hospital. Staff encourage participation in daily activities at the patient house to create a relaxed and homely atmosphere. Everyone is encouraged to cook, eat, and clean

together, alongside the staff. Gardening, and helping with other projects, such as sewing and painting pencil cases for BCMF stationery project, allows patients to give back while enjoying communal activities.



*Patient house residents helped make masks for other BCMF patients*





The outbreak of COVID-19 in Thailand at the end of March 2020 and the resulting closure of the Thai-Burma border impacted BCMF patients access to health care in Thailand. Patients residing in Burma could no longer cross the border to seek treatment, and BCMF faced challenges transferring patients to Chiang Mai due to COVID-19 travel restrictions and logistical difficulties of transferring patients without proper documentation. Following an increase in COVID-19 cases around Mae Sot, Thailand in October 2020, BCMF had to temporarily halt patient van transfers to Chiang



*One of the last patient van trips to Chiang Mai in 2020*

Mai until the end of the year.



*CMIRC members during one of their visits to the BCMF-B.K. Kee patient house*

Since 2016, Chiang Mai International Rotary Club (CMIRC) visits the patient house weekly to run activities with patients and their caregiver. In 2020, due to an increase in COVID-19 cases in Chiang Mai, CMIRC could not organise or visit the patient house from April to August. Once BCMF was able to host visitors again at the patient house, CMIRC resumed organising activities for the patients and their caregivers on a biweekly basis. To ensure the safety of patients, caregivers and staff, COVID-19 safety guidelines were put in place. These include requiring all house residents and visitors to wear masks, measuring the body temperature of patient house residents and visitors, and limiting the number of visitors.





Saw Eh is a 25-year-old man who lives with his wife, son and daughter in a refugee camp in northern Thailand. Although their household receives 821 baht (approx. 27 USD) every month on a cash card from an organisation, in addition to free health care and education in the refugee camp, this amount is not enough to cover their basic needs. Saw Eh also works as a night guard in the refugee camp, earning 700 baht (approx. 23 USD) in a month.

On the morning of 1 June 2020, Saw Eh left the camp to forage for bamboo shoots in the jungle. While climbing over boulders in the rain, a few larger rocks above him rolled down and knocked him unconscious. When he

woke up, he was in severe pain, and he could feel blood dripping down his face. Unable to move, he cried out for help. Luckily, a man was nearby and heard him. After fetching a few others to help, they carried Saw Eh in a hammock to the hospital in the refugee camp. At the hospital, run by Malteser International (MI) Thailand, a medic examined him and saw the bone in his lower right leg protruding out of his skin. Knowing they could not treat him in the refugee camp, the medic referred him immediately to Mae Sariang Hospital, located two hours away by car. When he arrived at that hospital, he received an x-ray, which confirmed that both bones in his right lower leg were fractured. Since the treatment he needed was beyond the capacity of Mae Sariang Hospital, the doctor referred him to Maharaj Nakorn Chiang Mai Hospital (CMH) right away. Unable to pay for his treatment, MI staff referred Saw Eh to BCMF for assistance accessing further treatment.

On the evening of 1 June 2020, Saw Eh was driven 190km to CMH in an

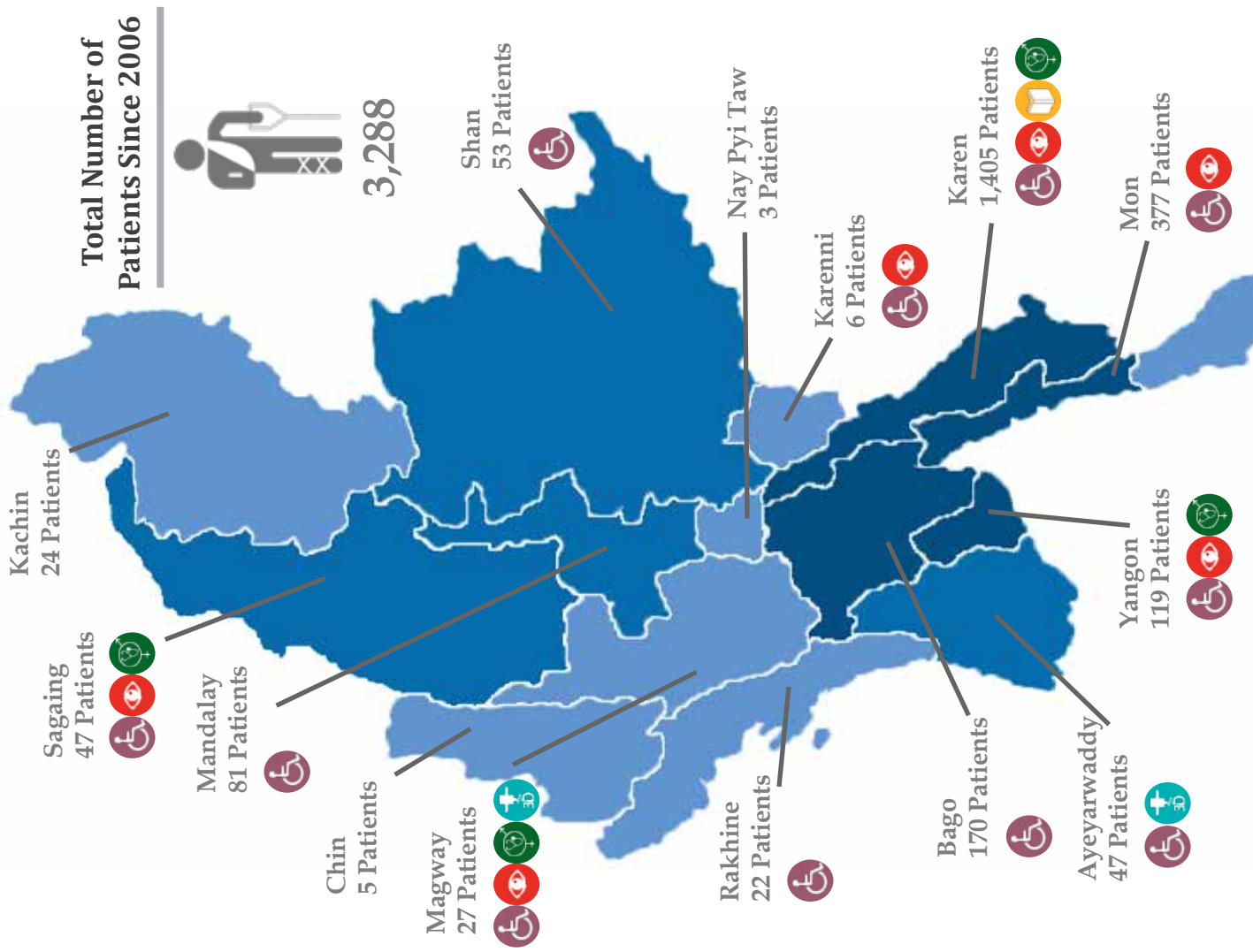
ambulance. At the hospital, the doctor told Saw Eh that he would need to receive two surgeries on his fractured leg. The following day, he underwent surgery to clean and remove damaged tissue around the area of his fractured bones and to set his leg in an external fixation device. On 9 June 2020, he underwent a second surgery during which plates and screws were inserted into his leg to ensure that it continued to heal properly. He also had the external fixation device removed before the doctor discharged him on 12 June 2020.

Thanks to his surgeries, Saw Eh is recovering well and is no longer in pain. Although he still needs to use crutches, he completes exercises every day as part of his physiotherapy. He is now able to help with household chores, such as washing clothes and sweeping, and can shower without help. “I am relieved and happy that my right leg still works,” he said. “I cannot imagine what my life would be like without proper treatment. I am very thankful to the donors.”

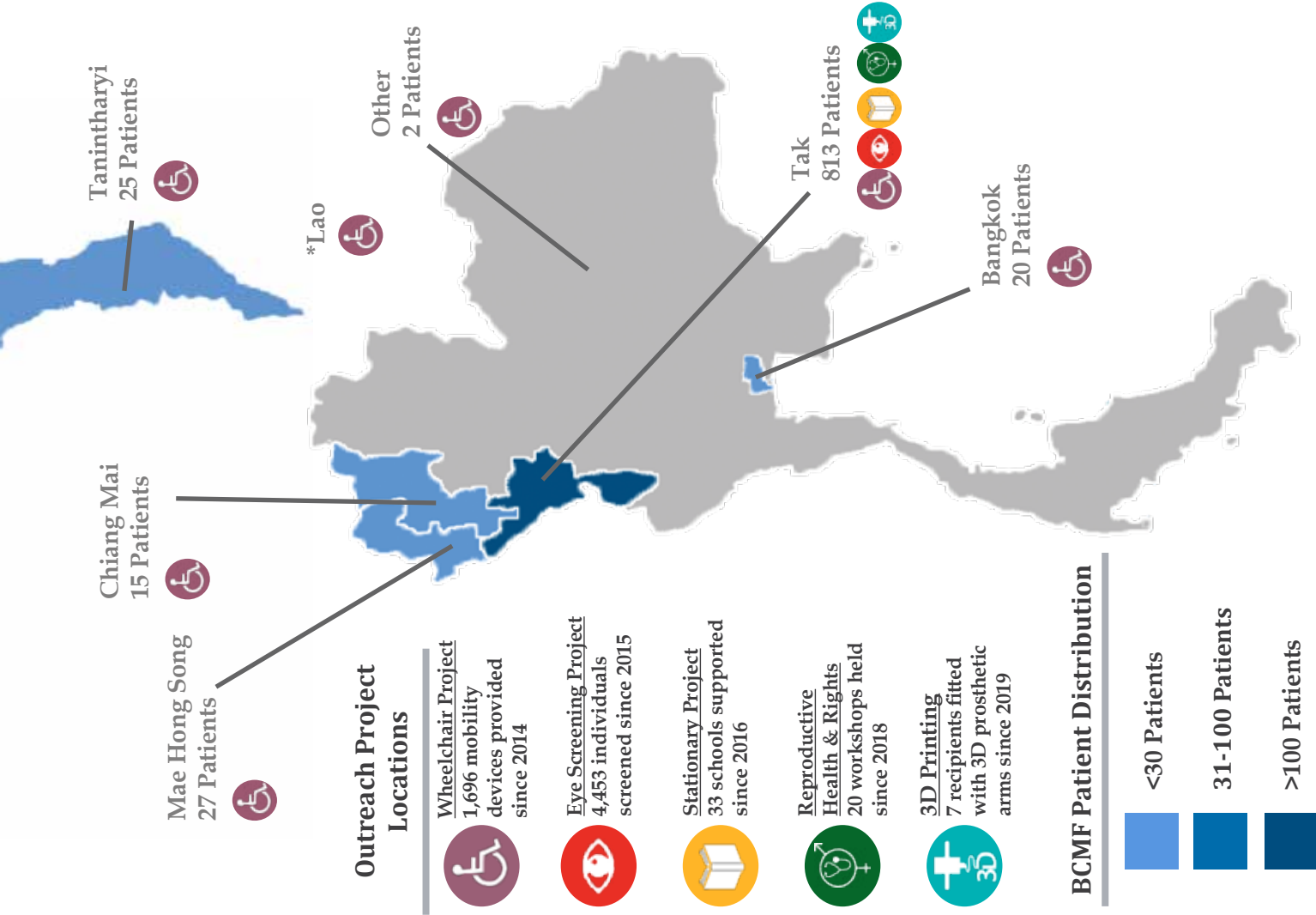


# Outreach Services Program

# Referral Services Patients & Outreach Programs Locations Since 2006







# Wheelchair

Wheelchair for Kids (WFK) in Australia while a type of adult wheelchairs, called mobility carts, are donated by Mobility Worldwide based in the United States of America. The child wheelchairs are unique as they are designed to be fitted to the recipients needs and are built for unpaved roads. Mobility carts are propelled forward with a hand crank or a pull lever, have adjustable chairs, and are also designed for use on unpaved roads.



*BCMF team adjust the wheelchair of a recipient in Isan, Thailand*



*BCMF team fitting recipient with a mobility cart in Lashio, Shan State*

Since 2014, BCMF has worked to provide access to mobility aid for children and adults with a mobility impairment in Burma and Thailand. Child wheelchairs are donated by



*BCMF staff assembling a child's wheelchair for a recipient*

2019 was an exciting year, with BCMF able to reach **385** recipients in person for the first time in Sagaing Division, Bago Division, Mon State and northern Shan State in Burma. BCMF also held its first wheelchair fitting and distribution in northeast Thailand that year.

In 2020, BCMF was able to hold **3** wheelchair fitting trainings in northeast Thailand, as well as **1** distribution in Burma and **1** in

**2019**

**14**  
Wheelchair  
missions

**6**  
Distribution

**8**  
Distribution  
and training

**75**  
Community  
members  
trained

**216**  
Wheelchairs  
for children

**159**  
Mobility  
carts

**10**  
Other  
mobility  
devices

**5**  
Trained partner  
organisations  
distributed  
wheelchairs

**135**  
Wheelchairs  
fitted  
by trained  
partners

Thailand, before the Thai-Burma border closed in April due to the outbreak of COVID-19. BCMF had to postpone 7 wheelchair fitting missions in Burma. BCMF was however able to hold 1 wheelchair fitting and training mission in northeast Thailand at the end of November 2020, after travel restrictions were relaxed in Thailand.

<div> <div>5</div> <div>Wheelchair missions</div> </div>			2020		
<div> <div>2</div> <div>Distribution</div> </div>		<div> <div>3</div> <div>Distribution and training</div> </div>	<div> <div>20</div> <div>Community members trained</div> </div>		
<div> <div>8</div> <div>Other mobility devices</div> </div>		<div> <div>39</div> <div>Mobility carts</div> </div>	<div> <div>130</div> <div>Wheelchairs for children</div> </div>		
<div> <div>14</div> <div>Wheelchairs fitted by trained partners</div> </div>			<div> <div>3</div> <div>Trained partner organisations distributed wheelchairs</div> </div>		



Zon is a 31-year-old woman from Magway Division, Burma. When she was young, she lost her ability to walk, and her left leg became shorter than her right leg. She was later diagnosed with polio and underwent physiotherapy. Her father made her bamboo crutches and by the time she was 11 years old, she was able to walk with them. However, she would

often slip if it rained, and her armpits would become sore if she walked far. “The mobility cart will make it easier to get around,” said Zon. “And I won’t have to depend on anyone. I will be able to go to the shop alone hopefully.”

16-year-old Pattargon is from Kalasin Province, Thailand. His grandparents look after him during the day, while his mother works in a nearby town. As Pattargon is getting bigger, his family finds it increasingly difficult to look after him. They also worry about his old wheelchair becoming irreparable. If that were to happen, his family would be unable to bring



him outside of their house. This new wheelchair will not only help Pattargon with his daily activities but will help his family tremendously. After his morning needs are met, Pattargon likes to sit with his grandfather while he weaves at the local community cooperative.

## Eye Screening

Since 2015, BCMF has provided disadvantaged communities in Burma and Thailand with access to free vision tests. During each eye screening mission, BCMF's trained staff and interns complete vision tests and check for common eye conditions such as cataract and pterygium. A free pair of eyeglasses are provided when needed and patients who need surgical treatment are referred to nearby free eye clinics and hospitals. If free eye surgery is not available nearby, or if the patient has been diagnosed with a complex eye condition, they will receive treatment in Thailand through BCMF's referral services program at either Mae Sot Hospital or Maharaj Nakorn Chiang Mai Hospital.



BCMF staff screens a student in Sagaing Division, Burma



BCMF staff screens a villager in Mon State, Burma

In 2019, BCMF worked hard to expand the eye screening outreach project, holding eye screening missions for the first time in Mon State and Sagaing Division in Burma, as well as Tak Province, Thailand. Although 5 eye screening missions were scheduled to take place in 2020, BCMF had to postpone 4 eye screening missions due to the outbreak of COVID-19. In addition to this, patients' eye surgeries in Burma were also postponed due to COVID-19. BCMF plans to resume eye screening missions once COVID-19 restrictions are eased.

2019

Eye Screening



missions

Villagers



screened

provided



Eyeglasses

referred for

Patients

H  
275

eye surgery

115

Patients  
received  
surgery



# 2020

missions Eye Screening



Villagers



provided

0

Patients  
received  
surgery

Patients

referred for

H  
66

eye surgery



U Nyunt is a 63-year-old subsistence farmer who lives with his large family in Yesagyo Township, Magway Division, Burma. He first noticed that he had difficulty seeing mid-2018. He could not afford to see an ophthalmologist or buy himself a pair of eyeglasses. One day, he heard an announcement that an organisation called Burma Children Medical Fund (BCMF), would be coming to a nearby village to provide free vision checks. He decided to have his vision checked and received his first pair of eyeglasses to correct his near-sightedness in February 2019. In February 2020, he heard that BCMF would return to provide free vision tests in another village in Yesagyo Township. He decided to have his vision checked again as his vision had deteriorated. He received a new pair of eyeglasses with a stronger prescription. "Now I'm happy because I can see my grandchildren's faces clearly," he said. "Before, I couldn't see people's faces properly."

Ma Non is a 12-year-old fifth grader who lives with her family in Sagaing Division, Burma. In 2018, she had trouble seeing things that were distant. At school, her teacher made her sit in front of the class as she could not read the board in front of her. Her parents took her to a private clinic in Tigyain to check her vision. There, she received glasses costing 35,000 kyat (approx. 35 USD). One day, her teacher told her and her parents that a foreign group, called BCMF, would



be providing free eye screening close to their village. Believing that the glasses provided by BCMF would be of higher quality than the one she already had, her parents brought her to have her eyes checked. After having her vision tested, she received eyeglasses to correct her near sightedness. "I will use [my new glasses] when I am reading the blackboard and attending class, so that I do not have to sit in front of the classroom anymore," she said.

# Reproductive Health & Rights

In many parts of Burma, and within migrant communities in Thailand, talking about the reproductive system is still considered largely taboo. Although this topic is covered in some school curriculums, information provided is vague and lacking. In response to this BCMF launched reproductive health and rights (RHR) project in 2018.



Female participants during an RHR workshop in Tak Province, Thailand



RHR workshop for male participants in Karen State, Burma

Workshops are held in remote communities in Burma and migrant communities on the Thai-Burma border. Initially targeting female participants, in 2019 the RHR project was expanded to include male participants after several requests were made by community leaders. During workshops, participants learn about puberty, male and female anatomy, healthy pregnancies, sexually transmitted diseases and sexually transmitted infections.

Workshops for female participants also covers the topic of menstrual hygiene as well as the use and maintenance of reusable sanitary pad kits donated by Days for Girls Australia. At the end of a workshop, each female participant

2019

13 workshops

574 female participants

Implants distributed 5,701 by partner clinics

Training of trainers 1 refresher

355 male participants

671 reusable sanitary pad kits distributed

**4**  
workshops

**25**  
male  
participants

**109**  
reusable  
sanitary  
pad kits  
distributed

**2020**

**155**  
female  
participants

**Implants**  
**4,400**  
distributed  
by partner  
clinics

who has not yet entered menopause, receives one of these kits to take home. Three months after a workshop, a follow-up session is held with female participants to collect feedback on the reusable sanitary pad kits.



*Female migrant workers and students during an RHR workshop in Tak Province, Thailand*

**Reusable sanitary pad kit includes:**

- 1 soap
- 1 ziplock bag
- 2 pairs of underwear
- 1 washcloth
- 1 instruction sheet
- 2 waterproof sheilds
- 8 liners for the pads
- 1 drawstring bag

“I’m happy that I received a reusable pad. Now when I have my period, I will no longer have to buy disposable pads every month. I will no longer have to worry that I do not have enough things [disposable pads] for my period. In the past, I had to stop going to school whenever I had my period, as I did not have enough materials [disposable pads].”



## 3D Printing

BCMF sees many children and adults living with a disability, especially during wheelchair fitting and training missions. Although some people require a mobility device, other individuals require a prosthetic or orthopaedic device. Although prosthetic devices are available in some areas in Burma and in some hospitals in Thailand, they are expensive and not always comfortable.

To fill this gap and improve children and adults' quality of life, BCMF established the 3D Printing Project in June 2019 in 2 locations; one 3D printing office was set up at our partner organisation Mawlamyine Christian Leprosy Hospital (MCLH) while the other one was set up at BCMF's main office in Mae Sot, Thailand. Through the support of donors Jeannie Newman and Brodtbeck Philanthropy Foundation, each office received 3D printers. At the end of May 2019, 2 BCMF staff and 2 MCLH staff attended a three-week training on printing 3D prosthetic devices for the upper limbs at Sirindhorn Khon Kaen Hospital. Upon completion of the training, the two BCMF staff trained a former intern, now the 3D Project Officer, to support them with printing and assembling printing devices.



*BCMF staff and MCLH staff watching a 3D printer in action*



*BCMF staff fit two farmers with 3D printed prosthetic arms in Magway Division, Burma*

Setting up, learning to print quality devices and properly fit recipients for prosthetics took precedence for the remainder of 2019. By the end of that year, the 3D printing team had printed and assembled **4** prosthetic arms, **2** prosthetic hands and **3** silicon moulding cups to create finger grips on prosthetic hands. This was no small feat as printing and assembling a prosthetic arm takes a minimum of **1** week to complete!

In 2020, BCMF was able to fit **6** recipients – **5** in Burma and **1** in Thailand – with 3D printed prosthetic hands and arms. Following the outbreak of





*MCLH nurse wearing a 3D printed faceshield*

COVID-19, BCMF printed and assembled **180** face shields. The majority of these were donated to partner organisations and clinics in Burma and Thailand. A further **8** prosthetic arms and hands were printed and assembled for recipients in Burma. However, due to the closure of the Thai-Burma border, BCMF was unable to fit the recipients with their printed prosthetic arms and hands. In 2021, BCMF plans to send the prosthetic arms and hands to staff from sister organisation Health For All in Burma, who will then fit recipients who reside in Yangon Division and Karen State with the 3D devices.

Khun Leenee is a 70-year-old window who was born with a underdeveloped left hand. This does not deter her, and she runs a noodle shop with her two daughters. However, she feels shy whenever she leaves her house, and wears long sleeves to hide her hand.



One day, the director of BCMF saw Khun Leenee and offered her a custom fitted 3D printed prosthetic hand. She readily agreed and was happy and excited during her fitting. "Now I will have hands like others," she said. "I will wear it when I go outside of my house."

40-year-old Saw Lay Hel had his left arm amputated below the elbow in 2001, due to a hand grenade injury. Before he received his 3D printed prosthetic arm, he found it hard to do his household chores. Thanks to the new prosthesis he received from BCMF, he can now sweep and hold a dustpan, wring out his washed clothes with both hands, chop vegetables more easily and carry pots and bowls with both hands for cooking. "My dream has come true, and I got my arm back even though it's not my real arm," he said. "It is very useful and now I can show my friends that I also have two arms like them!"



# Stationery

Since 2016, BCMF has regularly received requests for stationery supplies, teaching aids and materials from remote schools in Karen State, Burma and from migrant learning centres on the Thai-Burma border. These schools in Karen State, Burma, receive minimal support from their local government and face difficulty receiving support from students' parents who are mostly subsistence farmers. Meanwhile, although migrant workers can earn an income in Thailand, their income is usually not sufficient to cover all school related expenses.

In 2019, the first part of the project included delivering stationery supplied to 2 schools in Karen State, which took 10 hours to reach by car, boat and on foot. With most families practicing subsistence farming, purchasing notebooks, pencils and pens is difficult financially. As these items are also unavailable in village shops, parents have to travel to a town, located four hours away by boat, just to purchase supplies.



*Patient house residents decorate pencil cases for BCMF stationery project*



*Due to heavy rain and muddy roads, students had to carry the stationery donations*

For the second part of the project, stationery items were delivered to 10 schools on the border of Karen State. Due to heavy rain and muddy dirt roads, the BCMF team was unable to physically reach the schools. Instead, students had to walk and take a boat to pick up the supplies before carrying it back to their schools on foot.

During the third part of the project, BCMF staff and two interns delivered stationery items to 2 schools in Kawkareik and Kyain Seikgyi Township of Karen State. The school in Kawkareik Township is funded by the government, but parents must still purchase stationery items for their children, and cover enrolment costs. The second school in Kyain Seikgyi Township is the only middle school in the area that teaches in Karen and uses a Karen curriculum. With most families practicing farming or subsistence

farming, parents find it difficult to cover the cost of stationery items let alone enrolment and school boarding fees.

The final segment of the project was the delivery of stationery items to **6** migrant learning centres around Mae

Sot, Thailand. Although some migrant workers can purchase stationery supplies for their children, they are usually unable to purchase enough to last the full year. By providing stationery supplies to migrant students, BCMF helps to maintain quality education and encourage students to complete their schooling.



*BCMF staff and volunteers delivered stationery items to a school in Kyain Seikgyi Township, Karen State*



*Students at an IDP camp received pencil cases, stationery items and mosquito nets*

Following the outbreak of COVID-19 in Thailand and Burma, many schools temporarily closed. While some schools in remote parts of Burma continued to run as usual, BCMF was unable to support them due to the closure of the Thai-Burma border. However, BCMF supported **1** school in Karen State with stationery supplies and clothes before the border closed, and donated stationery supplies, clothes, and mosquito nets to **5,345** students from **6** schools in an internally displaced persons camp also in Karen State. The donation was delivered on 10 July 2020, with the help of Karen Women's Organization.

2019

schools supported  
20

students



teachers



pencil cases

made by

1,100

BCMF-B.K. Kee Patient House staff, patients & caregivers

## Dengue Health Literacy

Every year since 2014, BCMF distributes mosquito nets and dengue prevention posters to migrant learning centres along the Thai-Burma border and to schools in remote areas of Karen State, Burma. This is in response to the rainy season, when each year sees a significant increase in mosquito borne illnesses.

In 2019, BCMF distributed **600** posters, **50** mosquito nets and **60**



*Delivering BCMF donations including dengue prevention posters and mosquito nets to Karen State, Burma*

to donate **24** posters and **205** mosquito nets to an internally displaced persons camp in Karen State, Burma, with a population of over **5,000** persons.



*Migrant workers read a dengue prevention poster in Tak Province, Thailand*

floor mats to **21** schools Thailand and Burma. Following the outbreak of COVID-19 in Thailand and Burma, many schools temporarily closed in Thailand and Burma. While some schools in remote parts of Burma continued to run as usual, BCMF was unable to support them due to the closure of the Thai-Burma border. However, through Karen Women's Organisation, BCMF was able



*KWO staff sorting mosquito nets donated by BCMF for an IDP camp in Karen State, Burma*





*Patients and caregivers during the workshop at the BCMF- B.K. Kee Patient House*

BCMF is committed to upholding children's rights as defined by the United Nations. This includes upholding and running workshops on children's rights to protection, education, health care, shelter, and good nutrition. Workshops are held for partner organisations, school children in Burma and patients at BCMF-B.K. Kee Patient House in Chiang Mai, to help participants understand the rights of children while providing information on how they can uphold these rights and report cases. In addition to this, every year staff members, interns and volunteers participate in a refresher workshop to ensure that child rights are upheld and to provide up to date information on BCMF's child protection policy and reporting procedure.

## Child Protection & Child Right

In 2019, BCMF held 1 child protection and child rights workshop. This was due to the increased number of organisations holding similar workshops in Thailand along the border of Burma, and the incorporation of child rights into our reproductive health and rights workshops in Burma. The child protection and child rights workshop was held at BCMF-B.K. Kee Patient House. A total of **35** participants attended, composed of patients, caretakers, a Thai partner



*The workshop was facilitated by BCMF staff*

organisation's staff, as well as BCMF staff. In 2020, **8** child protection and child rights workshops in Burma and **1** in Thailand were postponed after the outbreak of COVID-19.

**"I've never attended a training [on child protection and child rights] before, and I've learned many things during the training. I will share the knowledge I gained during this training with others."** - Aye, a patient's father

**"I've learned more about child rights [today]. I already knew about some of the rights of children but now I know more, such as that child abuse can be physical and emotional."** - Thandar, a patient's mother

## Medical Supplies Delivery

Since 2012, BCMF has made a yearly delivery of medical supplies to partner clinics in Karen State, Burma. BCMF collaborates closely with them to support them through capacity building, and to reach more patients in need. As these clinics are located in remote areas of Karen State and outside of government administrated areas, they do not receive any government funding and must rely on outside support.



*BCMF staff and interns delivered medical supplies to a clinic in Karen State, Burma*

In 2019, BCMF was able to deliver much needed medical supplies to **4** remote clinics in Karen State, **1** charity clinic in Ayeyarwady Division, and **1** charity clinic in Mon State. Charity clinics rely solely on donations



*A BCMF assisted clinic in Karen State, Burma, supports 4 villages with a total population of 4,564 people*

to continue serving low-income patients. In 2020, BCMF had to postpone supporting **2** clinics in Karen State, due to the closure of the Thai-Burma border. However, with the help of Karen



*BCMF donated medical supplies to a charity clinic in Ayeyarwady Division, Burma*

Women's Organisation, BCMF was able to support a clinic in an internally displaced people camp in Karen State, serving over **335** households in the camp.



*BCMF intern assembling a 3D printed prosthetic arm*

In 2016, BCMF established the internship program to provide staff of partner organisations with experience and skills development relating to the health sector, while also providing them with information on the provision of health services and referral pathways in Burma and Thailand. Since 2018, the program also accepts applicants from migrant learning centres who are planning to work in health care organisations in their communities. The program aims to reach more people, providing access to health care in partner organisations' communities and interns' communities.

## Internship Program

During their internship, BCMF provides training in administration, computer literacy, human resources and BCMF operations, primarily patient referrals. Interns also gain hands on experience at BCMF-B.K. Kee Patient House and within Thai hospitals, in addition to participating on site during outreach projects. Upon discussion with BCMF's director, interns from partner organisations are accommodated at BCMF's intern house and receive a small stipend to cover daily expenses. BCMF occasionally



*Three BCMF interns with a villager testing her new eye glasses in Magway Division, Burma*

facilitates interns travel arrangements from partner organisations in Burma.



*BCMF intern interviews a wheelchair recipient's mother*

In 2019, BCMF hosted a total of **9** interns under the internship program, and supported the studies of **2** interns who graduated from a six-month assistant nurse training at Mawlamyine Christian Leprosy Hospital (MCLH). The certificate is recognised by the Burmese government health care system and will allow them to legally continue work in a clinic under an ethnic health care system. They will also act as a mentor to staff and interns who complete this course at MCLH in the future.



*A BCMF intern gives recipients eye glasses after their vision is screened*

In 2020, BCMF hosted a total of **4** interns under the internship program. **2** previous interns also joined BCMF's team as staff, with one promoted to 3D Project Officer, assisting the 3D printing project manager. The other intern was promoted to Administrative Assistant, supporting the Administrative and Logistics Officer. Additionally, BCMF supported the studies of **1** more intern who completing a two-year program in December 2020, called Organisational Development at Wide Horizon in Mawlamyine, Burma. Although BCMF initially planned to send **2** interns from partner organisation in Burma, to complete the nurse's assistant course at MCLH, the course was postponed due to the outbreak of COVID-19 in Burma.

Day Wah was an intern under BCMF's internship program, who graduated from the assistant nurse training course at MCLH at the beginning of 2019. Upon the completion of her studies, she returned to Ker Gaw Clinic, which is a partner of BCMF and in Karen State, Burma, to apply what she had learned during her studies.

"Before I attended the training, I was mostly only able to assist the medic in charge with changing dressings, delivering babies and minor surgeries. But now I can do all this by myself. I can now change dressings, deliver babies, complete minor surgeries, suture, administer injections and provide patients with oral medications. Also, now I understand more about different diagnoses, how to counsel patients and where patients, depending on their diagnoses, should be referred [for treatment]. I would like to learn more about common diseases so that I can become a medic. I would also like to develop the clinic [further] and provide free health care to those who are unable to afford treatment, like Mae Tao Clinic."



*Day Wah inserting an implant at Ker Gaw Clinic*



*Day Wah can now assists with the maternity program at the clinic*



According to the National Disability Survey conducted between 2008-2009, a total of 2.3% of Burma's population has some form of disability. Of this, 68.2% are persons with a physical impairment. Yet inclusiveness and accessibility are still relatively new concepts in public building planning in Burma. People with disabilities often have difficulty accessing public areas such as offices, schools, and toilets.



*The previous toilet*

*The new toilet*

Lack of accessible toilets is a barrier to education for the approximately 232,021 children who live with a disability in Burma (National Census 2014). Where most of the population uses squatting toilets, using the toilet at school tends to cause a lot of worry for children with physical disabilities (ECDC 2015). They often need a carer to help them go to the toilet or they must resort to wearing diapers and not drink any fluids. As they grow older, a lack of accessible toilets



*A ramp was also built for better access to classrooms on the ground floor*

in addition to other barriers related to physical accessibility, contributes towards lower enrolment in school for older children with disabilities (ECDC 2015).

When new a partner organisation, Golden Future, asked if BCMF could support the construction of an accessible toilet at No. 6 State High School in Lashio, Shan State, BCMF readily agreed to help. Since the school also had a lot of stairs and the pavement was uneven in front of the toilet, BCMF also funded the construction of ramps to make the school more accessible. Construction began on 12 May 2019 and finished six days before the new semester started in June. Thanks to the newly built accessible toilet and ramps, the 6 students with a physical disability can easily move around the school by themselves. During the 2020-2021 school year, an additional 4

## Accessible Toilet in a Shan School

students in wheelchairs enrolled at the school.



"In the past, I had a lot of difficulty using the toilet," said Ma Myint, a wheelchair user and student at No. 6 State High School. "I couldn't

go by myself, and my mother had to help me. If no one was available to help me, I couldn't use the toilet. I had to use a diaper and I was only able to have it changed when my mother came to the school. I also had to ask my friends to buy me snacks. Wherever I went, I needed help from other people. I couldn't do anything by myself. Since they built ramps where the stairs used to be, I can move around by myself. [Thanks to the new toilet,] I no longer need to use a diaper and my mother doesn't have to come here [to school] to help me."

## Staff Capacity Building

During the first outbreak of COVID-19 in Thailand, towards the end of April 2020, the Thai-Burma border was closed and COVID-19 restrictions in Thailand were enacted. Due to this, outreach projects in both Thailand and Burma were delayed or postponed. While waiting for restrictions to ease in Thailand, BCMF staff focused on improving their skills, knowledge and expertise to ensure BCMF programs continued to run efficiently. Staff took turns holding workshops for each other on a wide range of topics, including reviewing common BCMF patient diagnoses, a sex, gender & sexuality workshop, a review of proper wheelchair fitting and assembling, and an interview refresher training course.



*BCM staff and interns reviewed proper wheelchair fitting and assembly*



*BCM staff held a workshop for the team on sex, gender and sexuality*



*BCM intern holds a presentation on the anatomy of the eye and common eye conditions seen in BCMF patients*



*HFA staff participated in the 63<sup>rd</sup> Karen State Day in Hpa-An, raising awareness about HFA's work*

Over the years, Burma Children Medical Fund (BCMF) has increasingly expanded services in Burma while reaching more patients in need. To provide

more effective services while working with local partners, BCMF registered as a non-profit organisation in Burma in 2016 under the name of Health for All (HFA). Initially operating under a temporary license, HFA completed the registration process in August 2020. HFA now operates as a sister organisation of BCMF and is expected to grow in the coming years.

## Health For All Update

2019 saw an increase in activities conducted both independently and alongside local organisation in Burma. As part of the 63rd Karen State Day fair activities in Hpa-An, HFA collaborated with the Department of Social Welfare and other community service organisations to share their work with local organisations and visitors. During the event, HFA also provided one recipient with a wheelchair.

On 3 December 2019, International Day of People with Disabilities, HFA organised a wheelchair fitting mission in Hpa-An in collaboration with the Karen State Social Work Department. With wheelchairs and mobility carts donated by BCMF, HFA staff fitted **27** recipients with a new wheelchair and trained **3** community members to properly fit recipients with wheelchairs. In addition to this, HFA assisted BCMF with eye screening projects in



*HFA held a wheelchair fitting mission in Hpa-An on International Day of Persons with Disabilities*

Burma, and held wheelchair fitting and reproductive health and rights workshops together with BCMF in Burma.

With the outbreak of COVID-19 in Burma in March 2020, HFA faced many challenges in expanding outreach services and reaching patients in need. Despite these challenges, HFA was able to support **32** patients access to health care in Burma. HFA also ran a reproductive health and rights workshop in Magway Division with **20** male and **57** female students in February 2020.

HFA also collaborated with partner organisations to provide health education on the prevention of the new virus. HFA held a COVID-19 prevention workshop for 42 male dormitory students in Yangon, providing participants with a total of 8 large bottles of hand gel and 100 disposal face masks, donated by Burma Children Medical Fund (BCMF). However, HFA was unable to participate in the 64th Karen State Day Fair and had to postpone a training of trainers reproductive health and rights workshop for teachers in Karen State, due to the pandemic.



*HFA staff during a reproductive health and rights workshop for boys in Magway Division, Burma*



*A COVID-19 prevention workshop was held for male dormitory students in Yangon Division, Burma*

In the coming year, HFA will continue to support patients and run outreach projects to reach more patients and communities in need. Despite the challenges presented by COVID-19, HFA is planning to run reproductive health and rights workshops, child protection and child rights workshops and COVID-19 contact tracing and tracers' ethics workshops with the support of BCMF.





Daw Kon Thi



Hla Htun Tin



Kaung Set Naing



Khin Win Shwe

# BCMF Fighters



Kyaw Swar Linn



Mai Po Po Tin



Naw Hser Mu Ku



Naw Yee



Nay Thit Oo



Sai Khay Set



Saw Myo  
Khant Thu



Say Paw Htoo



U Kyaw Kyaw



Zaw Htay

## Funding Partners

BCMF is fortunate to have a significant donor base to support our work. Without their support, helping our beneficiaries would not be possible. We would like to thank every individual and organisation, that helped us make a difference in the lives of patients, families and communities.

Allied Pickfords,  
Thailand

Child's Dream Foundation,  
Thailand

Red Rocketship,  
Australia

Bazar International de Luxembourg

China California Heart Watch, United  
States of America

Rotary Australia World Community  
Service

Betula Asia Aid Foundation,  
The Netherlands

DAK Foundation,  
Australia

Rotary Club of Waneroo,  
Australia

B.K Kee Foundation,  
United States of America

Days for Girls Australia

Specsavers,  
Australia

BNHA,  
Thailand

Friendship n°4 Lodge,  
Luxembourg

Suwannimit Foundation,  
Thailand

British Women's Group,  
Thailand

Glocal Action,  
Taiwan

Watsi,  
United States of America

Brodbeck Philanthropy Foundation,  
Switzerland

Mobility Worldwide,  
United States of America

Burma Border Projects,  
United States of America

Project Love Asia Foundation,  
Singapore

Wheelchair for Kids,  
Australia

Chiang Mai International  
Rotary Club,  
Thailand

Project Win,  
Thailand

Union Aid Abroad APHEDA,  
Australia

In order to expand our reach and make sure we are connected to those in need, we partner with health centres, community organisations and non-profits in both Thailand and Burma.

## Referral Partners

Ananda Myitta Clinic,  
Burma

Bawa A Lin Yaung Clinic,  
Burma

Free Burma Ranger,  
Burma

Health For All,  
Burma

Humanity and Inclusion,  
Burma

International Rescue Committee,  
Thailand

Kachin Women's  
Organisation,  
Thailand

Karen Department of  
Health and Wealfare,  
Burma

Ker Gaw Clinic,  
Burma

Kyaung Gyi Parahita Monastery,  
Burma

Mae Sot Hospital,  
Thailand

Mae Tao Clinic,  
Thailand

Malteser International,  
Thailand

Mawlamyine Christian  
Leprosy Hospital,  
Burma

Mani Mani Clinic,  
Burma

Operation Smile  
Thailand

Pinlon Hospital,  
Burma

Pan Rak Foundation,  
Thailand

Partners Relief  
and Development,  
Thailand

Tha Song Yang Hospital,  
Thailand

# Volunteers and Interns

BCMF wants to thank all of volunteers and student interns who had dedicated their time and skills to help BCMF flourish. During their time in Mae Sot, they enrich patient interviews, staff knowledge, project execution and much more. Their enthusiasm and diverse background is an asset, supporting BCMF staff.

**Anthony Deen**  
**Haythi Ei**  
**Lydia DiStefano**  
**Nathan Buckley**  
**Naw Aye Thiri**  
**Nora Connors**  
**Saw Doh Soe Htoo**  
**Saw Myint Tun Kyi**  
**Thi Dar Soe**  
**Wai Hnin Thet**  
**Zachary Frye**  
**Naw Zai Lu Lu Bo**



*Interns assemble a wheelchair during a wheelchair fitting mission*



*Interns and a volunteer help load stationery supplies onto a truck*



*A volunteer helps staff unload newly arrived wheelchairs*



*A volunteer interviews a patient with the help of a staff*

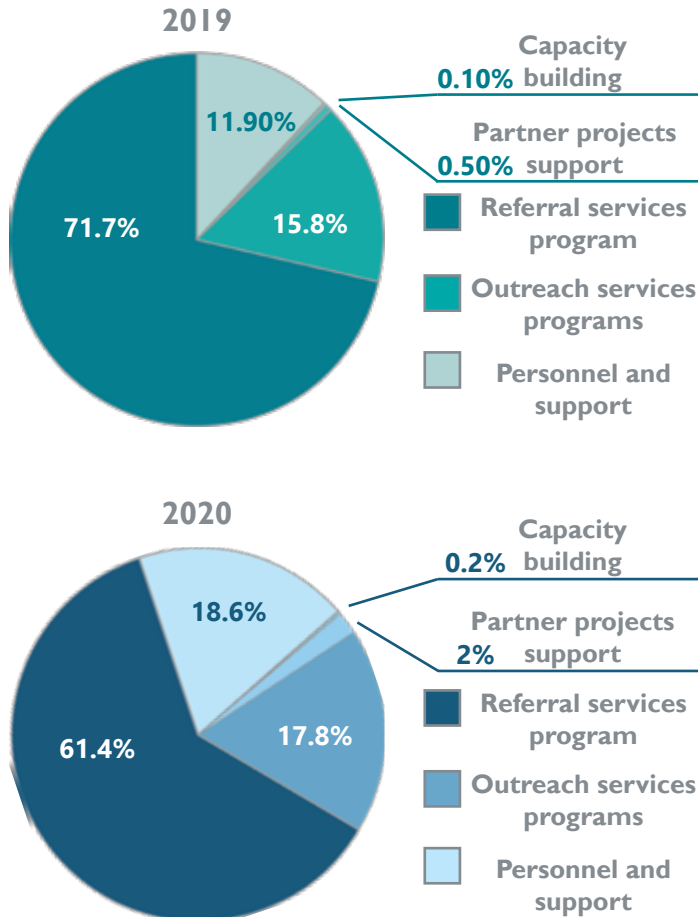


*Interns, staff and a volunteer enjoy lunch in between a reproductive health and rights workshop*

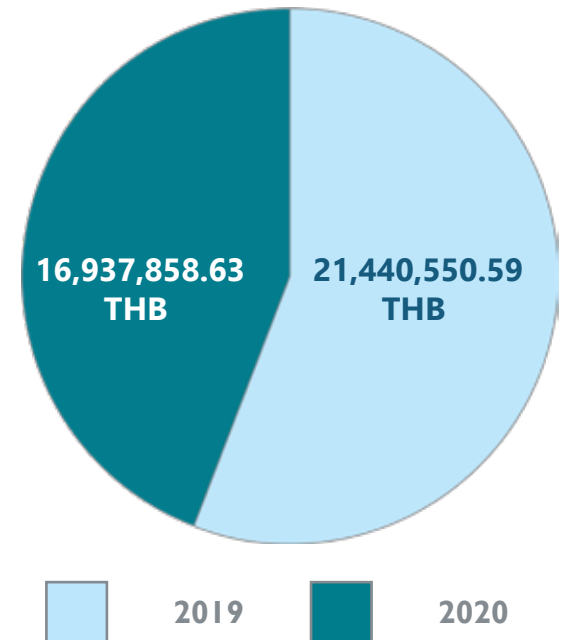


# Financial Report

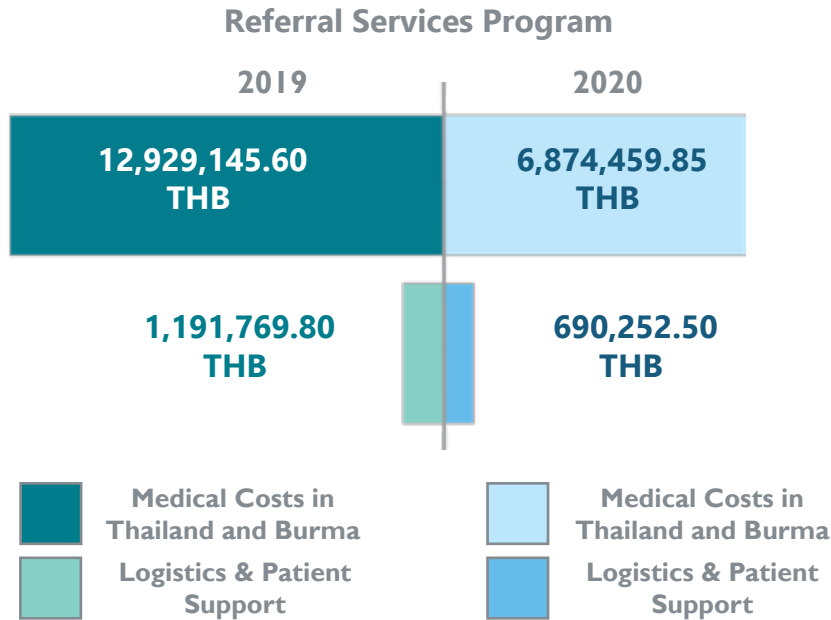
## Expenditure by Program and Year



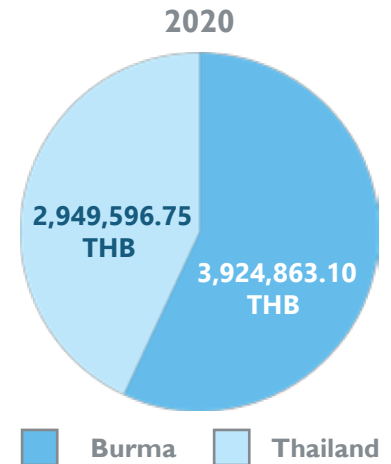
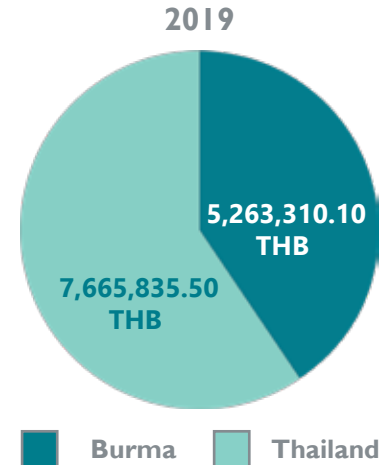
## Revenue



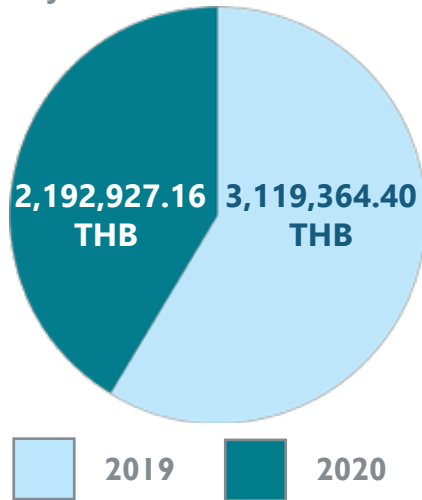
# Expenditure



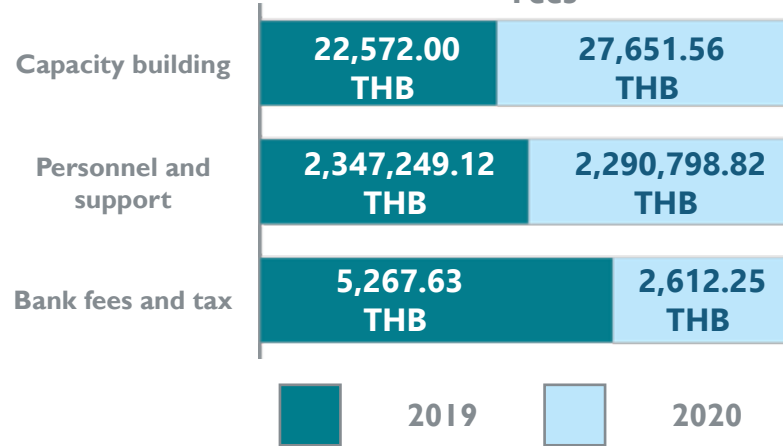
Medical Expenditure by Country and Year



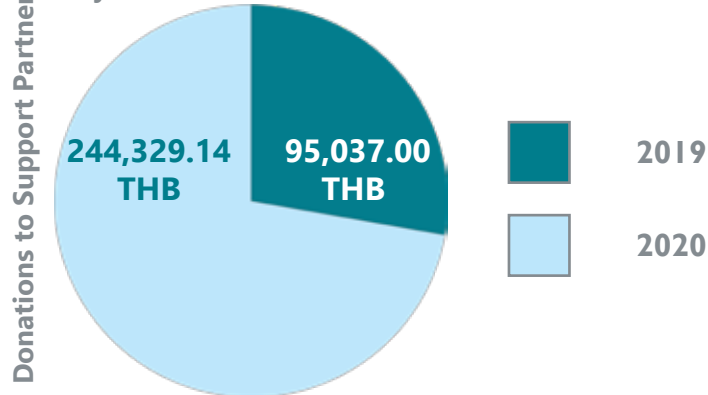
## Direct Expenditure of Outreach Projects in Thailand & Burma



## Personnel, Capacity Building & Bank Fees



## Donations to Support Partner Projects in Thailand and Burma





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