In the Bulletin of August 2011 there was an article about Cheng Rostitus. It told of how he survived during the terrible times when the Khmer Rouge were in power in Cambodia. Titus lived on the streets after his mother and father were murdered by the regime, but he found new hope when he was taken in and looked after by a Christian woman who adopted him.

Titus grew up in Poi Pet, a scruffy casino town on the Thailand-Cambodia border. He is now married with a child of his own, but he remembers very vividly the dreadful experiences of his childhood. Titus and his wife Marai have established New Hope Children’s Home, an orphanage for abandoned children aged between 3 and 16. Many of them have been rescued from the streets of Poi Pet, others have been referred to New Hope by desperate families who cannot care adequately for their children or grandchildren.

When I first met Titus in Phnom Penh in 2011, he showed me a plan of his grand vision for an orphanage. With the help of MSAVLC and Global Care, a Coventry-based Christian charity, that vision is gradually becoming a reality.

New Hope Children’s Home is situated in the village of Yeay Ort near Poi Pet, and it is home to Titus, Marai and, at present, 26 children. All the children are welcomed into a loving family environment with good food, loving care, stability, security, and with their health needs met. They attend local schools; and their uniforms, books and equipment are provided for them.

From the beginning Titus has worked hard to make the Home self-sufficient. They have established a vegetable garden with a number of fruit trees, and they rear chickens and pigs. They also have a fish farm and a large rice field, but poor weather often hampers their efforts to produce enough rice to feed all the children throughout the year.

When the Trustees last visited the Home, we saw that Titus was overseeing the construction of a rice mill, and we heard recently that the mill is now fully functioning, and they have just milled this year’s harvest.

As they mill the rice themselves New Hope Children’s Home are able to keep their whole crop of rice, as well as the by-products of the milling process, including broken rice and bran which can be used as animal feed. Previously they had to give a proportion of the good rice to the miller in payment for his services.

Moreover, they hope that they will be able to earn extra funds for the Home by milling rice for their neighbours in the village as well.
The Trustees are keen to help Titus realise his vision, and we have been funding the Home’s first aid and health needs for some years. We have also provided a solar-powered water purifier, beds, mosquito nets, blankets, nit combs, sleeping mats and storage boxes for the Home, and toys for the children.

Our appeal for sponsors for the children in the September 2015 Bulletin found sponsors for two children, and last November the Trustees agreed to support two more children from the Home.

Despite recent poor harvests New Hope Children’s Home continues to flourish and they are making steady progress towards a sustainable future. Titus and Marai still need our help to provide food, equipment and clothing for the children in their care, and to pay for their schooling.

You can help them by donating to MSAVLC, or by sponsoring a child through Global Care:


Peter Lidgard  
Chairman of the Trustees

ETHELIC MINORITY DOCTORS’ TRAINING

Earlier this year HEDO, the Highland Education Development Organisation, approached the Trustees for funding for an obstetrics course for trainee doctors at Thai Binh, Medical University in Vietnam.

The general training course for doctors was established by HEDO six years ago, to train doctors who originated from ethnic minority areas in Vietnam’s Northern Highlands. The area suffers from a permanent shortage of trained doctors, and the hope is that, once qualified, the doctors will return to work in their home provinces.

HEDO became aware that there was a need for these doctors to be trained in obstetrics, because so many pregnant mothers were unwilling, or unable to travel to their district hospital to give birth.

The course went ahead in June this year and the Trustees have recently received a final report from the Vice-Provost, Professor Dr Nguyen Duy Cuong. He writes:

“The training was organized successfully at Thai Binh University of Medicine and Pharmacy over 10 days, under the teaching and supervision of experienced teachers belonging to the Department of Obstetrics. It included teachers who had good experience working in the ethnic minority mountainous areas.

The training was carried out as follows:
1. Time of the training:  
   10 days from June 16th 2016 to June 20th 2016.
2. Content:  
   18 lessons covering the overall content of Reproductive Health. These lessons, added to their general training, will enable the students to graduate with a more comprehensive knowledge than midwives and nurses. This will help the HEDO-trained general doctors to return to the isolated, remote mountainous areas, to assist with the training on reproductive health for traditional midwives.

The content included 18 lessons, as follows:
1. Pregnancy registration and administration at commune and village levels.
2. Pregnancy diagnosis.
4. Practice of pregnancy hygiene.
5. Preparation for delivery.
6. Supervision of the beginning of labour and dealing with problems.
7. Dangerous incidents, such as breech presentation, pre-eclampsia, etc.
8. Normal and abnormal deliveries.
9. Preparation for deliveries at home, in the fields, and in the forests.
10. Helping to ensure safe deliveries for ethnic minority mothers and babies.
11. Dealing with foetal asphyxia.
12. Observation of mothers and babies after delivery.
15. Breast feeding.
16. Feeding when mothers do not have
sufficient milk.
Caring for infants and pre-school children.
Consultations for reproductive health and abortion.
Family planning.

3 Teaching Plan:
The University nominated the Obstetric Department of the hospital to carry out the training, and the Department nominated five experienced lecturers to teach lessons about reproductive health which were agreed upon by the University and HEDO. The lectures combined theory and practice, using teaching aids and models during the teaching process. After learning the theory, students also practised with the models under the supervision of teachers. The teachers also allowed students to visit and practise their skills at the University Hospital Department of Obstetrics.

4 The Students:
At the end of the training, students of class Y6 said that the 18 lessons about reproductive health would help them after their graduation, when returning to their localities: not only dealing with ethnic minority mothers giving birth at home or in the fields, but also holding training courses for traditional midwives in the localities where they will be working.

During the 10 days it was summer time and very hot, but with fans and air-conditioning, enthusiasm and interest was maintained.
Important and useful lessons were given by the teachers, and the students were very studious and hard-working. There were 51 excellent learners, 9 good learners, and no average or weak learners.

Following the course, the students went to do internships in Hai Duong, Hung Yen, Nam Dinh, Ninh Binh and Thai Binh Provinces, where they will learn a lot more.
The departments of obstetrics in provincial and district hospitals will consolidate and improve their knowledge about reproductive health. Students also have the chance to practice in their community, to become familiar with the lower level of the healthcare system and gain the practical knowledge to work in the ethnic minority mountainous areas. They will help ethnic minority mothers give birth safely, protecting the population in poor areas and difficult terrains.”

The ethnic minority doctors’ training course in obstetrics is another successful venture organised by HEDO and funded by MSAVLC. We wish all the students success in their chosen profession.

DISABILITY DEVELOPMENT SERVICES PROGRAM (DDSP), PURSAT, CAMBODIA

The second part of the Trustees’ visits to clients in 2015

Another hot day, and we were picked up early from our hotel by Buntha and Chandoen, the physiotherapists from DDSP. This time, taking no chances on us becoming dehydrated, they had a large icebox in the back of the vehicle filled with ice and bottles of water, enough for the whole day.

VISIT 1:
It was a long journey to see the first client of the day, a 19 year old paraplegic girl, Kim Keu, who was injured in a playground accident as a young child. Kim had a small amount of sensation in her legs and feet, but needed physiotherapy three times a day, which Buntha has shown the family how to do. She has pressure sores, which, over time have become a real problem. The family has to give her massage regularly throughout the day to help improve her circulation.
DDSP have provided a mattress and a pressure ring for night time to help her sleep comfortably. Kim also suffers from constipation and respiratory problems and has to have a regular exercise regime to help deal with these problems. As she is an only child the family can concentrate their care on her.

Kim is a shy, beautiful young girl and she is able to earn $2 per day by selling lottery tickets to people in the village. DDSP have also provided pigs for the family, which she helps to feed, thereby contributing to family life.

VISIT 2:
After leaving Kim we had another long journey to visit Oeurn Chandy, a 31 year old paraplegic. Oeurn was taken ill with a fever and admitted to hospital, but she was left with no use of her legs. No one is sure exactly what caused the problem, but it was thought that it might be polio-related. She stayed with her mother when leaving the hospital, she didn’t want to see anyone, and became very depressed. The young men of the village kept pestering her and she felt in danger.
DDSP stepped in and she was given counselling, which improved her self-esteem. They provided physiotherapy, and gave her a sewing machine, so that she could earn a small
Spending on Charitable Work

You may have read recently of the criticism of some charities highlighted in a report by the Charity Commission. According to the report, many well-known charities including The British Heart Foundation, Sue Ryder and Age UK, spend less than half of the money donated to them on charitable work. The rest goes on administration, big fund-raising campaigns and huge salaries for their Chief Executives.

That is not the case at MSA VLC. The charity is still run entirely by volunteers from our own homes. And, if you look at our page on the Charity Commission’s website you will see that, apart from the money spent on printing and posting our Bulletins, only £470 was spent on running the charity last year.

So, for every pound which you donate, over 98 pence goes to our projects in South-East Asia!

Lynn Firth
Trustee

VISIT 3:

Another long dusty, hot journey to visit Kimly Soun, a 46 year old paraplegic. Kimly was involved in a motorbike accident in 2004. Initially when leaving hospital, he could only move his fingers, but treatment from DDSP and a spinal injuries clinic gradually improved his movement. Unfortunately the government stopped the outreach service from the clinic and he now relies solely on DDSP. He was offered a wheelchair, but refused it because he wanted to start walking again, and he now gets about with the help of a walking frame. His wife works, buying and selling in the market to help raise money to keep the family. DDSP have put in a latrine, funded pig and chicken rearing and provided money to start up his wife’s market trading. Kimly helps her by preparing vegetables to sell.

Friends rallied round after his accident and raised the money for his sons’ education. We noticed that their water filter was broken, so they have had to buy large bottles of drinking water or boil water from the pond.

They appeared to be a close-knit family with many family members living together. We stayed for a while to enjoy some wonderful small bananas that they shared with us. Buntha or Chandoen visit at least once a month, taking a fresh supply of catheters and gloves, and giving the family much-needed support.

It was a long day, mostly spent travelling the long distances between clients. We have so much admiration for Samnang and his team, because without them these people would not be able to survive. It is because of the dedication of Buntha and Chandoen that their clients are able to support their families and maintain some self-respect. It was very humbling to accompany them on their visits and we would like to thank Samnang and his team for sharing the visits with us.

The Trustees have now received a report from DDSP and a proposal to help cover the next two years’ work. The proposal is for the ‘Paraplegic and Quadriplegic Rehabilitation (PQR) Project’:

“The aim is to enable paraplegics, quadriplegics and serious amputees to have adequate health, nutrition and hygiene; access rehabilitation services; and provide socio-economic support through income generation activities such as shops, crafts and animal-raising, and socialization of disabled people and their family members. The project covers Pursat Province and directly benefits 92 clients and their family members. The project is requested to maintain paraplegics and quadriplegics for another two years from July 2016 to June 2018”. Pheng Samnang-Director

MSAVLC hopes to be able to fund the excellent work done by DDSP well into the future.

Lynn Firth
Trustee