



**MEDACROSS**  
FREE CARE AND COACHING



# 2020 ACTIVITIES REPORT



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## LETTER FROM THE PRESIDENT

Daniele Regge, Head of the Radiology department of Istituto di Candiolo IRCCS, Radiology professor at University of Turin

2020 was not an easy year for Myanmar's population who was unprepared for the first major epidemic of the new millennium. Even if the official numbers do not say it, Myanmar was one of the countries most affected by Covid-19 and the health system badly withstood the impact. From the first weeks, MedAcross intervened in the Tanintharyi region by distributing 17,000 anti-Covid 19 kits and providing masks to the quarantine centres scattered in the villages on the border with Thailand. As anticipated last year, thanks to the generous contribution of the La Stampa Specchio dei Tempi Foundation, our Mobile Clinic reached the islands of the Andaman archipelago, bringing free treatment to an area where there are no health facilities. In total, between fixed and mobile clinics, despite a slight decline in activity due to the pandemic,

more than 8,000 patients were treated and nearly 15,000 packs of medicine were distributed.

Among all MedAcross projects, I would like to share with you the one that supports the Kawthaung community of HIV + people, to whom we provide counselling and nutritional support services, an activity conducted together with the Sisters of the RNDM Order, our long term local partner. This year I would like to conclude with a thanking all our donors, because without them MedAcross would not be able to offer its beating heart to the people of Myanmar.





**«IF THERE IS A PERSON WHO  
IS SICK AND NEEDS HELP, I AM  
A DOCTOR, I CAN HELP  
THEREFORE I WILL DO MY  
BEST.»**

**Gabriella Buono, Head of  
Anesthesiology and Intensive Care at  
Mauriziano hospital,  
MedAcross Onlus Vice President and  
Head of clinical activity**

# WHO WE ARE

MedAcross was born in **2016** from the will of a group of friends from Turin to use their professional skills to help create a more equitable world, in which **health is a fundamental right of every man**, regardless of political, ideological or religious orientation.

We chose the name MedAcross precisely because we believe that every person in the world has the right to be healthy and that this cannot be limited by social or economic possibilities. This is why our doctors **across** countries, continents and cultures in order to guarantee basic health care for all.

The **cooperation** model applied by MedAcross is focused on the constant dialogue with stakeholders and with the local communities with which the projects are implemented.

Although MedAcross' area of intervention focuses on healthcare, we firmly believe that medical safety is one of the many components necessary to ensure the well-being of individuals. This is why we collaborate with local and international institutions, in order to create **sustainable projects** and share strategies and knowledge with the local population in order to promote changes.





# TURIN MYANMAR

## Three hundred years of friendship.

Relations between Italy and Myanmar have a long history: from the Barnabite religious, who worked in Myanmar in the eighteenth century, to the Congregation of the Oblates of the Virgin Mary who left Piedmont to reach this distant land in the early nineteenth century.

Among the Italians who worked in the Burma, the figure of the Cuneo-based **Father Paolo Abbona** deserves to be mentioned, whom the Burmese scholar Vivian Ba de fi ned “**the greatest and most Burmanized of the Oblates of Turin**”.

As a missionary, Father Abbona had built schools, hospitals, churches; he was also an able diplomatic managing relationship between the English and the Burmese court.

In the economic field, Father Abbona prepared the Treaty of Commerce and Friendship between the Kingdom of Italy and the Burmese Empire.

The recent establishment of the **Italy Myanmar Business Council** and the **Italy-Myanmar Chamber of Commerce** strengthens the cultural and economic link between the countries.

# HOW WE ACT



**We provide free medical examinations and medicines** to patients who are treated in our facilities.

We operate in contexts where the 70% of healthcare costs are out of pocket expenses, preventing access to basic care for the poorest population.



**We reach communities** living in the most isolated areas that cannot go to hospitals for logistical and economic reasons.



**We treat anyone who needs help,** regardless of age, gender, religion, etc.

We guarantee confidentiality to our patients and help them manage social stigma in the case of socially not accepted diseases.



**We hire local staff,** training them with training and courses designed by medical professors and volunteer nurses. In this way, we contribute to the development of the country in which we operate.



**We create partnerships** with local and international organizations operating locally, to maximize the impact of our work.





# WHY MYANMAR

**Myanmar is among the 60 least developed countries in the world**, with the lowest life expectancy among Southeast Asian countries.

From the second half of the twentieth century until 2000, the country experienced one of the longest periods of closure in contemporary history, with high levels of **malnutrition** and **maternal-infant mortality**.

Currently **32%** of the Burmese population lives **below the poverty line**; of these most (84%) live in rural areas of the country.

The **out of pocket costs of healthcare** are at 74% ( including examinations, consumables, drugs and some visits are entirely paid).

In **rural areas there are no hospitals**, but small health facilities managed almost exclusively by midwives who do not have extensive medical skills.

In **Kawthaung**, the district where we operate, the cost to reach the hospital from the villages is equivalent to 1/3 of the monthly salary (excluding medical expenses).



# 2020'S ACTIVITIES

**FEBRUARY:** Activation of the **Boat Clinic** to reach patients who live in the Andaman archipelago very far from hospitals.

**MARCH:** MedAcross doctors prepare a **Covid19 safety plan**, with rules for the treatment of patients for the Basic Health Clinic and the Mobile Clinic.

**APRIL: Prevention education activities against Covid19** with the distribution of information materials.

**Donation of 25,000 surgical masks** to the quarantine centers of the villages, lacking health personnel and PPEs.

**MAY: Donation of 17,000 anti Covid19 kits** for families with economic fragility, who live in rural villages and islands.

**SEPTEMBER:** Participation in the Sustainable Development Festival with the **digital conference** "Terra, Salute e Potere".

**DECEMBER:** Expansion of **support for HIV + patients** thanks to donor contributions during Giving Tuesday.

**8334 PATIENTS VISITED IN 2020**  
**14500 MEDICINES DISTRIBUTED**  
**IN A YEAR**

# FOCUS: BOAT CLINIC

The **Andaman archipelago** is an extensive group of islands between India and Myanmar where live the **Moken** community, also known as the "sea nomads" because they traditionally lived in their boats, reaching the islands only for trade or in case of storms.

These **islands have no health facilities** and are generally reached by midwives who help pregnant women during delivery and monitor newborns.



With the support of **La Stampa-Specchio dei Tempi** Foundation, we have extended the Mobile Clinic project to reach **3500 inhabitants of the islands** bordering the southern coast of Myanmar.

To reach the island, our health staff travels a 2-hour drive and half an hour by boat, bringing medical equipment and drugs that are distributed free to patients.

We visit patients on the islands once a month, excluding the rainy season when it is impossible to dock safely.

The patients we have helped so far are elderly Moken, injured fishermen and children who have never received a medical visit before.



# FOCUS: CORONA VIRUS

On January 30, 2020, the World Health Organization declared that the **Covid19** epidemic was a **global emergency**, which quickly became a pandemic.

In Myanmar, the first cases of Covid19 has been reported in April, the most difficult areas were the capital and the border.

The **rural areas** of the country **do not have intensive care** and the quarantine centers are lacking in PPE, medical personnel and tampons for Covid19.



MedAcross health staff activated **Covid19 protocols** immediately, to be able to guarantee health care assistance for the most disadvantaged population limiting the risk of spreading the virus.

From April 2020, the Mobile Clinic activities were followed by specific missions in the villages where MedAcross staff activated **awareness campaigns on the pandemic**, informing the population on good practices to limit the spread of Covid19 and on the actions to be taken in case of contagion .

We have distributed **17000 anti Covid19 kits** to families with financial difficulties in the Kawthaung district.

We have supported remote village quarantine centers by providing **25000 surgical masks and sanitizing gel** for volunteers and patients.



# BASIC HEALTH CLINIC

MedAcross is present in the city of Kawthaung, which has a population of 116,980 people.

We provide free medical examinations and medicines to **450 patients per month** (monthly average) who cannot afford the costs of health care.

The clinic is managed by 1 doctor and 2 nurses who carry out medical check-ups on a monthly basis for all the patients. In the case of complex health problems, the costs of specialist patient examinations are managed.

MedAcross works in close contact with the Kawthaung public hospital, where the most serious patients are referred, we bear the cost of treatment that is economically unsustainable for the patients.

In 2020, the MedAcross clinic treated 5,282 patients, implementing a Covid19 security protocol with the help of Italian doctors on pandemic management.

BASIC HEALTH CARE COST: 24.177€

SPONSOR: Individual donors and La Stampa Specchio dei Tempi Foundation



# MOBILE CLINIC

The Mobile Clinic is a project active since 2017 that allows 25,000 people, living in the rural areas of the district, to access constant and free healthcare.

Every month we reach **10 villages** between oil palm plantations and in the Andaman islands with a pick-up and a boat to visit about 80 patients per day.

The villages where we carry out medical services are distant up to 10 to 150 km from the city hospital. **The mobile clinic reaches every village on a monthly basis**, organizing medical visits and distributing the necessary medicines.

During the Covid19 emergency, we carried out safety visits, informing the population with prevention programs and distributing PPE for the population.

MOBILE CLINIC COSTS: 113.708€

SPONSORS: La Stampa Specchio dei Tempi Foundation and Unione Buddhista Italiana



# HIV+ PROGRAM

More than **240,000 people** with AIDS live in Myanmar and many more are HIV positive. Kawthaung city is home to many HIV-positive people. This depends on the proximity to the Thai border where there is a high rate of sexual exploitation.

Many Burmese girls and boys are attracted to the possibility of getting paid work in Thai factories, while actually entering sex trafficking, with a high chance of contracting HIV.

HIV-positive people in Kawthaung suffer from a great **social stigma** that limits their chances of finding work.

MedAcross helps HIV-positive patients by supporting their healthcare, providing counselling services and nutritional support for 30 extremely poor families who lack access to the nutritious food and water essential to their health.

PROJECT COSTS: 4.800€

SUPPORTERS: Individual donors



# VOICES FROM THE PROJECT

## ERIKA VITALE



2020 began with the expansion of Mobile Clinic missions to the villages and islands of Kawthaung district in southern Myanmar, where MedAcross works with a formidable group of highly motivated Burmese doctors and nurses. My job is to coordinate local staff and maintain relations with Burmese and Italian institutions, for this trip from Turin to Kawthaung every two months. **Covid19 imposed on us a quick internal reorganization**, as it was impossible for me to reach the local staff. It was not very complicated: since we started operating in Myanmar I have always motivated doctors and operators to have a **pro-active attitude** in organizing activities. By reorganizing ourselves with **online meetings and weekly reports**, we have adapted the Basic Health and the Mobile Clinic to manage the pandemic in advance since March, when cases in Myanmar were still isolated and imported. The experience of the Italian doctors was fundamental to immediately adapt prevention strategies. I am proud of the Burmese medical staff, they have been able to face an unexpected situation by providing timely and adaptable solutions to the intervention context.

# ETHIC COMMUNICATION

## MYANMAR



On 5 October 2020 we participated in the Sustainable Development Festival by organizing a digital conference entitled "**Terra, Salute e Potere**" that probes the complicated Burmese relations between politics, land use and the related consequences on the health of the rural population.

To talk about these complex topics we invited **prof. Ferruccio Nano**, expert in geopolitics and geoeconomics, to talk about the phenomenon of land grabbing in Myanmar that has affected the tropical forests and border areas of the country for 3 million hectares in recent decades. The conference presented the main land-grabbing strategies and the reasons why governments of countries in the South of the world often favour this practice, to the detriment of food production for local populations (rice, legumes).

**Dr. Stefano Rogliatti**, journalist and director, presented his experience in the direction of the documentary Rice To Love in which he investigated the consequences of land grabbing for rice cultivation on the most economically fragile population.

Finally, **Dr. Erika Vitale**, country manager of the health project in Myanmar for MedAcross, reported on her five-year experience in managing the health needs of the Burmese population living in rural areas. The Mobile Clinic project is a concrete answer for millions of people who work for \$3 a day in the oil palm or rubber plantations of southern Myanmar far from any health service.