

NGO Directory (Thailand) 2005

Foundation for Education and Development for Namkham-Kwangthon Village	BanNamkham-Mai, Moo 13, Namkham Subdistrict, Suwannaphum District,	Roi Et	Mr.Ammuay sheuSraKu	043-581-119	
Foundation for Disabled People Development	6 Tedsaban 12 Rd., Buayai Hospital, Buayai District,	NakhonRatchasima	Mrs.Patcharaporn Chonpanoprag	01-073-1864	
HatYai Thai Medical Association	13 Sumpnan Pattana Rd., HatYai Subdistrict, HatYai District	Songkhla	Mr.Nattapong Sangkhakun	074-258-520	
Chiangmai Health Volunteer Foundation	Chiangmai Provincial Health Office,Muang District,	ChiangMai	Mrs.Pimprapa Krityapichatkul	053-211-048-50	
NGO Coordinating Committee on Development	403 3th Fl.,Mos Bld., Soi Rohitsook, PracharatbBumphen 3 Rd., HuaiKwang District,	Bangkok		02-691-1216	ngocod@thai.com
NGO Coordinating Committee on Rural Development in the Lower North and Central Region	77/286-7 Panom Land and House Village, Moo 2 ,Panomsarakham Subdistrict, Panomsarakham District,	Chachoengsao	Mr.Kasem Petchmatee	038-553-328, 01- 781-0091	panomland@hotmail.com
Faculty of Architecture and Planning	Fac.of Engineering Bld., Thammasart University,RangSit Campus	Bangkok	Prof. Dr.Vimolsiddhi Horoyangkura	02-986-9605#111	info@arch.tu.ac.th, homepage: www.arch.tu.ac.th
Office of the National Human Rights Commission of Thailand	422 Phayathai Rd., Patumwan	Bangkok	Miss.Nujaree	02-217-2973	
Mun River Wetland Recovery Project	53/1 SraBoran Rd.,NaiMuang Subdistrict, Muang District,	Surin	Miss.Pranee Makanan	044-530019	tammoon_kcm@hotmail.com
Green World Foundation	394/46-48 Maharaj Rd., Pranakhon District,	Bangkok	Ms.Nittaya Wongsawat	02-622-2250-2	gwff@internetsksc.th.com, homepage: www.greenworld.or.th
Anti Air Pollution & Environmental Protection Foundation	577 PrachaUthid Rd., SamsenNork Subdistrict, HuaiKwang District,	Bangkok	Mr.Bhichi Rattakul	02-691-1571-4	antiair_g@yahoo.com
Development of Environment and Energy Foundation	12/9 AV Bld., 3th A Fl., ThedsabanSongkhro Rd.,LadYao, Chatuchuk	Bangkok	Ms.Priyaporn Chanthawong	02-580-6242-3	dee2@asianet.co.th, homepage: www.dee.or.th
Energy and Environment Conservation Foundation	25/53 Thivaphun Bld., Rattanathibeth Rd., Bangkrasor, Muang Dist.	Nonthaburi	Chanpitt Thiwaphan	02-969-9971-2	e21cgw@yahoo.com
Chum Chon Thai Foundation	2044/18 NewPetchaburi Rd, HuaiKwang, BKK. 10310	Bangkok	Mrs.Preeda Khongpan	02-716-5611	
The Environmental Engineering Association of Thailand	122/4 Soi Raevadee, Praram 6 Rd., BKK. 10400	Bangkok	Ms.Pranee Pantumsinchai	02-617-1530-1	info@eeat.or.th, homepage: www.eeat.or.th
Thai association of landscape architects (tala)	803/13 Soi Tararom 2,Sukhumvit 55 Rd., (ThongLor), Klongtan, Wattana,	Bangkok	Tidamad Thibdee	02-255-7549	
National Municipal League of Thailand	13/8 BorromRatchchonnee Rd., Chimplee Subdistrict, Talingchan District,	Bangkok	Dr.Phaitoon Bunyawat	02-448-5645	contact@ nmt.or.th, homepage: www.nmt.or.th
Thailand Environment Institute (TEI)	16/151 MuangthongThani ,Born-Street Rd., BangPud Subdistrict, Pakkred District,	Nonthaburi	Mr.Niti Yoddammern	02-503-3333#411	niti@ tei.or.th
Community Organizations Development Institute (Public Organization)	2044/28-33 NewPetchburi Rd., HuaiKwang,	Bangkok	Mr.Prayong Upasen	01-371-5710	prayong@codi.or.th
Kongthaptham Foundation Boonniyom Institute	65/45 Soi Nawamin 44, Nawamin Rd., Buengkhum District,	Bangkok	Thamrong Sangsuriyajan	02-733-6063	customerservice@montri.co.th

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Dharma Santi Foundation	67/1 Soi Prasartsin, Nawamin Rd., Klongkhum Subdistrict, Buengkhum District,	Bangkok	Supanee Burapark	02-374-5230	Thattha2520@yahoo.com
Education Development Center for Women and Community	186 Moo 4, Viangtangkhum Subdistrict, Maesai District,	ChiangRai	Mr.Sompop Jantraka	053-733-186,732-168	
Youth Network for Development, BanPong	83 Moo 4, HangDong-Samerng Rd., BanPong Subdistrict, HangDong District,	ChiangMai	Mr.Songkran Yadang	053-365-051, 01-022-9960	monkarw@hotmail.com
Conserve and Development Phrom River Project (Phrom Co-op 7) (Agriculture Co-op for Phrom River)	60 Moo9, Ban JumpaThong, Nongthum Subdistrict, Phukiew District,	Chaiyaphum	Mr.Swat Charatsaeng	09-848-5422	
The Foundation of Education for Life and Society	47 Paholyothin Golf Village, Paholyothin Rd., 19/1 LadYao,	Bangkok	Ms.Yenrudee Wongbuda	02-513-3038	els1970@hotmail.com, homepage: www.fels@webfels.org
Parent - Youth Network for Educational Reform	51 Moo 17, Bangna-Trat Kilometer 10, Bangplee,	SamutPrakan	Lt.Col.Dr.Kamol pan Cheewapansri	02-763-7778-9	ch_kamolpan@hotmail.com
Non-Government Organization Co-ordinating Center of Phatthalung Province	Office of Social Development and Human Security,	Phatthalung	Lieutenant Colonel, Jeur Julianantho	074-626-692	
Ban Phraekha Weaving Group	91 Moo 2, PhraekHa Subdistrict, Kuankhanoon District,	Phatthalung	Mrs.BoonAue Supapornhemin	074-643-222-3	
Thaisamakkee Tambon Administration Organization	Moo 1 Thaisamakkee Subdistrict, Wangnamkeaw District,	NakhonRatchasima	Ms.Rinda Prabkhunburee	01-067-5730	
Conserve Source of Moon River Group	175 Moo4, Thaisamakkee Subdistrict, Wangnamkeaw District,	NakhonRatchasima	Mr.Somboon Singking	09-285-3044	
Project for Ecological Awareness Building (EAB)	99/44 Soi 13 Rasda Rd., Thaplieng Subdistrict, Muang District,	Trang	Ms.Sayamol Kaiyoorawong	075-216-748	eabrang@yahoo.com
Goodwill Group Foundation	51/2 Soi Ruamruedee, Ruamruedee Bld.3, Plermchit Rd., Lumpinee Subdistrict, Patumwan District,	Bangkok	Sarochinee Unyawachsomrit	02-255-4172	Beer@goodwillbangkok.com
Council of Patient Group from Working and Environmental in Thailand	70/53 Moo 2 Soi Saithong, Tiwanon 45, Thasai Subdistrict, Muang District,	Nonthaburi	Mr.Somboon Srikumdokkea	02-951-3037	WEPT_somboon@hotmail.com
Women's Health Advocacy Foundation	12/22 ThedsabanSongkror, LadYao Subdistrict, Chatchak District,	Bangkok	Nattaya Boonpakdee	02-591-1224-5	nattaya@whaf.or.th, homepage: www.whaf.or.th
The Inter-department of Environmental Science	254 Phyathai Rd., WangMai Subdistrict, Patumwan District,	Bangkok	Asst.Prof.Charnwit Kositanont	02-218-7666	Charnwit@chula.ac.th
Sustainable Development Foundation	86 Ladproud Rd., WangthongLang Subdistrict, Wangthonglang District,	Bangkok	Rayvadee Prasertcharoensuk	02-935-2983-4	preecha@mazart.irent.co.th, homepage: www.sdfthai.org
The Wild Animal Rescue Foundation of Thailand	65/1 Sukhumvit 55 Rd., KlongtanNeur Subdistrict, Wattana District,	Bangkok	Mrs.Pornpen Phayakkaporn	02-712-9515	war@warthai.org, homepage: www.warthai.org
Environmental Department	99 MirMaitree Rd., Dindang Subdistrict, Dindang District,	Bangkok	Mr.Sarinporn Leemanarounguang	02-246-0341	homepage: www.bma.go.th/anmd
The Co-ordination center for natural resources & Environment management (CNEM)	39/1 Moo 1 Pong-BanHae Rd., Ooy Subdistrict, Pong District,	Phayao	Ms.Phakphing Bruns	06-186--0848	Pakpingchalad@yahoo.com

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Love Huai-Keaw Group	19 Moo 6, Ratanaburi Subdistrict, Ratanaburi District,	Surin	Mr. Narin Purmtong	044-599-108	
Bureau of Public Participatory Promotion	49 Rama VI Rd., Soi 30, Phayathai District,	Bangkok	Mrs. Rachanee Emaruchi	02-298-5625	emaruchi@deqp.go.th
Department of Public Relation	9 Soi AreeSumphun Paholyothin Rd., SamsenNai Subdistrict, Phayathai District,	Bangkok	Mr. Anunsak Booncruepun	01-930-9243, 01-420-3954	WEBTA@hotmail.com
Thailand Collaborative Country Support Program, Regional Community forestry training centre	Kasetsart University, Chatuchak,	Bangkok	Ms. Somying Soontornwong	02-940-5700 Ext. 1228	osyst@KU.ac.th, homepage: www.ThaiCF.org
Western complese forest conservation committee	16/37 Sawanvithi Rd., Muang District,	NakhonSawan	Adisak Chantaichanuwong	09-960-2577	
Media Link Group	49 Klongchan Subdistrict, Bangkrapi District,	Bangkok	Mr. Sorathon Sriphen	02-377-5436	Sorathon.s@chaiyo.com
SamRong Ruamjai Foundation	1614/51-53 Kayha-chumchon Samut Prakan, Sukhumvit Kilometr 30Rd., BangPooMai Subdistrict, Muang District,	SamutPrakan	Mrs. Junpen Phani	02-702-0814	

分担報告書 2

分担研究報告書

国際機関・各国政府・各国非政府機関との連携・情報共有システムに関する研究

分担研究者 木ノ上高章 東海大学医学部基盤診療学系講師

分担研究者 岡崎 勲 東海大学医学部基盤診療学系教授

分担研究者 渡辺 良久 東海大学医学部基盤診療学系客員講師

研究要旨 各国における、感染症情報の集約、情報伝達のあり方や、参画する団体等について涉猟し問題点を議論するために、「21世紀保健指導者養成コース」において、各国研修員に「感染症情報共有のための国際機関、政府機関、非政府機関ネットワークのあり方」について発表してもらった。国内の情報ルートの統一や連携、NGOを含む民間セクターを含めた情報の集約の必要性や、また、関連する通信手段や末梢までの情報の伝達および透明性の必要性が指摘された。

A. 目的

各国の感染症情報は昨年の報告でもわかるように各国の事情背景に応じた構成で中央に集約され、施策に利用されるが、先進国もさることながら、特に途上国においてはその連携が必ずしも充実していない。また現在、政治体制の如何を問わず、民間部門が発達し、程度の差はあるが非政府期間の活動が国民生活のあらゆる分野に浸透してきている。厚生労働科学のテーマに基づき、例年開催する「21世紀保健指導者養成コース」において各国実情および問題点を提示してもらい、解決策を模索する。

B. 方法

われわれが、毎年開催してきている「21世紀保健指導者養成コース」において、本研究事業のテーマである「感染症情報共有のための国際機関、政府機関、非政府機関ネットワークのあり方」について、興味関心のある、関連するポジションに在位の行政官を中心に選抜した。5週間の政策立案に関連する諸講義・討論・実習の後、国際シンポジウムにおいて彼らの持ち寄った各国における実情と問題点を発表してもらい、討論した。

C. 結果

今年度の参加研修員はアジアから12名となった。参加国は、パキスタン、インド、バングラデシュ、ミャンマー、インドネシア、タイ、ラオス、マレーシア、フィリピンである（プログラムおよび会議プロシーディングを資料欄に添付した）。

基調講演としてラオス国立公衆衛生院院長（当該研修コース2001年修了生）ブンニョン・ブッパ氏に”Role of International Organization, Government and NGOs on Information Sharing of Infectious Diseases in Laos.”（ラオスにおける感染症情報共有での国際機関、政府機関、非政府機関の役割）をお願いした。ラオスにおいてSARSは幸いに発生しなかったこと、鳥インフルエンザに対して政府主導のNGOを含めた関連セクターのネットワーク作りを行っていることなどが報告された。

サンサン氏（ミャンマー）からは、「感染症情報のしかるべきときの完全な情報」に難があること、国のシステムにおいては、特に現在都市部で広がりを見せている民間部門の情報渉猟が難しいこと、末梢組織への情報伝達にインフラストラクチャーの面でも困難が伴うことが示され、氏のE-HEALTHネットワーク構想が提示された。

コランダースワミ氏（インドタミールナドゥ州）

は、国内の報告様式の不統一、各セクターごとの報告ルートなどにより時としてデータの重複が起こるために不正確となること、今後の展望としてディストリクトを中心にすえたIT化を含めた情報ルートの整備と、検査機関機能の充実、アウトブレイクの際のレスポンス調査機能の向上を提示した。イスラム氏（バングラデシュ）からも同様の発表があった。

コラソン・イグナチオ氏（フィリピン）は、SARSのカナダからの輸入ケースに対するフィリピンの対応を5つのポイントにまとめ患者の死亡は二人起こってしまったが波及影響を最小限にとどめられたとし、これがこれからの鳥インフルエンザやそれ以外の蔓延する感染症対策にも応用できるとした。

タイのオラヌート氏は国内の鳥インフルエンザのアウトブレイクの経験から、中央から末梢にいたるまでのあらゆるレベルでの知識の普及と、情報の開示、NGOとの共同、関係者の積極的参加などが重要であるとした。

その他、各国で発生するニパウイルス脳炎、ポリオ、鳥インフルエンザ、デング熱などのアウトブレイクに対応した対策と教訓が発表された。（添付資料：会議プロシーディング）サーベイランス活動の重要性が指摘された。

サクレイン氏（パキスタン）は、国内のNGOについて多数存在するが、うまく機能してこなかった点を分析、解決法を提案した。

D. 考察

各発表を通じて多かった指摘は、報告様式の国内不統一のために起こる情報の重複やその訂正作業に追われるために事務作業量が本来の目的以外に費やされひいては職員の意欲低下につながること。セクターごとの情報ルートが存在するために、情報の連携がなかなか図られないということや、情報収集分析後の末梢までの情報伝達と、情報通信の充実の必要性であった。また各階層、各レベルにおける人材の育成と、情報伝達における透明性の確保の必要性が指摘された。セクターごとの情報ルートの存在については、非政府部門やNGOを含めた情報の共有のために各国の実情に応じたアイデアが提案された。

これらは想出や提案はたやすく実施することは大

変に難しいと思われるが、各研修員の各国に戻ってからのリーダーシップを期待したい。

また医療需要情報を準リアルタイムで、誤謬を極小にして収集し、医療政策立案に利用しようとする試みが、分担研究3になる（分担報告3参照）。今回通信実験で携帯電話の利用が難しかったが、ほかの通信手段等を駆使して、莫大な投資を行わなくても既設・あるいは既利用の手段で行える可能性がある。

E. 結論

国内の情報ルートの統一と連携、NGOを含む民間セクターを含めた情報の集約の必要性や、また、関連する通信手段や末梢までの情報の伝達および透明性の必要性が指摘された。

分担 2 資料編

資料 国際シンポジウム記録

「感染症情報共有のための国際機関、政府機関、非政府機関の連携を求めて」

Networking of International Organizations, GOs, and NGOs for Information Sharing of Infectious Diseases

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Roles of Government, International Organizations, and NGOs on
Information Sharing of Infectious Diseases in Lao PDR
- New Networking System of Central Epidemiological Unit, NGOs
and International Organization for Information Sharing of
Infectious Disease
- Health Information System in Bangladesh: Integrating GO, NGO
& International Organizations to Address Infectious Diseases
- Integrated Disease Surveillance System in India
- Fighting SARS and other Emerging Infections Diseases;
Controlling Epidemics
- Responding to the Avian Influenza Outbreak : Lessons Learned
from Thailand
- Fighting on Emerging Diseases in Landlocked Country: Report
from Lao PDR.
- Fight to Avian Influenza and SARS in Laos –National
Coordination Committee on Communicable Diseases
- Environmental Change: Nipah Virus Encephalitis Epidemics in
Malaysia
- Outbreak of Importing Disease: Nipah Virus Encephalitis in
Bangladesh
- Polio Outbreak in Indonesia: An Alert to Improve Surveillance
System
- Dengue Outbreak throughout Urbanization: Alert from Malaysian
Experience
- Networking of NGOs for sharing information in Pakistan
- Information Sharing of Infectious Diseases, Lessons form NGO
Survey in Japan
- Discussion
- Closing Remarks

Keynote Address
Roles of Government, International Organizations, and NGOs on
Information Sharing of Infectious Diseases in Lao PDR

Boungnong Boupha

1. Background information and basic health indicators

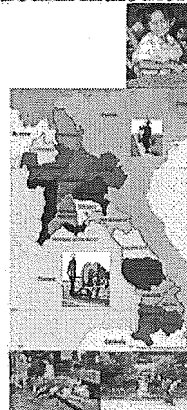
Laos-officially, Lao People's Democratic Republic (Lao PDR), is one South East Asia's only landlocked nation, since its admission to be one of ASEAN member countries in 1997, became a land linked country. The total area is 236,800sqkm with 5,609,997 inhabitants, 2,813,589 females, and 2,796,408 males (census 2005)¹. Lao PDR has 18 provinces including one prefecture and special zone, 141 districts, 10,553 villages, 959,595 households. 15% of the population is living in urban and 85% in rural areas.



The agricultural production is low and scattered, the GDP is 402 US\$ (2004)². The National health, and Reproductive health survey 2000, found that the life expectancy at birth was 59 years, and 61 for females, and 57 for males, TFR was 4.9, the IMR 82, the U5MR 102/1000 live birth, and the MMR was 530/100000 (NHS-RHS 2000)³

Background information and basic health indicators

- Laos-officially, Lao People's Democratic Republic (Lao PDR),
- Located in South East Asia
- One of ASEAN member countries in 1997
- The total area is 236,800sqkm
- with 5,609,997 inhabitants, 2,813,589 females, and 2,796,408 males
- Lao PDR has 18 provinces including one prefecture and special zone,
- 141 districts, 10,553 villages, 959,595 households.
- 15% of the population is living in urban and 85% in rural areas.
- The agricultural production is low and scattered,
- The GDP is 402 US\$ per Capita
- Life expectancy at birth was 59 years, and 61 for females, and 57 for males,
- TFR was 4.9/ woman
- The IMR 82/ 1000
- The U5MR 102/1000 live birth, and
- The MMR was 530/100000 (NHS-RHS 2000)

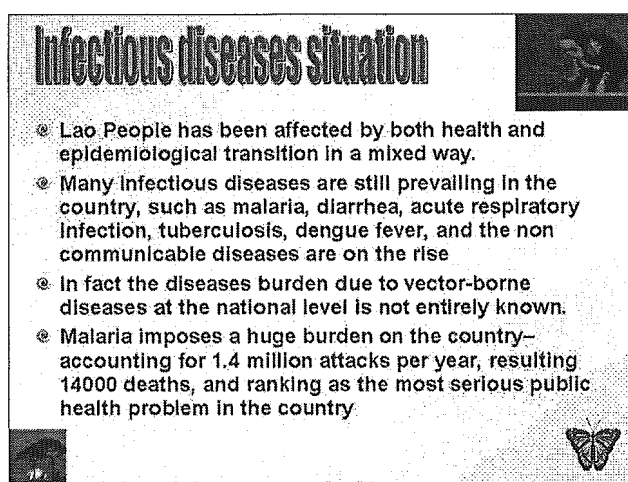


2. Infectious diseases, and control programmes in the Lao P.D.R.

2.1 Infectious diseases situation :

Indeed, the Lao People has been affected by both health and epidemiological transition in a mixed way. Thus many infectious diseases are still prevailing in the country, such as malaria, diarrhea, acute respiratory infection, tuberculosis, dengue fever, and the non communicable diseases are on the rise ⁴.

In fact the diseases burden due to vector-borne diseases at the national level is not entirely known. Malaria, however, imposes a huge burden on the country—accounting for 1.4 million attacks per year, resulting 14000 deaths, and ranking as the most serious public health problem in the country⁵.

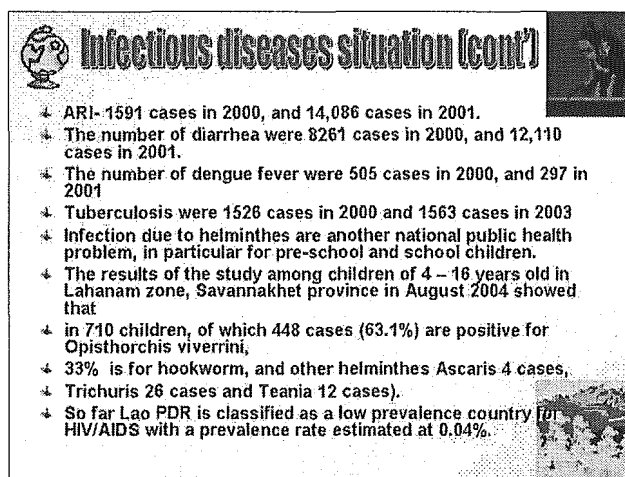


Infectious diseases situation

- ④ Lao People has been affected by both health and epidemiological transition in a mixed way.
- ④ Many infectious diseases are still prevailing in the country, such as malaria, diarrhea, acute respiratory infection, tuberculosis, dengue fever, and the non communicable diseases are on the rise
- ④ In fact the diseases burden due to vector-borne diseases at the national level is not entirely known.
- ④ Malaria imposes a huge burden on the country—accounting for 1.4 million attacks per year, resulting 14000 deaths, and ranking as the most serious public health problem in the country

The graphic contains a title 'Infectious diseases situation' in a stylized font. To the right of the title is a small, dark, square image showing a person. Below the title is a list of four bullet points, each preceded by a circled number 4. At the bottom right of the text area is a small illustration of a butterfly.

The number of acute respiratory infection (ARI) were 1591 cases in 2000, and 14,086 cases in 2001. The number of diarrhea were 8261 cases in 2000, and 12,110 cases in 2001. The number of dengue fever were 505 cases in 2000, and 297 in 2001⁶, (data collected from 7 provincial hospitals and 1 central hospital), Tuberculosis were 1526 cases in 2000 and 1563 cases in 2003⁶. Infection due to helminthes are another national public health problem, in particular for preschool and school children. (the results of the study among children of 4 – 16 years old in Lahanam zone, Savannakhet province in August 2004 showed that in 710 children, of which 448 cases (63.1%) are positive for *Opisthorchis viverrini*, 33% is for hookworm, and other helminthes *Ascaris* 4 cases, *Trichuris* 26 cases and *Tenia* 12 cases)⁷. So far Lao PDR is classified as a low prevalence country for HIV/AIDS with a prevalence rate estimated at 0.04%.



Infectious diseases situation (cont.)

- ✦ ARI- 1591 cases in 2000, and 14,086 cases in 2001.
- ✦ The number of diarrhea were 8261 cases in 2000, and 12,110 cases in 2001.
- ✦ The number of dengue fever were 505 cases in 2000, and 297 in 2001
- ✦ Tuberculosis were 1526 cases in 2000 and 1563 cases in 2003
- ✦ Infection due to helminthes are another national public health problem, in particular for pre-school and school children.
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 - ✦ in 710 children, of which 448 cases (63.1%) are positive for *Opisthorchis viverrini*,
 - ✦ 33% is for hookworm, and other helminthes *Ascaris* 4 cases, *Trichuris* 26 cases and *Teania* 12 cases).
- ✦ So far Lao PDR is classified as a low prevalence country for HIV/AIDS with a prevalence rate estimated at 0.04%.

2.2 Control programmes

In order to cope with infectious diseases, since the beginning of Lao PDR existence, the Ministry of Health is implementing health strategy through the nine, then six main work plans, of which health promotion and disease prevention is the first main work plan, under the responsibility of preventive and hygiene department of the MOH. Thus the different national health programmes were setting up namely: 1. Programmes for vector-born diseases, 2. Diarrhoea diseases control programme, 3. Acute respiratory infection control programmes, 4. Integrated management of childhood illness programme, 5. Programmes for HIV/AIDS and STI, 6. Programmes for vaccine – preventable diseases, 7. Programmes for mycobacterial diseases⁸

3. Lao government policy and international cooperation

3.1 Open policy

In 1986, the government of the Lao People's Democratic Republic began the process of shifting from a centrally-planned to a market economy, and introduce a package of economic reforms commonly know as the new economic mechanism (NEMs)⁹ allowing the private sector to take active role in socio-economic development as well as to promote the international organizations and NGOs to bring their investment in Lao P.R.R. In addition, the government has adopted a set of policies to promote the development process in the country, and recently the millennium development goals adopted by the world's leaders at the United Nations in September 2000 become also a commitment and the key challenges for Lao PDR.¹⁰

Indeed, Lao PDR's government was and is always striving to develop the party's directives, that prevention should come first and be a primary, and a treatment be an important task.

3.2 International cooperation in the health sector

Lao PDR is classified in the list of least developed countries, therefore its strong will is to get rid of its underdevelopment status by the year 2020. In addition, with great efforts of all party, army, government, and all the population as whole, to strengthen respective responsibilities, and ownership contributing to socio-economic development in the countries as well. As a sharing of information within and between country is not only a principle, but and vital matter for every nation in general, in particular for Lao PDR due to geography location of the country. It is noted that the role of international organization and NGOs are crucial not only in terms of their financial, technical supports, but and the information sharing for effective health and sustainable development.

In the health sector of Lao P.D.R. there are a considerable number of bilateral, multilateral and NGOs, in detail are as follows:

3.2.1. Bilateral cooperation:

Australia through AUSAID, Belgium through BTC, China, German through GTZ, France, Japan through JICA, Luxembourg through Lux-development S.A, Sweden through Sida, USA, Vietnam and Thailand.

3.2.2 Multilateral Cooperation:

- a) Un-Agencies: WHO, UNDP, UNICEF, UNFPA, UNAIDS, UNDCP, FAO;
- b) Francophony: IFMT;
- c) Banking system: ADB, WB;
- d) EU;
- e) Global fund;

3.2.3 Non government organizations around 46 namely:

Australia NGOs: ADDRA, CARE, INTERPLAST, MBC, SCF-A, WV;
Belgium NGOs: CIDSE, Damien Foundation; France NGOs: ACFL, AMFA, ANS, CCL, Lanxang, SFF, SFL, Laboratories Pierre Fabre ; Germany NGOs : CBM ;
Holland NGOs : NCA ; Japan NGOs: AAR, BHN, JADO, UMAMTO; Switzerland
NGOs : MSF-S; Sweden NGOs: SHIA; USA NGOs: FHI, WC, WV, Consortium, MCC,
CWW; United kingdom: IPPF, IRRIS, POWER, HU, COPE, SCF-UK

All international agencies mentioned above are assisting Lao health sector in implementing different health programmes for health development of all aspects, including information system strengthening in Lao P.D.R., some are incorporated a health component into integrated rural development projects.¹¹

4. Experiences on the implementing role of the government, international organizations, and NGOs in information sharing of infectious diseases in Lao PDR

4.1 During the prevention and control of SARS outbreak 2003

As mentioned earlier that, Lao PDR is a landlocked country, surrounded with five neighboring countries namely RP China, U. Myanmar, SR Vietnam, Kingdom of Thailand, and kingdom of Cambodia.

Indeed, Lao PDR fortunate has been SARS free during the SARS outbreak in the region, but was under strong pressure and threat due to the geography location of the country ¹²

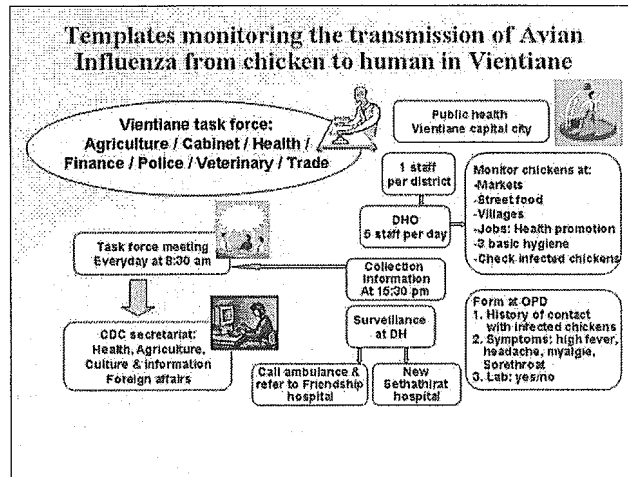
Since the beginning Lao government has highly prioritized its danger by closely following the situation and providing guidance to the health sector, as well as to all Lao people to be ready to prevent its spread and take the prevention as primary task, and concentrate on the treatment of suspected cases¹³. In addition, SARS national joint task force was established, with the involvement of representatives from different institutions and line ministries.

Moreover Lao PDR 's government was sharing and exchanging information with ASEAN countries, such as jointly implemented Declaration of special ASEAN leaders meeting on SARS, and the joint statement of ASEAN+3 ministers of health special meeting on SARS held in Bangkok and in Kuala Lumpur in April 2003^{12, 13}. Therefore, eliminated two suspected cases since the beginning, although Lao PDR was under strong pressure and threat of SARS due to geography location. Thanks to timely information sharing in collaboration with international assistance both technical and financial, Lao PDR could effectively contain SARS spread from neighboring countries into Lao PDR's land as well.

4.2 During the fighting with Avian influenza outbreak in animals in some provinces of Lao PDR (2004)

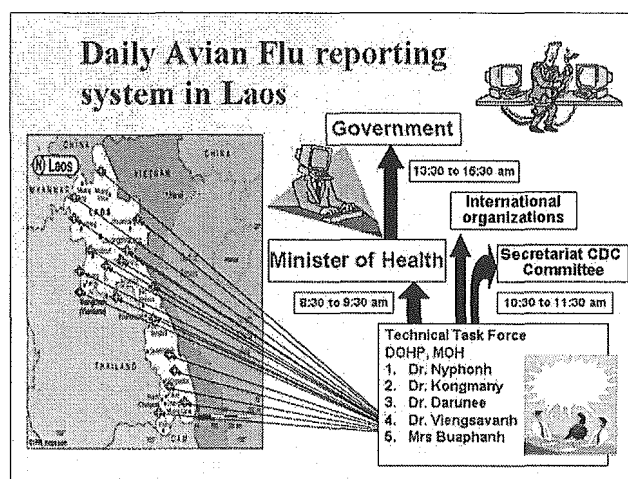
Due to geography location of Lao PDR as mentioned above. Since the beginning of Avian Influenza outbreak in early 2004 in Lao PDR, the country had approximately 20 millions of poultry of which 16.5 millions were household poultry, and 3.5 millions commercial poultry. At that time, more than 100 commercial farms exist in the country, were located in the periphery of larger towns of Vientiane Capital, Savannakhet and Champassack provinces.

Samples of poultry from affected areas were collected, tested and confirmed from Avian Influenza. There were 45000 deaths of poultry and 100,000 heads were stamped out. So far, no human cases of Avian influenza happened¹⁴.



4.3 Lao PDR's government response to control the spread of infectious diseases. Since the start of the outbreak of infectious diseases both SARS in the region, and Avian influenza in animal in some provinces of Lao PDR, the government has paid special attention by issuing several related decree and order for the prevention and control such as:

- Decree of the PM's office on the establishment of a communicable disease joint task force composed of representatives from 14 related ministries
- Establishment of task force within the Ministry of health and the Ministry of Agriculture and forestry for sharing information, collecting data, conducted active surveillance and field operations
- Issuing notification on preventive measures disseminated to all provinces by the MOH and MAF
- Consultative meeting on SARS prevention and control chaired by PM
- Emergency donor meeting on Avian Influenza was held in Feb. 2004 which jointly hosted by MAF and MOH
- Regular sharing information within and with international organization and NGOs
- EWORS supporting surveillance
- Meeting with mass media; Strong IEC campaign, but not panic
- Training of trainers for doctors, nurses, health workers
- Distribution of personal protective equipment (PPE)
- Surveillance system strengthened
- Check points at border identified; Isolation ward in designated hospital renovated; Laboratory diagnostic facility identified and putting in place ¹⁴.



4.4 Regular informations sharing, and strong collaboration with international and NGOs agencies.

During the outbreak of Avian Influenza, a number of partners and international organizations including NGOs have been closely sharing information, and assisting Lao PDR, by providing not less technical and financial supports namely: UNDP, FAO, WHO, EU, ADB, JICA, China, France, Belgium, Singapore, USA, Australia, Thailand, Vietnam, Cambodia and NGOs thus, bringing an effective contribution to contain the spread of Avian Influenza in Lao PDR's land ¹⁵.

5. Conclusion and recommendations

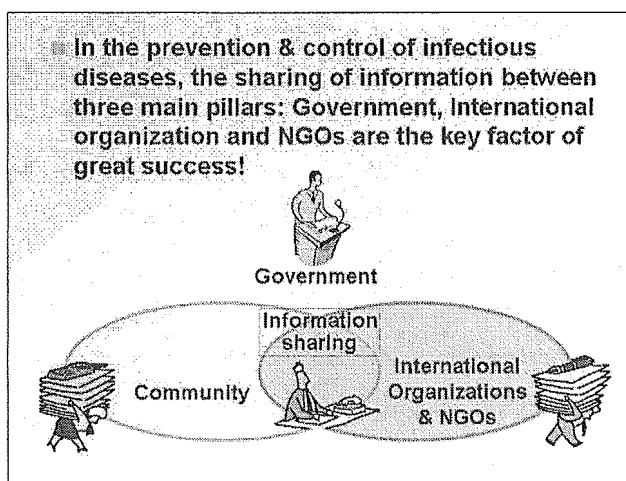
5.1 Conclusion

As the catastrophe of severely of infectious diseases such as SARS, and Avian Influenza, emerged in the 21st century, which adversely affects not only to human, animal lives, public health and agriculture, but and also economic growth , trade, tourism, business, industrial performance, political and social stability.

Lao PDR was very fortunate that so far, have never been attracted by SARS, even though the country lies between SARS affected countries (China, Thailand and Vietnam), sharing more than thousand of kilometers borders with them, nearly 40 cross-border check points (air, land, and port). Thanks to the government commitment, the country put intensive efforts in public education for firstly prevention of SARS, and then for containing of Avian Influenza, establishing surveillance containment facilities and training of personnel concerned. More importantly, the closely sharing of information within, between countries, and strong collaboration and commitment from international and NGOs agencies¹⁶ which make the process of prevention and control of SARS, and the containment of Avian Influenza in the country not only possible, but and successful one.

5.2 Recommendations

1. For a new and very contagious and dangerous of infection diseases like SARS and Avian Influenza, the most important things for effectively and timely containment is the close cooperation between countries in the region to share information and experiences, as well as conducting joint efforts.
2. In the event of an outbreak, it is necessary to timely inform the World Health Organization, as well as neighboring countries, for taking effective containment measures.
3. It is utmost necessary to establish a special task force for emergency response to epidemic outbreaks, disaster preparedness of ASEAN nations, with its secretariat located in one country to facilitate information sharing, mutual assistance, forecast of disease outbreak, and natural disasters
4. Establishing the disease surveillance and reporting system within the ASEAN countries and with WHO, a special website for the related purpose should be established to facilitate information sharing, and experiences exchanging in infectious diseases prevention and control.
5. It is very necessary to establish a regional referral laboratory for rapid diagnosis of causative agent in the event of a new and dangerous disease to facilitate effective measures for containment¹⁷
6. The using of the progress of sciences and technology, and with a close and strong collaborationship between countries and international organization and NGOs would overcome all challenges facing¹⁸.



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New Networking System of Central Epidemiological Unit, NGOs and International Organization for Information Sharing of Infectious Disease

San San Aye

Firstly, let me explain which main problem concerning with the surveillance system of infectious diseases in Central Epidemiological Unit of Ministry of Health of Myanmar. The main problem is “Lack of complete information in due time” because of delayed reporting of communicable diseases due to lack of modernized technology for transferring information from one area to another area and to the upper level. Information of occurrence of diseases is gathered in central level by monthly reporting system. As you know, outbreak is very important to know urgently and action needed to be taken urgently. Sometime, even telephone system is not well enough in some part of the area.

The second reason for lack of complete information is due to incomplete reporting of infectious diseases. We have a Health Management Information System which is under our Department of Health Planning for the whole country. But this information system is covered only government sector right now. Private sector is growing especially in cities and we still lack of information from people attending in the private sector. These are problems in information sharing about infectious diseases in our country.

Why it is problem? Everybody is well known about the “Ice berg phenomenon”, which is very important in information gathering on Infectious diseases, according to the epidemiology of diseases.

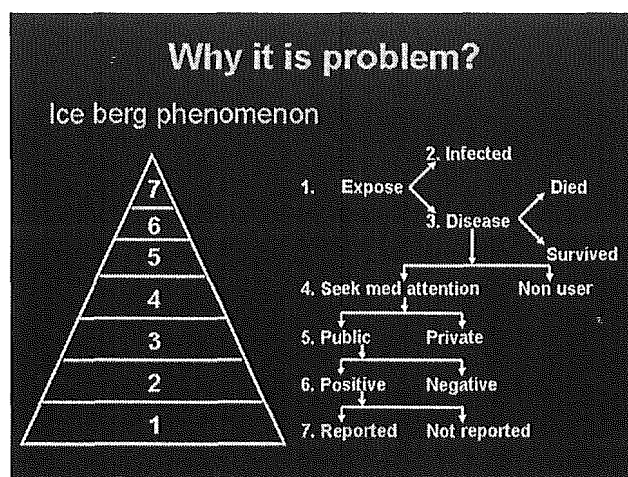
People are exposed to the agents and among which some of them are infected and some are getting diseases depending on the immunity. Among the diseased person some are died and some are survived (step 1 to 3).

Those diseased people some having seeking medical attention and some are non user (step 4).

Among the diseased people who seek medical attention, some are going to public sector and some are going to private sector. Those people who are going to private sector are not included in our Health Management Information System. This is the problem for sharing the complete information on infectious diseases. This problem is mainly occurring in urban area because the private sector is now starting to grow in urban area only. 30 % of the population is residing in urban area in Myanmar (step 5).

The other two steps are the confirmation of infectious diseases and reporting of those diseases (step 6 and 7).

These facts are very important for getting complete information on infectious diseases in due time.



Next, may I explain “How to solve this problem?” The New Networking System for Information Sharing of Infectious Diseases will be developed.

Central Epidemiology Unit (CEU) under the Ministry of Health is responsible for the surveillance and control of infectious diseases and it is also a center for information sharing.

Firstly, Government Hospitals and Health Departments under the Ministry of Health and other Ministries reported the cases promptly.

And at the same time, information is also getting from private hospitals and clinics, local NGO, INGO and general public.

And as soon as received the information from the peripheral level CEU response feed back to the lower level as early as possible. Urgent feed back is very important for controlling infectious diseases.

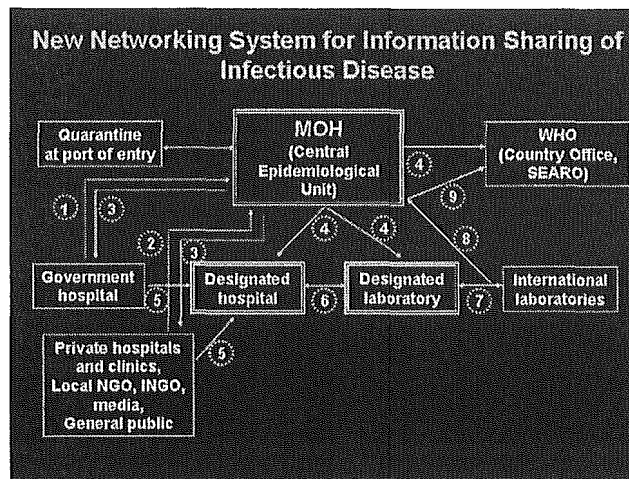
In specific condition of emerging diseases like SARS, the government arranged for designated hospitals and if required the specimen will be sent to designated laboratory. And at the same time reporting to WHO as well. (Pointing arrow 4)

According to feedback from CEU, the patient should be referred to designated hospitals as required.

If required, the disease will be confirmed by designated laboratory and International Laboratories.

And then this information will be going to WHO through CEU.

This is the new networking system for information sharing of Infectious Diseases.



This new networking system of Information Sharing will be efficient by complete setting up of e-Health Network in the Ministry of Health. In current situation, 2 IP star were setting up one in Yangon (capital of Myanmar) and another in Mandalay (second big city). Computer networking (e-Health System) has been set up in 17 States and Divisions but it is not efficient right now, because of the insufficient power supply and other technological problems.

Regarding the “Blue Sky Vision”, if we have enough resources, try to set up e-Health Network not only in States and Divisional level but also to the township level (equivalent to district level in other countries). The total number of township in Myanmar is 325 townships. Quick and reliable information getting from the township is very important because our health system is based on Township Health System. If we have a chance to set up e-Health Network up to the township level, the reporting and feed back can be made in due time. This is very important for control of infectious diseases.

