

JICA Cambodia

The project for Strengthening Human Resources Development System for Co-medicals

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A Newsletter from JICA HRD Project

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First Joint Coordinating Committee Meeting

The first Joint Coordinating Meeting (JCC) was held on October 19th and chaired by H.E. Prof. Eng Huot, Secretary of State for Health and Project Director. The main topics were 1-JCC member confirmation and TOR of JCC confirmation, 2-Explanation of the project outline 3-It was a report on Counterpart training, which were pre-

sented by Mrs. Keat Phuong, Director of HRD Department and also the project manager. In the question and answer, question an exchange of views relevant to method of teacher training, low wages of RTC teachers and sustainability of trained human resources. There was a recommendation from Secretary of state Eng

Huot to promote special attention in 1-Regulatory framework 2-License 3-EDC.

JCC is an abbreviation for Joint Coordinating Committee and it is ordinarily held once or twice per year. Participants are representatives of CP related department and parties concerned from Japan. It is the most top-level meeting among meetings which are regularly held by the project.

JCC Overview



Review of the project activities

Dr. Akashi Hidechika, a short-term expert, was dispatched from September 28th till October 22nd. One of the big purposes of dispatching of Dr. Akashi is to create project activity plans and during his mandate, and vigorously conferred with counterparts and the persons concerned in the project so that the direction of the project has been clarified. There are three expected outcomes (Outcome 1: Training system of existing teachers, Outcome 2: Training system of newly-graduated teachers, Outcome 3: Establishment of Law and Regulations on Nursing and Midwifery) in the project. At first, it was a plan to de-

velop activity which puts emphasis on outcome 1 and 2. However, this activity is in the direction with more emphasis on adjustment of relevant laws in outcome 3 after discussion with the counterparts.

Development of training system of teachers in active service and newly-graduated teachers is also important. But to Develop effective activities through limited staffs and budget the persons concerned think that it is better to try to put emphasis on establishment of law and regulations which is the basis of human resource development so that it is highly effective

when considering in long-sighted outlook.



state of the discussions between Counterparts and experts

From the spot of medical care in Cambodia

Besides JICA experts, there are JICA senior volunteers, Japanese from Japan Oversea Cooperation Volunteer and NGO etc. who have been dispatched and have been working in strengthening medical care in Cambodia. In this number we got contribution of texts from Japanese who works in such a spot of medical care in Cambodia and we have the honor of introducing the state of affairs of the spot of medical care in Cambodia. In this number, we'd like to introduce manuscript from Ms. Tomiko Kusugawa, who has been dispatched to Cambodia National Pediatric Hospital.

Phnom Penh National Pediatric Hospital
Senior overseas volunteer

National Pediatric Hospital the place where I have been assigned (hereafter called NPH) is a specialty hospital of pediatrics. It has been carrying on medical service by receiving aid from many countries and organizations. On the other hand, it also has been playing a part as a referral hospital as a hospital to receive training of doctors from rural areas and nursing students' practice. Most patients come to hospital are in financial difficulty, nearly half of them receive medical treatment free of charge.

Recent year, It's said that 20\$ per person is sponsored by ministry of health to patient who is not able to pay doctor's fee. But problems of lack of medical supplies and low wages of staffs lie in a heap, and it's the truth that job motivation is not tied up. One year has already passed since I was dispatched for second time as a Jica senior overseas volunteer to NPH.

As a senior overseas volunteer for the first time, I was surprised day by day for I had no specific previous knowl-

edge about the spot of nursing in developing country where I was assigned in surgical ward. There are also medical specialists and the contents of medical treatment corresponded surprisingly high. But nursing is not highly evaluated, and is spent for doctor's minor work and creating various kinds of administration slip, nursing care is almost left to family. In Cambodia where public transportation is not yet developed, it's very difficult for patients in rural areas to access to hospitals. I've encountered some cases which I've never seen during my 40 years' nursing life in Japan. Most of them got folk medicine and after they become serious, they come to hospital. Bone fracture patients who suffered from tetanus and fell into convulsions because of folk medicine by applying kitchen range ash to candid bone fracture or newly-born babies suffered from maggots because of being applied honey and ash to the navel strings are carried into hospital. Most of them are patients from rural areas. If health centers in medically depopulated areas functioned, if nurses were there they couldn't stay without thinking how encouraged people in rural areas are. I also felt sorry when I saw some locked health centers.

As my request of dispatch is nursing management, what I have been engrossed in first is about practicing everyday [handing over] and practicing hand washing. Taking it as a clue, we act together sticking to practicing of nursing care base on the basis that "why we do like this?" "Why it is necessary to do like this?" to all nursing care.

In fact, we asked cooperation to talk together with doctors many times, but it was carried away and become like a prolonged issue, but we go on initiating nurses into our continuous efforts.

Now, nurses are creating training plan in wards, they make presentation by turns and show wonderful growth. For



National Pediatric Hospital



Activity at Hospital Building



Health education, teaching children to brush their teeth.

From the spot of medical care in Cambodia (Continue)

the whole hospital, independence of nursing is still on long-distant way, but I got report on happy situation that we can hear steady footsteps of the independence during my second term of dispatch.

This time we set up a seat and started task concerning nursing management in the whole hospital with nursing section chief the counterpart. Daily report and topics relevant to numbers of patients of previous day from each section is reported in controller meeting which held every morning and taken part by each section chief and doctors. There is also a report about measure on writing towards suggestion boxes which were set up at many places in hospital and the information is shared. During my term this time, I could confirm the real situation that NPH is organized and run by director of the hospital. We've been being interested in human resource development of conscious nurses as nursing professional with nursing section chief by transmitting from nursing section the establishment of hospital base on idea of service for patients.

Base on two years of previous activity, we combined the activity goal into two points of education and infection control. First of all, we operated the first nurse's aide training in Cambodia

which was longstanding before. Increase in desire to work through receiving basic training on infection as a member of medical team was also shown in the result of questionnaire. Through director of nursing training, we have been making an effort to operate regularly nursing management training on purpose of independence of nursing, to create outline of each ward, to clarify objective of wards in writing not only verbally like before, and to improve nursing staff motivation. But it need much time to penetrate into all staffs and now it has become a big matter.

Now, In NPH we've been interested in nursing record according to nursing process approved by the Ministry of Health. For lingering lack of nurse and duty-by-duty nursing system, the time spent for nursing record on clinic spot is limited, nursing students are practicing as manpower, and it's difficult but we've been trying hard focusing mainly on nursing supervisor by repeating trial and error. A nursing section vice chief has been dispatched to nursing management training in Japan for three months by sponsor of JICA and the Ministry of Health since the end of September. The difference of nursing between Japan and Cambodia is immeasurable, but we want he or she to feel directly [the heart of nursing] nursing service to care pa-

tients which is the basis of nursing not only understand by remembering.

When thinking about the future of Cambodia, It's necessary to operate medical treatment, nursing and hospital management and solve the problems by Cambodians. It takes much time until that result comes out, and our activity is one year left. But we think that we continued to support so that nursing staffs ensure motivation and necessary nursing is being able to be provided to more people. And we hope that NPH to become a hospital where everybody in the region can choose for nursing.

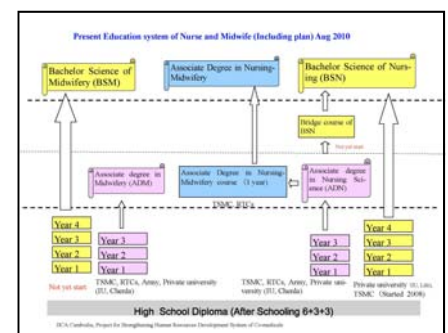


Nursing training

Introduction of the project documents

The educational system of nurses and midwives in Cambodia had changed in different forms after the end of civil war. As a result of colorful background of education, nurses and midwives who work in present places of work are doing activities in different titles. It is a little bit difficult for foreigners to understand although they are the

persons concerned. The change in educational system of nurses and midwives and documents about the types of nurses and midwives who are being trained today are on the project home page as follows.



<http://www.jica.go.jp/project/cambodia/004/materials/index.html>

Leaving of Dr. Akashi, JICA expert

From September 28th till October 22nd, Dr. Akashi Hidechika, JICA expert was dispatched. In addition to his long experience with the field of international medical cooperation, he also had long-stay in Cambodia during the latter half of 90's and have many connections inside and outside the ministry of health and he pushed on with and activity base on deep trust with Cambodian persons concerned. We would like to introduce the comments of Dr. Akashi as follows:

Short-term expert Dr. Akashi Hidechika,

Four months have already passed since the project starts. Now because of reduction in JICA budget we have to review plans for next years. In this meaning, we reported the starting of the project in TWG, held JCC meeting to determine the whole direction of the project and we exchanged views relevant to the direction of the project in hard financial situation with the result announcement of counterpart training in Japan which was held from August to September. The project out line is

about building teachers' capacity and creating framework relevant to laws.

Now, it's real that we've been working with many wonderful people, wonderful mind to work, good attitude, wonderful humor and wonderful team. How lucky we are!

Of course, the project has just started and it is the truth that we are still filling up with the project details. From now on many difficulties are waiting for us. But we think that if we are with such persons we can overcome even though how hard they are.

For Cambodian people, as a token of friendship with Japan, And for the peace of the world! God bless us.



Consultation meeting with the Secretary of state for Health, H.E. Prof. Thir Kruy, (Left, Dr. AKASHI, JICA Expert)



Consultation Meeting with Counterpart

Please go to the project homepage via the address below:
<http://www.jica.go.jp/project/cambodia/004/index.html>