

By Sophia Tan, Ravi Cuttilan and Yeow Ting Wen

Photos: Ravi Cuttilan

saac Newton once said, "If I have seen further than others, it is because I have stood on the shoulders of giants." The group of students from the National University of Singapore (NUS) Yong Loo Lin School of Medicine and doctors who embarked upon Project Lokun's nine-day trip to Cambodia in May 2011, was fortunate to be the ninth in a long line of like-minded peers, all of whom have made their unique contributions to the project since its first instalment in June 2007.

After four years of serving the same villages, Lokun 9 was planned with the aim of evaluating the work done by previous trips. We were aware that the evolving needs of the Cambodian people necessitated a re-evaluation of our project goals and the way we implemented them.

For this trip, we continued our work with villagers in the province of Pursat, a three-hour drive north from Phnom Penh. We were based throughout at the Centre for Research on Optimal Agricultural Practices (CROAP). CROAP is run by Father Hernan Pinilla, a Colombian Catholic missionary priest who has dedicated the past 17 years of his life to improving the living standards of rural communities. His numerous initiatives include agricultural programmes, housing, pond and well construction, healthcare, and education.

Recognising that the most lasting impact our project could have was by sharing basic healthcare knowledge, we made health education a mainstay of Lokun 9, alongside ambulatory care clinics. We employed a three-pronged education strategy, comprising school education, houseto-house visits and interactive sessions during our clinics.

Education

We conducted simple health education sessions for schoolchildren, using a basic curriculum catering to Cambodia's equivalent of Singapore's primary school system. Previous Lokun trips had compiled feedback from students and teachers and come up with a coursebook to supplement their existing curriculum. We took it upon ourselves to assess the usefulness of the coursebook thus far through classroom quizzes as well as discussions with the principals and teachers of all three schools we visited. Going forward, we have plans to adapt its contents for secondary school students and have already sought out new communities and schools that we can reach out to in the future.

Our team also made house-to-house visits to the villages, gathering family members from neighbouring households and conducting informal health education and simple surveys with up to 20 villagers at a time.

These visits enabled us to gain important insights about their way of life and come up with suggestions that will be helpful to them, using materials readily available in the local setting and with regard to specific practices like collecting and storing water. Goodie bags, each containing daily essentials like soap, detergent, toothbrushes and a simple first aid kit, were distributed to each household.

In addition, we provided interactive sessions during clinics for villagers who were either waiting their turn to see the doctor or who had already been attended to. The demonstrations were well-received by the villagers and maximised the time they spent with us. Most importantly, it was an opportunity to communicate more targeted healthcare knowledge, such as disease-specific information.

Clinics

We organised two free ambulatory care clinics over two days, the first serving the villages near CROAP and the second, the floating villages of Kampong Luong, situated on the Tonle Sap Lake. Our two volunteer doctors were kept busy attending to an average of about 115 patients per clinic, with conditions ranging from acute infections to chronic hypertension and suspected malignancies.

As we are capable of providing only outpatient care at best, we had made it a priority in previous trips to establish contact with the health centres and hospitals nearest to each clinic location to facilitate referrals. However, for patients who require specialist care available only in Phnom Penh or Siem Reap, we would link up with establishments such as the Catholic Church. The Church's two shelters for the sick in Phnom Penh offer free food and lodging for patients who have travelled from all over the country to seek treatment at the hospitals in the Cambodian capital. We plan to follow up on each patient we refer on every subsequent trip, and through our regular correspondence with Father Hernan.

To make year-round healthcare accessible to our adopted villages, Project Lokun is currently collaborating with Father Hernan to employ a Cambodian doctor to run free weekly clinics at CROAP. We are also working closely with the doctor in formulating a long term follow-up plan for patients with chronic diseases such as hypertension and diabetes.

Partnering with the local people

In Lokun 9, we continued to search for meaningful collaborations with local organisations and communities. For instance, we called on

medical students' Mailbox





village chiefs and local non-governmental organisations, to understand in greater detail the communities we serve and also to find out about other areas in which we might be of help. For instance, at the moment, one of the most pressing needs in the village around CROAP, is that of clean water for consumption. Pollution coupled with the dry season has made clean water increasingly scarce. A chance excursion into the villages with Father Hernan also alerted us to the plight of the poorest villagers, eking out a living as garbage collectors. In the next six months before Lokun 10, we hope to obtain the relevant contacts to start making a tangible difference to these villagers who need it the most.

Each Lokun trip has been able to build upon the experiences gained and the relationships established by previous ones. It is vital that our project evolves to meet the ever-changing needs of the local community sustainably. While our goal will always be to provide aid to a needy people, we have arguably gained more from each trip than our beneficiaries. It is they who have opened our eyes to a whole new way of life, made us realise the resilience of humanity, and, hopefully, unearthed a desire to care for the poor and the sick in each of us. SMA

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Ting Wen, Sophia and Ravi (L to R) are currently third year medical students at the Yong Loo Lin School of Medicine. They were part of the organising team for Lokun 9, May 2011. They would like to express their gratitude to all who have helped made Lokun what it is today and it is their wish to one day return to Cambodia as doctors to serve in a greater capacity.

About Project Lokun

Project Lokun is a biannual overseas student-initiated medical project that addresses the healthcare needs of a rural population in Pursat, Cambodia. Among the initiatives of the project are free ambulatory care clinics, patient referrals to secondary and tertiary healthcare institutions, education in schools and house-to-house visits. We are in constant need of support in the form of sponsorship and volunteer doctors who would like to join us on our trips. We welcome enquiries and comments at nusprojectlokun@amail.com.



To make a monetary donation, which would go towards covering costs of medication, educational materials, hygiene kits for children and households as well as subsidising poor patients referred to hospitals, please address a cheque to the NUS Medical Society, and mail it to the following address:

NUS Medical Society, c/o the Dean's Office, Yong Loo Lin School of Medicine, NUHS Tower Block, Level 11, 1E Kent Ridge Road, Singapore 119228

Please indicate "Project Lokun" on the reverse side of the cheque. We also welcome any donations or sponsorship in kind