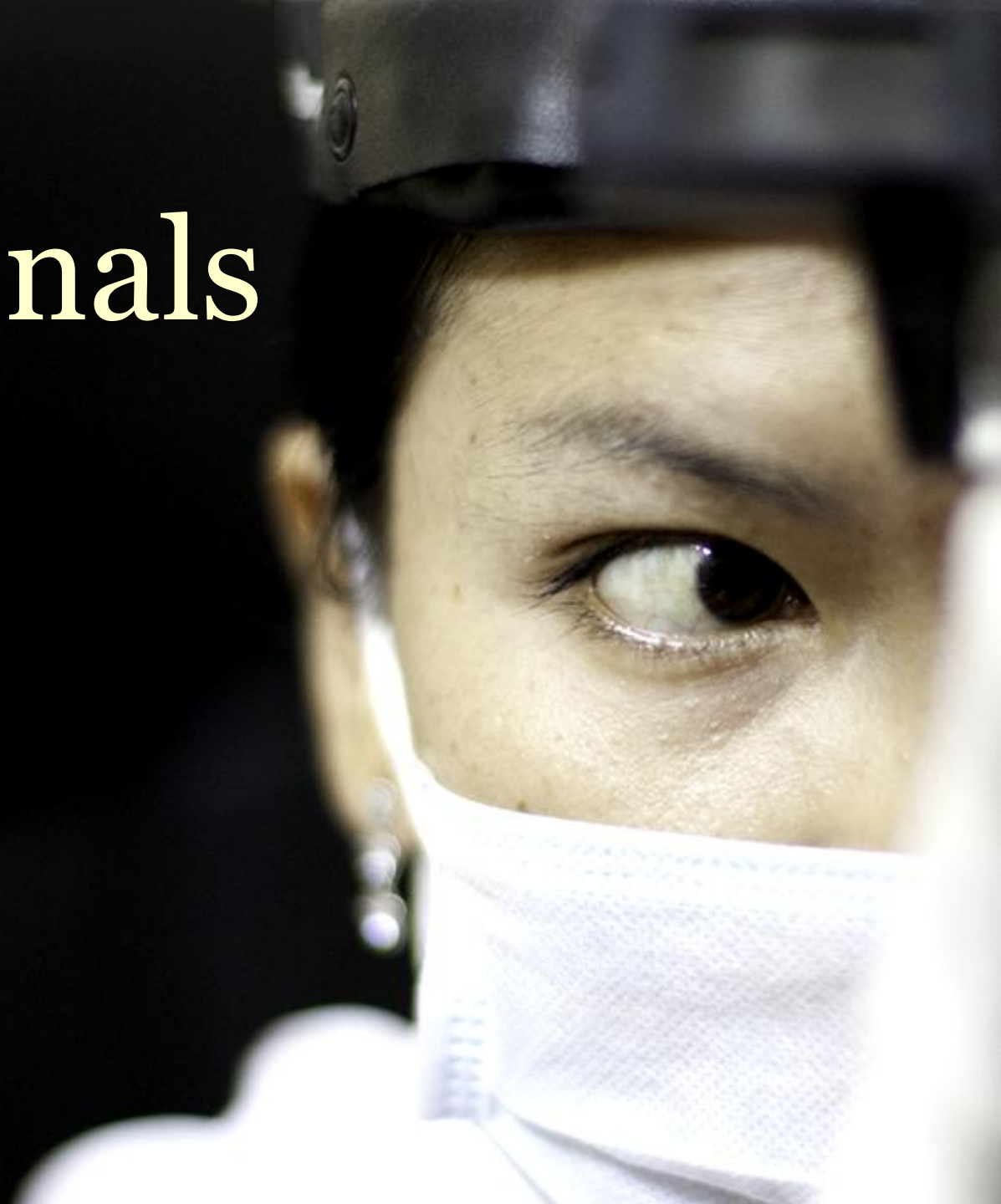


Training Professionals

Insights from
All Ears Cambodia

Ned Carter
Head of School



Training School

2 years, full-time

- Audiology
- Primary Ear Care

Cost-effective
mid-level clinicians





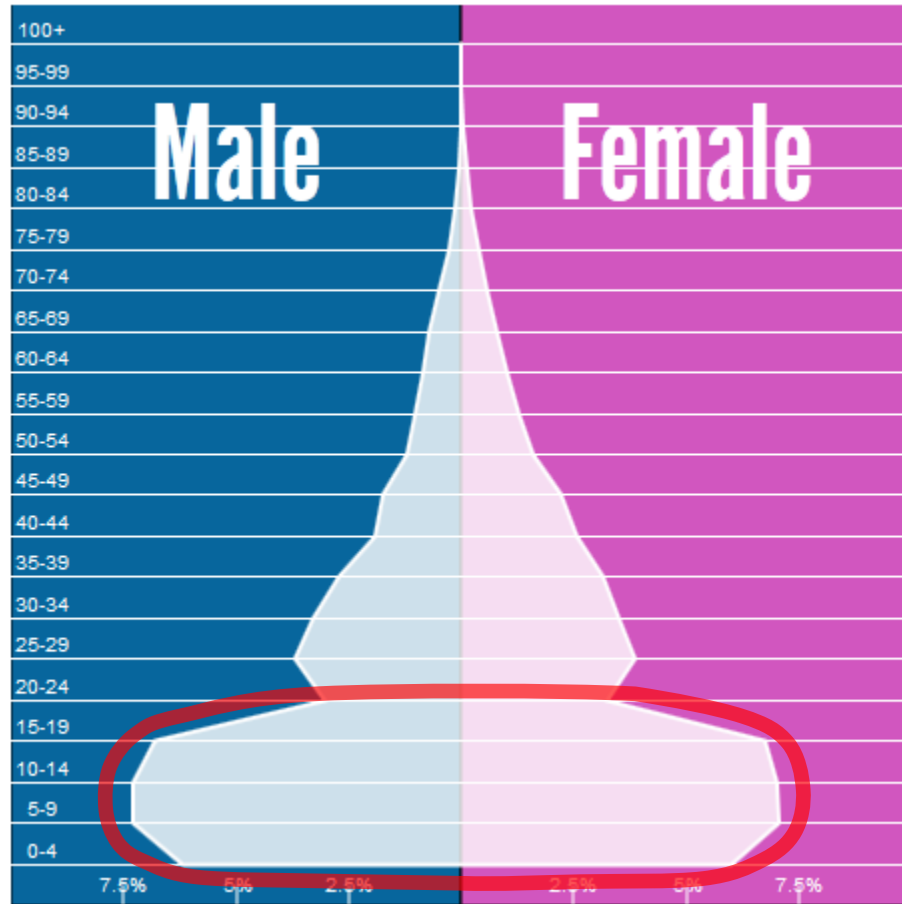
Evidence Services

NICE National Institute for Health and Care Excellence

Selected, reliable information for health and social care in one place

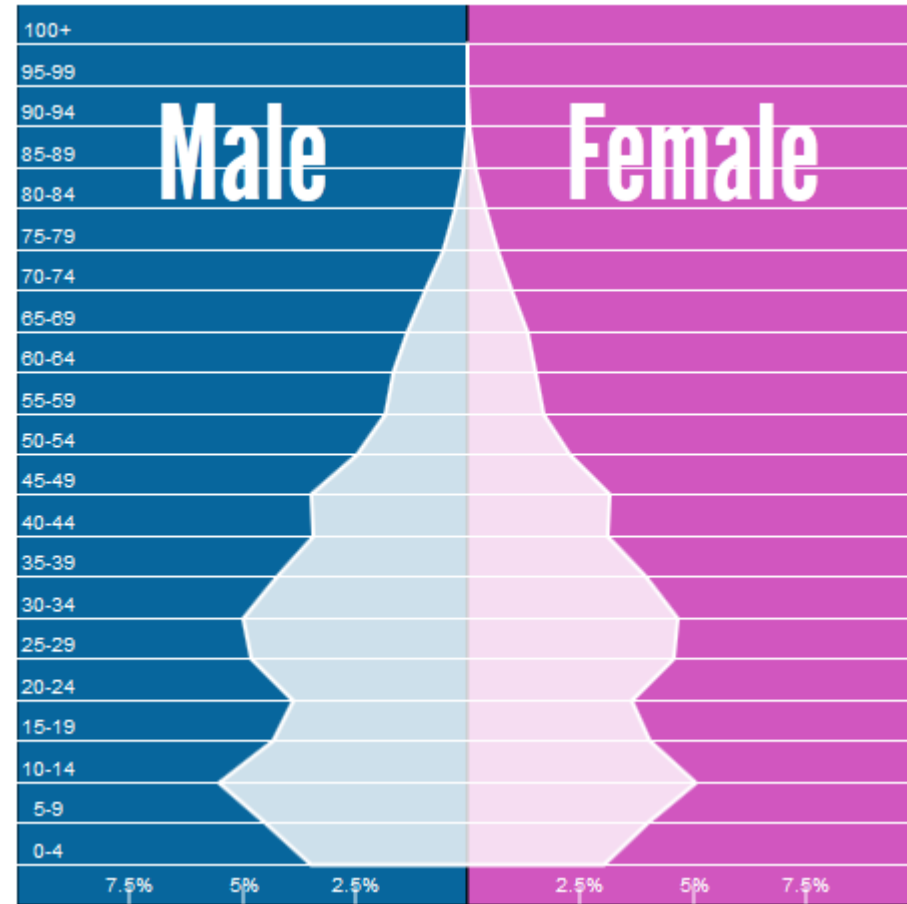


Cambodia



Under 15: **41%**

China



Under 15: **26%**



Kampuchea

Children on the border



Top: Faces of young Kampuchean (Cambodians) — at least one quarter of refugees in border camps are under five years old.
Above: Separated from their mother, two sisters express the grief felt by many Kampuchean children in refugee camps.
Right: A young child admires four noncommunist guerrillas, on leave from fighting the Vietnamese in Kampuchea.



Photos by
Marcus Halevi
Text by
Paul Quinn-Judge

CHILDREN make up a large portion of the refugees who live in camps along the Thailand-Kampuchea border.

Many more of the 230,000 refugee-residents are under 16. At least a quarter of the border people are under five years old, relief workers say.

But there is one age group with fewer representatives: "There are nowhere near as many children between about six and nine as you would expect," said an official of the UN Border Relief Operation. "It seems as if many of the children born between 1975 and '79 died — or perhaps were never born at all."

Between mid-1975 and the end of 1979, when the communist Khmer Rouge was in power, hundreds of thousands of Kampuchean children died of malnutrition or disease, and hundreds of thousands more were executed. In 1979, Vietnamese troops invaded and pushed the Khmer Rouge back into the jungle.

But life became no more settled under the Vietnamese occupation of Kampuchea. Vietnamese troops are still there, doing battle with Kampuchean resistance fighters — guerrillas of Prince Norodom Sihanouk's two noncommunist factions as well as those of the Khmer Rouge. Many refugees have moved several times since 1979 — usually under fire.

The battle for control of Kampuchea will probably continue for some time.



Meanwhile, the people in the camps wait. Life on the move, with a small bundle of belongings or — if they are very fortunate — a cart or bicycle, is all that most border children have known in the past six years.

They and the remnants of their families come from all over Kampuchea. For one reason or another — often because of the Khmer Rouge's murderous policies while in power — many of them are orphans.

Refugees who choose to flee to a Khmer Rouge site are stuck there. Khmer Rouge administrators will not allow them to transfer to a camp administered by one of the other two anti-Vietnam factions. And

because of the Khmer Rouge's policies, they are often held in the US.

While war continues, the children do not learn to read. Few are 15 or so, and girls will









Promotion





Rural

A young child stands on a dirt path in a lush, green rural setting. The path is flanked by large, mature trees with dense foliage, creating a shaded canopy. The child is wearing a light-colored t-shirt and shorts. The background shows more trees and a dirt road leading into the distance.

~80% live rurally



where
no-
one
works

Rethinking Skill Mix







Task Shifting

“I see task shifting
as the vanguard for
the renaissance of
primary health care”

Dr Margaret Chan, 2008
WHO Director General



Quality of care provided by mid-level health workers: systematic review and meta-analysis

Zohra S Lassi,^a Giorgio Cometto,^b Luis Huicho^c & Zulfiqar A Bhutta^a

Myth de-bunked.

Extensive use **does not** lead to services of poorer quality.

Human Resources for Health

Governments to determine the appropriate
health workforce skill mix

... for an immediate, massive scale-up of
community and **mid-level health workers**

(Kampala declaration 2008)





Key Resources

Global Health Workforce Alliance. 2008. Global Forums on Human Resources for Health. www.who.int/workforcealliance/forum

Grobler et al. 2009. Interventions for increasing the proportion of health professionals practising in rural and other underserved areas. <http://dx.doi.org/10.1002/14651858.CD005314.pub2>

Lassi et al. 2008. Quality of care provided by mid-level health workers: systematic review and meta-analysis. www.bmj.com/content/344/bmj.e615

Baltussen and Smith. 2012. Cost effectiveness of strategies to combat vision and hearing loss in sub-Saharan Africa and South East Asia: mathematical modelling study. www.bmj.com/content/344/bmj.e615

World Health Organisation. 2006. The world health report: working together for health. www.who.int/whr/previous

www.allearscambodia.org



info@allearscambodia.org
Ned Carter, Head of School