

# AMDA Annual Report 2017

**Global  
Partnership  
for  
Sustainable  
Peace**



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# Global Partnership for Sustainable Peace

In the spirit of  
*Sogo-Fujo*

相 互 扶 助

**'Sogo-Fujo'** is a cycle of giving and receiving, a traditional value  
deeply rooted in the Japanese close-knit community life.

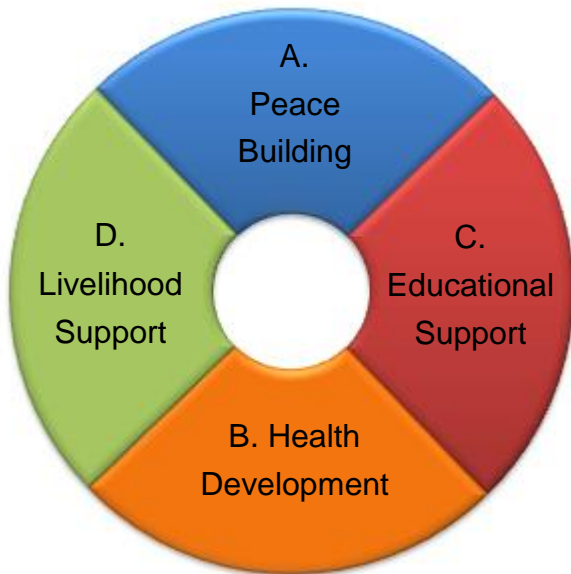
**'Sogo-Fujo'** is something we are all born with regardless of race, religion, and culture. We all have the desire to help others and to be of service to the community we live in.

**'Sogo-Fujo'** creates a true partnership based on respect and trust for each other. Human dignity and pride must be respected at all times, especially for people at the receiving end of the assistance. People in need of help today may be the support-givers of tomorrow.

**'Sogo-Fujo'** unites the world. We will never abandon each other as we are all equally irreplaceable as a part of the wider global community. Each community with its own culture and sentiments should be embraced as a powerful element for peaceful coexistence of diversity and not as a dividing force.

**AMDA advocates 'Open Sogo-Fujo'**, a universal foundation of peace, extending mutual assistance across and beyond one's community.

# What is GPSP?



*Global*

*Partnership for*

*Sustainable*

*Peace*

In 2014, AMDA established a concept of a global network named, “Global Partnership for Sustainable Peace” (GPSP). The aim of this network is to promote the coexistence of diversity which is virtually indispensable for world peace. Under this concept, programs have been developed beyond borders with the philosophy of *Open Sogo-Fujo* (which literally means “mutual support/help” in Japanese), the universal value of the 21<sup>st</sup> century, as its main theme. The framework consists of four fields of activities, namely:

- A) Peace Building
- B) Educational Support
- C) Health Development
- D) Livelihood Support

AMDA defines peace as “today’s family life with hope for a better tomorrow.” “Today’s family life” symbolizes a family condition where one has sufficient food to maintain a decent living. The phrase “hope for a better tomorrow” points to providing education to children. The said four fields of

GPSP activities have been set to abate conflict, disaster, and poverty, all of which are considered hindrances to attaining peace.

By involving governments, local public authorities, public interest groups, corporate enterprises, and academia, AMDA hopes to enlighten the world with the concept of *Open Sogo-Fujo* to realize the coexistence of diversity. This is the end goal of Global Partnership for Sustainable Peace.



# A. Peace Building

## 1. GPSP Multinational Medical Mission

### 1) Emergency Relief and Refugee Assistance



#### Rohingya Refugee Crisis in Bangladesh



In response to the influx of Rohingya refugees seeking asylum in the border areas of Bangladesh, AMDA Bangladesh and AMDA Headquarters launched medical relief at Kuthupalong Refugee Camp in the Ukhia district, 45 kilometers from Cox's Bazar. Authorized by the Bangladeshi government, AMDA Bangladesh has started offering medical services after setting up a temporary

clinic on 22 October 2017.

Located at the main road of the camp, the clinic has been providing free treatment and medicine to

more than 100 patients per day. During open hours (9:00am to 2:00pm), the clinic is constantly crowded due to the limited space. Many pregnant women and children are seen among the patients that were suffering from ailments including diarrhea, common colds, fever, injuries and burns. According to the Ukhia District Authority, STDs and skin diseases have been increasing. The sanitary condition in the camp is bad and basic medical care is scarce.



### Peru Flood Disaster

In response to the floods and mudslides that struck Peru in March 2017, AMDA sent two relief personnel (one doctor, one coordinator) to Lima, the capital, from Japan. The disaster was caused due to torrential downpours throughout the country which affected a total of almost 800,000 people. The transportation network was paralyzed and a number of schools and health facilities became dysfunctional. Lima suffered its

biggest flood disaster in history in which the river water flowed into the city. AMDA worked with a local counterpart “Socio en Salud” to conduct medical relief in Leticia, Cajamarquilla and Batanes in the Morropón Province in the Piura Region. At each location, the team saw patients who complained of muscle pain, joint pain, headaches and other symptoms. The team was welcomed by the local residents as there were no medical facilities in most of those areas. Road blockages also prevented them from seeking medical help outside the region.



### Garbage Dump Disaster in Sri Lanka

On 14 April 2017, on the day of Sinhala and Tamil New Year's Day, part of a garbage dump in Meethotamulla, a suburban city adjoining the capital Colombo, collapsed, affecting around 1,800 people. According to the Disaster Management Center (DMC), 30 deaths, 8 missing persons and 11 injuries were reported.

A joint team comprised of AMDA Sri Lanka and the St. John Ambulance Colombo District organized a medical camp at the Terrence De Silva School in Meethotamulla where the displaced were sheltered. Doctors and nurses from Colombo East Hospital helped with medical care and the joint team visited and donated medication and food at the shelter. A group of visiting Japanese experts assessed the extent of the damage and reported the findings to the President of Sri Lanka (His Excellency Mr. Maithripala Sirisena).





### Monsoon Flood Disaster in Sri Lanka

In Sri Lanka, the monsoon in May 2017 became the country's worst torrential rain in 14 years, which brought severe flooding across southwestern portions of the nation. In response to the numerous landslides induced by the rain, AMDA Sri Lanka immediately dispatched emergency relief teams to Ratnapura where they closely worked with a local fire brigade. Later, one relief personnel

from AMDA Headquarters joined the ground team to work in Ratnapura and Kalutara. At a small village called Paradola, AMDA doctors and nurses were seeing patients amidst a power outage. This seemed to have put a lot of expectant mothers at ease.



### Leyte Earthquake Medical Relief, Philippines

A mag. 6.5 quake that struck Leyte's western region in the early morning of 06 July 2017 displaced 59 households (197 people) which forced them to evacuate to emergency tents. On 28 July, the AMDA team entered the Kananga district in the town of Hiluctogan to organize emergency relief in cooperation with a local counterpart. The joint relief team was also joined by personnel from Remedios T. Romualdez

Medical School Foundation and saw 233 people (129 adults and 104 children) who were suffering from common colds, headaches, itchy skin, and backaches. The patients also received medicine.



### Marawi Turmoil in Mindanao, Philippines

The armed conflict that put Marawi in crisis since 23 May 2017 generated as many as 360,000 internally displaced persons. The government issued Martial Law until the end of December throughout the Mindanao region. Having kept a close eye on the local situation from the onset of the strife, AMDA sent two personnel to the Philippines to discuss possible refugee assistance in late July. After making a courtesy visit to the office of the

Cabinet Secretary of the President of the Philippines, the two entered Marawi to conduct relief activities. At an evacuation center in Barangay Maya Christina run by Amai Pakpak Medical Center (APMC), they provided a set of crayons, drawing paper and coloring books to children as well as donating medical supplies.

### Floods in Nepal

The torrential rain since early August caused floods and landslides in the southern part of Nepal (Terai plains) which left substantial damage to the area. At the request of the government of Nepal, AMDA Nepal launched relief efforts in cooperation with afflicted municipalities and local health offices. The vicinities of two hospitals run by AMDA Nepal in Jhapa and Sunsari, adjacent to the district, were also affected by the floods.



Accordingly, AMDA Nepal sent a relief team to run a mobile clinic in five locations. Also, a medical team from AMDA Siddhartha Children and Women Hospital (Butwal, Rupandehi) worked for five days in Nawalparasi, located six hours southwest of Kathmandu.

### Floods in Northern Bangladesh

The torrential rain that struck South Asia in late August 2017 also caused severe floods in the north of Bangladesh which resulted in 114 deaths with approximately 7 million people being affected. AMDA Bangladesh dispatched a medical team in cooperation with Japan Bangladesh Friendship Hospital and Society for Anti Addiction Movement (SAAM) in Kurigram and Gaibandha, the two heavily-affected districts. The joint team provided medical assistance for five days from 22-26 August. Alongside medical activities (mobile clinic and provision of medicine), the team provided supplies such as drinking water, rice, potatoes, salt and biscuits. The team also donated other relief goods including matches and candles. Within in this period, about 3,480 households benefitted from the relief.







### Floods in Bihar, India

In September 2017, AMDA conducted aid assistance in response to the flood disaster in the State of Bihar, North India. The joint team of relief personnel from AMDA Japan, Gaya College and local collaborators visited the city of Samastipur in the north to provide food supplies and daily commodities. The staff from AMDA Japan had been coincidentally visiting Bodhgaya for a project prompted by AMDA Peace Clinic (specialized in maternal health services) based in the locality. The team provided food supplies and relief goods to three villages in the Ganga Bandh district, Samastipur. 300 families received a set of relief goods containing bread, jam, cookies, rice, sweets, as well as soap and a bucket. Also among the items were candles and box matches to deal with the power outage.



### Earthquake in Coastal Mexico

On 08 September 2017, a massive earthquake with a magnitude of 8.1 hit Mexico. The epicenter was in the Pacific Ocean, 1,000km southeast of the capital. The southern states of Chiapas, Oaxaca, and Tabasco are located closest to the epicenter. In response to this catastrophic quake, AMDA dispatched a doctor and a nurse from Japan. After procuring relief goods and medicine in Mexico City, the two (with a help of a local coordinator and Tenrikyo Mexico members) flew to Juchitan, one of the most devastated areas. Upon arriving in Juchitan, the team conducted medical relief in local towns including La Quinta and La Septima.



### Earthquake in Central Mexico

Just after the earthquake hit the coastal Mexico, another huge quake hit the nation's central area. AMDA sent a coordinator once again to Mexico City to carry out medical relief. Upon arriving in Mexico City, the AMDA coordinator met with a local partner, Tenrikyo Mexico Office, to have a briefing session for further assistance. The disaster assessment revealed that although regions around Mexico



City had not been seriously affected, the extent of damage due to the earlier quake in Oaxaca was worsened by the earthquake that followed. Thus, the team flew to Juchitan to conduct follow-up activities. As items such as diapers for both babies and adults, sanitary napkins and tarpaulins were in short supply, the team procured them in Salina Cruz before entering Juchitan. The team provided relief aid at Coloniade 5 de Febrero, one of the impoverished areas, as well as at a local evacuation center in La Novena Seccion.



### Typhoon Urduja in the Philippines

On 16 December 2017, Typhoon Urduja, which hit Samar in central Philippines caused extensive damage to the area. NDRRMC (National Disaster Risk Reduction and Management Council) reported that over one million people were affected by the disaster and 100,000 were forced to flee their homes. AMDA dispatched a nurse and a coordinator to the Philippines from Japan to work mostly in the

severely-affected Biliran region. The team distributed food items to approximately 700 households in Cebu on 22<sup>nd</sup> of December. In the next two days, AMDA jointly worked with the Philippine Naval Reserve Command and local partners, distributing packages to the affected people in eight districts of Naval City, Almeria City and Biliran City. Despite such difficult circumstances, the local people said, "Merry Christmas! Thank you very much," after receiving the items.



## Typhoon Vinta in the Philippines



In response to the devastating typhoon that struck the whole island of Mindanao in the southern Philippines on 22 December 2017, AMDA sent a team of relief personnel to Cagayan de Oro in the Province of Misamis Oriental. Following the Tropical Storm Kai-tak (Urduja), the heavy rain caused by Typhoon Tembin (Vinta) that hit the Philippines just before Christmas caused

a heavy flood in the region, badly flooding the city downstream. On the 27<sup>th</sup>, AMDA team distributed food and relief supplies with the Philippine Army to eight out of 10 areas in the city where proper aid was not yet provided. According to the Philippines' Department of Social Welfare and Development (DWSD), approximately 770,000 people living in 1,131 districts were affected, and more than 110,000 people were forced to evacuate their homes (as of 30 December 2017).



## Mayon Volcanic Eruption Medical Relief, Philippines

On 08 February 2018, in response to the Mt. Mayon volcanic eruption in Albay Province, South Luzon, AMDA collaborated with Albay Medical Society, Rural Health Unit of the National Disaster Risk Reduction and Management Council (NDRRMC), Bicol University and the local chapter of Asian Medical Student Association (AMSA) to

provide assistance on the ground. Toyota Vios Group also supported the mission. The joint team carried out medical relief in Camalig which is located 500 kilometers south of Mania, a city at the foot of the volcano. At a local evacuation center, the team offered mobile clinic services and taught the evacuees how to prevent themselves from various ailments in the midst of prolonged evacuation life. The team also provided food supplies, as well as pails and soap to make up for the lack of clean water.



## 2) Post-Disaster Assistance

### The Great East Japan Earthquake (2011~)



On 11 March 2011, an earthquake of unprecedented scale (mag.9.0) followed by a massive tsunami wiped out the eastern part of Japan which resulted in 15,800 deaths and another 2,500 people missing. AMDA launched emergency relief in Sendai, Miyagi Prefecture on the following day the quake struck. Throughout the relief, AMDA sent 149 personnel to various locations. The emergency relief went on until the end of April, followed by various post-disaster assistance activities, some of which are still being continued to this day. More than six years on, the affected regions have entered a transitional phase where people have moved from make-shift residences to council housing or new houses. The pressing issue for now is how to rebuild local communities that are facing the problem of a dwindling population, which also implies that the overall manpower for the reconstruction of the region may be lacking.

### Wheelchair Assistance for 2015 Earthquake in Central Nepal



The deadly earthquake (magnitude 7.8) that hit Nepal on 25 April 2015 left more than 8,500 people dead and over 22,000 people injured. It was the worst natural disaster to strike Nepal since 1934. As many towns and villages were flattened throughout the country, AMDA commenced a Multi-national Medical Mission to help numerous people who were forced to flee their homes. Some of the afflicted people were impaired by the injuries they suffered. A Japanese physiotherapist residing in Nepal was asked to join AMDA's relief effort in providing wheelchairs and other devices. Not only handling the logistics, he was also

in charge of making some of the gear by himself. Ever since, he has been administering a wheelchair-related project to help supply wheelchairs to those in need.

### Acupuncture for Quake Rehabilitation – 2016 Kumamoto Earthquake, Japan



In response to the earthquake (mag. 6.4) that struck Kumamoto, Japan on 14 April 2016, AMDA carried out post-disaster relief in Mashikimachi, the hardest-hit town in the area. AMDA's activity hub was a local elementary school (Hiroyasu Elementary School) where more than 200 people sought shelter. Besides providing medical services, what made AMDA's activities one of a kind was offering acupuncture to the victims, and especially the staff at the city center who were doing all they could to help the residents despite the fact that they too were affected by the quake. This eventually became even more

meaningful as the shelter life got prolonged. For the civil servants who had no time to rest for days and months, the service soothed their bodies and minds.



### Free Dental Mission in Haiti

On 03 February 2018, AMDA Haiti conducted its annual dental mission in Fond-des-Negres, Haiti for the people living in the vicinity. The patients came from nearby areas such as Aquin, Marseillan, Pemele, Saint Lous du Sud, Lacolline, Demustte, Didier, Lindor, and Riviere Sesche as well. Just as last year, it

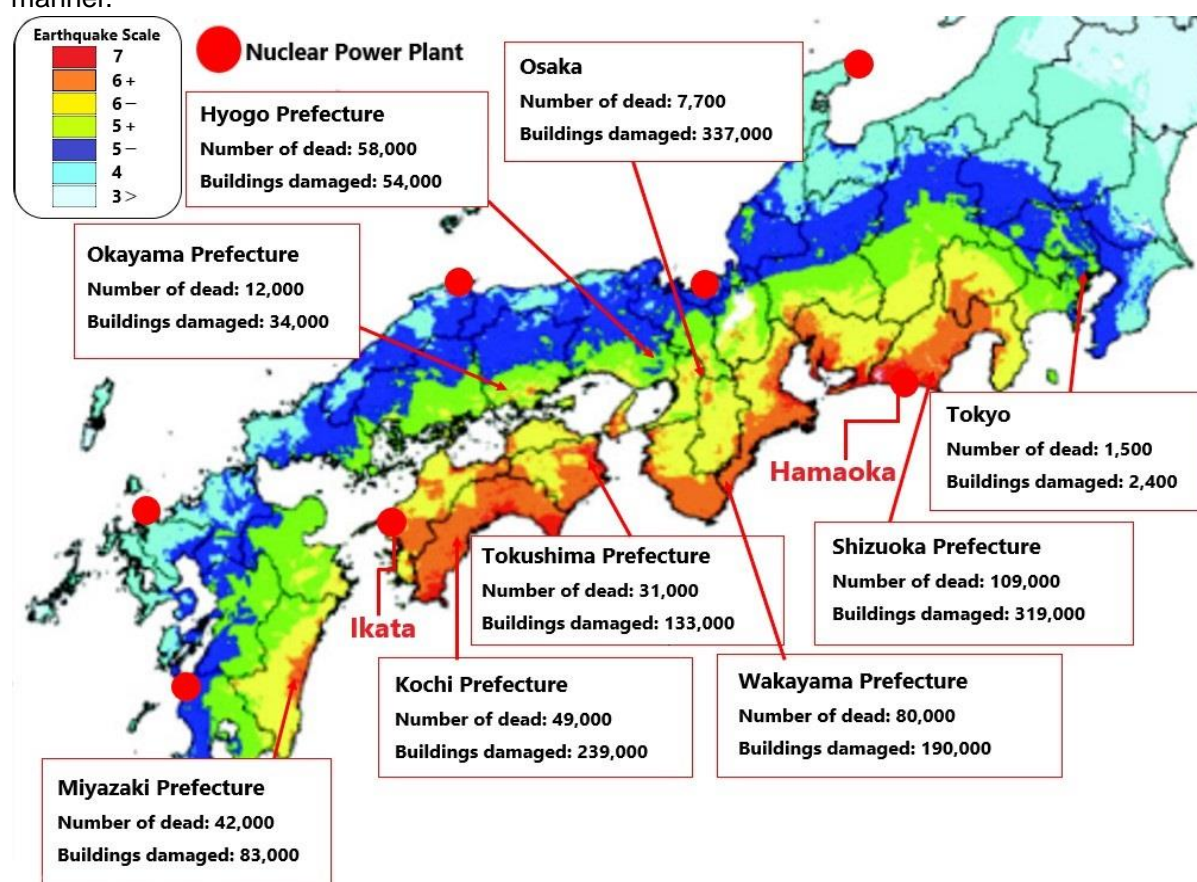
was held at Bethel Clinic run by the Salvation Army. 42 patients came to receive dental treatment and care, including oral examination, dental clean up, dental restoration, and tooth extraction. One of the staff, a dental student who took part in the mission, also gave guidance on how to protect oneself from tooth decay and taught the patients how to keep their teeth clean.



### 3) Disaster Response Platforms

#### AMDA's Platform for the Great Nankai Trough Disaster

The Japanese government predicts that an earthquake of immeasurable scale will strike Japan along the Nankai Trough within the next 30 years. It is predicted that the quake will cause a massive tsunami that could devastate the southern coastline, resulting in over 300,000 deaths and two million buildings damaged. AMDA's focus is on the Shikoku region (Kochi and Tokushima in particular) given that, 1) access to the area will be difficult once the disaster strikes, and 2) aid assistance is expected to be concentrated in Osaka and Nagoya as they are major cities with easy access. By enhancing interactions between aid organizations, local governments and medical institutions, the platform enables a swift response to the crisis and provides assistance in a timely manner.



**The Structure of World Platform for Disaster Medicine**

Category	UN	International Organizations	Government Organizations (GOs)	Medical Associations (MAs)	NGOs/NPOs	Academic Institutions	Enterprises
e.g.	1.WHO 2.UNOCHA 3.UNISDR 4.UNHCR 5.UNRWA	1.World Bank 2.Asia Development Bank	1.Ministries 2.Militaries	1.Local Medical Doctors	1.Local NGOs/NPOs	1.Government Universities 2.Private Universities	1.Public Service Groups 2.Private Companies
Purpose	Advocacy based on AMDA's UNECOSOC General Consultative Status	Funds	Access Logistics Security Human Resources	Medical License Nationwide Network	Local Initiatives Human Resources Funds	Networking Human Resources	Funds Networking



#### 4<sup>th</sup> Post-disaster Acupuncture Training Program

As it has been some time since acupuncture was incorporated into AMDA's relief efforts. AMDA holds an annual workshop for acupuncturists who are keen to contribute to the humanitarian cause by utilizing their clinical skills. From 22-23 July 2017, AMDA organized the 4<sup>th</sup> Post-disaster Acupuncture Training Program in Okayama City with guest lecturers who had taken part in AMDA's relief



work. Among the panelists were Professor Kenji Imai of Teikyo Heisei University who explained the practicality of acupuncture treatment in evacuation centers, as well as the team of AMDA acupuncturists from Kumamoto who shared their first-hand accounts on the quake relief, to name a few. In one of the presentations, acupuncturist Kanako Sasaki who heads AMDA Otsuchi Health Support Center in Iwate, talked about the importance of seeing things through the eyes of patients. Sasaki herself is a survivor of the Great East Japan Earthquake in 2011 where she was saved miraculously despite being swept out to the sea by the tsunami that struck the entire coasts along the Tohoku region. On the second day, participants thoroughly discussed what can be done to improve their service in the disaster locations.

#### The 4<sup>th</sup> Coordination Meeting for AMDA's Platform for the Great Nankai Trough Disaster in Okayama, Japan



On 23 July 2017, the 4<sup>th</sup> Coordination Meeting for AMDA Platform for the Great Nankai Trough Disaster was held at the Okayama International Center in Okayama, Japan. The meeting focused on how much preparations have progressed for the Nankai Trough crisis. The current progress was reported on all facets of the Platform ranging from the structure of medical assistance to the current

stock of relief supplies. Participants shared new ideas on efficient disaster response including a simulation using a helicopter. A lively discussion took place in which all participants were eager to share their views. 300-plus audience was mainly from the Platform's participating organizations with some being non-members that were keen to learn about disaster relief in general.

## 2. GPSP Soul and Medicine Program



AMDA believes that healing a human soul is essential to peace building. To pay tribute to war victims, AMDA has held GPSP Soul and Medicine Program in past battlefields around the world. The program has a two-fold purpose: 1) to conduct a multi-religious memorial service to pay tribute to those who suffered or died in conflicts and wars, and 2) to provide medical services to present communities. In 2005, the concept was expanded to include natural disaster victims as a result of calamitous tsunami that hit South Asia on 26 December 2004. Since then, AMDA has held a memorial service in the locations where AMDA conducted emergency relief.

### GPSP SMP in Mongolia 2017 (Gandan Monastery, Ulaanbaatar)

On 04 September 2016, the GPSP Soul and Medicine Program in Mongolia was held for the ninth time to commemorate the victims of the Battles of Khalkhyn Gol which took place in 1939. The ceremony was attended by both Mongolian and Japanese priests to offer peace prayers for the realization of better world. Regardless of what one's race or creed may be, AMDA is determined to spread the spirit of "Open Sogo-Fujo", a concept which embodies mutual assistance in the most accessible manner.





# B. Health Development



## 1. Primary Health Care

GPSP is promoting healthcare and awareness for people living in poverty or in places where health literacy is low. AMDA's primary healthcare brings people back to health in many parts of the world where basic medical care is scarce. At the same time, GPSP is also active at educating people about health which is indispensable for the prosperity of the entire community.

### AMDA Peace Clinic, Bodhgaya, India



AMDA Peace Clinic in Bodhgaya (APC) has been providing various community health and social development services to the people of Bodhgaya, especially in the Mastipur area, since its launch in 2009. APC had initially provided Ayurvedic treatment as its main service. However, as needs from expectant mothers were increasing in the locality, the clinic shifted its focus on maternal healthcare. Since 2014, APC has conducted a home visit program for mothers-to-be, alongside an educational workshop on delivery and child-rearing. The clinic also holds a dental checkup for local residents on a regular basis. APC has now taken root in the community and is serving people by providing quality healthcare services to the impoverished.



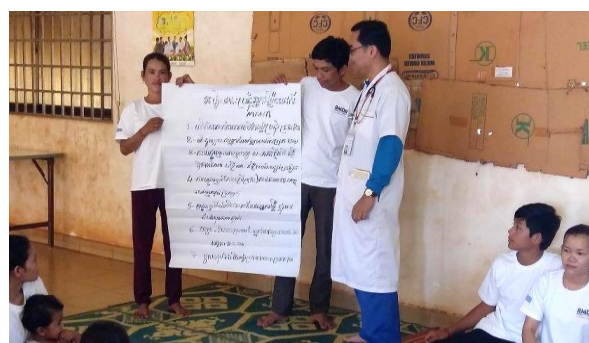
## Pakistan Home Health Education Program



The goal of this project is to improve hygiene and health in the remote areas of Pakistan by educating pre-marital women. It is an attempt at training these women to become peer health educators in their own communities. (Funded/organized by AMDA, Chigasaki Chuo Rotary Club (Japan), National Rural Support Programme (Pakistan))

## Health Promotion Activities in Cambodia

In cooperation with Provincial Health Department of Tbong Khmom, AMDA Cambodia organizes a workshop at the Center for Peer to Peer Educators on HIV/AIDS. Aiming to promote HIV/AIDS prevention, the effort is realized through the network of peer educators and those who are living with the disease. For this year's event, 60 people attended the workshop of which 50 of them were from the said network. The gathering helps refresh their basic knowledge on HIV/AIDS and encourage the patients to receive the antiretroviral treatment on a regular basis. The project is made possible thanks to the continued financial assistance from Yamaichi Kanko, a Japanese travel agency that has long supported this program. AMDA Cambodia also runs a soccer club to encourage young people to take part in sport activities. Not only does it foster healthy body and mind, it also allows to divert the youths from drugs, violence and other criminal activities.



## 2. Medical Partnerships

### Japanese Doctors' Contribution to Regional Medicine in Rwanda

Under the subsidy of Okayama Prefecture, in September 2017, AMDA sent a group of Japanese doctors to Rwanda to pass on their expertise in pediatrics, and transfer the school medical-check system standardized in Japan. This is part of Okayama Prefectural Government's International Contribution Project for Local-to-Local Technical Transfer, which, at this time, aims to transfer Japanese medical expertise.

The doctors were sent to the western part of Rwanda and Kigali. At Umuco Mwiza School, the Japanese doctors conducted student medical examinations, and discussed how pediatrics can be improved in Rwanda based on their assessment.



### Training at Ulaanbaatar Emergency Service 103

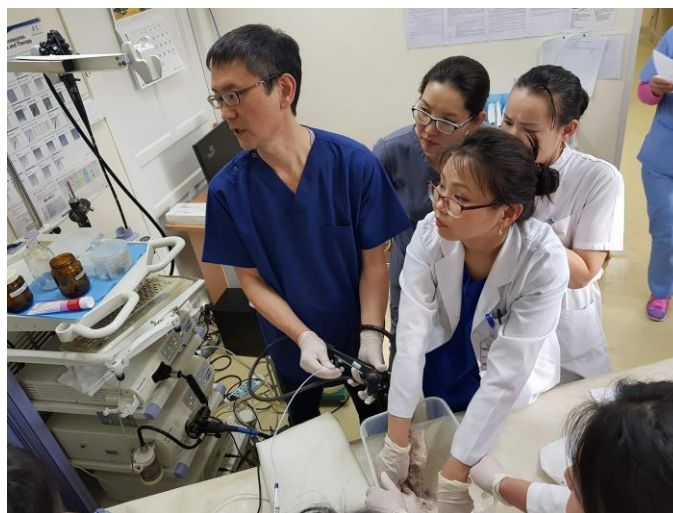


From 09-10 September, Dr. Takushi Sato from University of East Asia in Japan, held a two-day seminar on emergency medicine in partnership with Ulaanbaatar Emergency Service 103. On Day 1, about 100 officials and emergency doctors from Ulaanbaatar's 20 Health-Department-certified medical institutions participated in the seminar. At the beginning of the event, AMDA was credited for helping to set up 103's ER base within the Japan-Mongolia Friendship Hospital.

This allowed ambulances and doctors to always be on standby, and hence, technical exchange of this kind was considered to be something worth continuing with both parties' contributions. Dr. Sato began his lecture by introducing the history of disaster medicine in Japan, followed by the guidance on external injury treatments. He also demonstrated thoraco abdominal ultrasound examinations. On Day 2, Dr. Sato took himself to the field where he rode in an ambulance with a local medical team to conduct practical training. Mr. Purevdash, the director of 103, expressed his deep gratitude to Dr. Sato's contributions and AMDA's support, hoping that this project will be continued next year as well. As a result, it was promised that this initiative will continue until the summer of 2019 as a yearly event.

### Endoscopy Training at Mongolian National University of Medical Sciences

Based on the partnership with Mongolian National University of Medical Sciences, AMDA held endoscopy training which showcased Japan's cutting-edge medical techniques, namely, endoscopic treatment and examination. The two-day training session (11-12 September) ended successfully, receiving a fervent request to have it made into an annual event. The university is scheduled to establish an endoscopy center at its hospital next year.



One of the officials said, "It is not exaggerating to say that we want him to visit us every month as we still have a lot to learn from him." Accordingly, AMDA promised the university to send Dr. Sato for the endoscopy training every summer until 2019.



### Medical Lecture for AMSA Mongolia Students

On 08 September, Dr. Sato held a lecture for medical students (AMSA members) on emergency medical relief at Mongolian National University of Medical Sciences. Based on his vast experiences in Afghanistan, Sudan, Cambodia, Nepal, and Kumamoto, Japan, where devastating earthquakes struck in 2016, he emphasized the importance of the roles of doctors serving the affected. After the lecture, some of the students showed their willingness to take part in volunteering overseas, which proved that the lecture raised their spirit as future doctors.



### Ultrasound Examination in Dambadarjaa



Japan-Mongolia Friendship Hospital teamed up with a local family hospital to organize a home-visit ultrasound examination program in the Dambadarjaa district. The joint team visited three families in the area whose family members had a potential abdominal problem. Dr. Oyunchimeg who heads AMDA Mongolia was impressed with the way the team handled the examination, stating that Dr. Sato's instruction was already visible in their practice.

### Training for Nepalese Doctor in Okayama, Japan (September-November 2017)

Under the subsidy of Okayama Prefecture, one gynecologist from Nepal was invited to learn about Japan's medical technology. During her two-month stay, she received training on gynecologic laparoscopy. She was eager to take back what she learned to Nepal. The doctor works for AMDA Damak Hospital, located 500 km east of Kathmandu, the capital. From now on, it is hoped that people would no longer have to travel to Kathmandu for advanced gynecologic treatment. She is determined to uplift the services for pregnant women in Nepal and help transfer the expertise she attained to her fellow gynecologists back home.



### Endoscopy Training at AMDA Damak Hospital in Nepal

AMDA sent Dr. Sato, a Japanese endoscopy expert, to AMDA Damak Hospital in Nepal to organize a practical training session for the local doctors. Among the avid participants was a Nepalese doctor who received training in Japan in 2016 under the subsidy of Okayama Prefecture. The aim of this training was to share and develop endoscopy techniques in the



city, which helps improve the quality of upper digestive tract examinations and other relevant tests. During the session, the group saw 22 patients from ages 20 to 75 who had abdominal abnormalities. Eight months later, endoscopic devices were introduced to the Damak hospital from AMDA Headquarters which gave the Nepalese doctors more practical opportunities to hone their skills. It is hoped that the hospital will become a hub for those who seek endoscopic examination in the locality.

## 3. Medical Mission

### Free Cleft Lip & Palate Operation in Indonesia



For three years in a row, AMDA International teamed up with its long-time partner TaiwanIHA (Taiwan International Health Action), to conduct Cleft Palate and reconstructive surgery free of charge in the Bantaeng region of Sothern Sulawesi. Similar to the previous year, Noordhoff Craniofacial Foundation (NCF) and Chang Gung Memorial Hospital (CGMH), both from Taiwan, also played a major role in supporting the mission in Bantaeng. AMDA and TaiwanIHA have been collaborating on various dental, cataract and cleft palate projects in many different countries such as Sri Lanka, India, Turkey and Indonesia. AMDA Indonesia selected Bantaeng for this year's mission in the southern part of Sulawesi.



### Orthoptic Medical Transfer in Mongolia

Since 2008, AMDA has provided eye-checkups for children residing in Ulaanbaatar and its suburbs. The project aims to promote the importance of institutionalizing eye-checkups for pre-school children in Mongolia. In September 2017, AMDA held a yearly checkup at Guchin-Us Village in Övörkhangai, an 11-hour drive from the capital. (The program was supported by Zinrui Aizenkai Mongolia Center.) The team, led by orthoptists from Kawasaki University of Medical Welfare in Japan, saw 113 people, 78 of whom were children aged 5 to 17. In acknowledgment of AMDA's years of effort, the health ministry held a press conference to announce the enactment of school eye-checkup institutionalization, setting 15 September as "Children's Eye Day".



## 1) AMDA GPSP Hospitals

### AMDA Damak Hospital (Nepal)



AMDA Damak Hospital is a 75-bed general hospital, established in 1992 with the help of AMDA International and the Damak Municipality. In 1995, it became an implementing partner of UNHCR, serving as a primary referral hospital for

Bhutanese refugees in addition to the local patients. By then, AMDA-Hospital became a popular hospital in eastern Nepal that provides services, not only to the refugees and the locals, but also to people from remote districts. The hospital provides services pertaining to anesthesiology, general medicine, surgery, gynecology, radiology, pediatrics, orthopedics, ENT, dentistry, orthopedics, etc. This hospital accepts medical students from different countries for learning opportunities.



### Siddhartha Children and Women Hospital

(Nepal) Siddhartha Children and Women Hospital is a 100-bedded specialized hospital for women and children. It is close to Lumbini, the birth place of Lord Buddha. The name “Siddhartha” is the childhood name of Lord Buddha. AMDA Nepal established this hospital after signing a partnership agreement with the municipality and the local chamber of

commerce. This hospital also offers non-profit health care. The main hospital buildings were constructed with the financial support from the Japanese people.

### AMDA Mechi Hospital (Nepal)

AMDA Mechi Hospital is located in the southeastern corner of Nepal. With the hope of improved medical services in the area, a family donated their private land for the construction of the hospital. The Embassy of Japan and a few other donors also provided assistance. Now, AMDA Nepal is operating it as a general hospital with a capacity of 15 beds. The hospital now offers academic training for paramedics (lab assistance) to enhance their services.



Japan Bangladesh Friendship Hospital



Japan Afghanistan Friendship Hospital

### AMDA GPSP Hospitals Around the Globe

- Siddhartha Children and Women's Hospital (Nepal)
- AMDA Damak Hospital (Nepal)
- AMDA Mechi Hospital (Nepal)
- Japan-Bangladesh Friendship Hospital (Bangladesh)
- Japan-Afghanistan Friendship Hospital (Afghanistan)



# C. Educational Support

## 1. Global Human Resource Development

### AMDA Students Club



Founded in 1995, AMDA Students Club is a student group that holds a meeting every month to discuss issues such as international cooperation or disaster prevention. Comprising senior school students from Okayama and its neighboring regions, the group carries out a range of activities from street fundraising to exchange programs abroad.

### AMDA Peace Building Programme in Sri Lanka



In 2017, members of AMDA Students Club visited Sri Lanka to partake in the AMDA Peace Building Programme in Sri Lanka, a yearly event aimed at deepening the mutual understanding of students from different ethnic and religious communities. Through sport activities as well as cultural and religious exchange programs, children from Matale, Kilinochchi, Trincomalee and Japan worked together in joint teams to foster friendship. While learning to respect the colorful ethnic backgrounds, all of the participants realized that smiles are a common language that transcends unspoken barriers that lay within. It is greatly hoped that they will strive to make a peaceful world,

## Student Internship



For 2017, one high school student from Singapore and one university student from Japan did an internship at AMDA Headquarters in Okayama. Both were eager to dedicate themselves to the field of humanitarian assistance and hope to continue working or helping people as volunteers even after their internships are over.

## 'Kodomo Shokudo' Support Platform



Literally translated “children’s cafeteria”, ‘Kodomo Shokudo’ is a voluntary-run canteen for children from single-parent families or impoverished households that offers nutritional meals for free or at a reasonable price. While similar facilities have been set up around Japan one after the other, AMDA has been supporting one location in Okayama by donating funds or ingredients since December 2017.

## 2. Scholarship Programs

For many years, AMDA has supported students who are persevering difficult times following natural and man-made disasters. Until now, the beneficiaries of AMDA’s scholarship programs have been mainly students who wish to pursue a medical career. In the GPSP framework, AMDA encourages its international chapters and GPSP member-organizations to establish scholarship programs, preferably self-funded. The GPSP network helps find donors and/or provide necessary support.

### **SUGANAMI Scholarship**

SUGANAMI Scholarship was established in 2004 for capable young medical and nursing students around the globe who are in need of financial assistance to complete their study.

*(Suganami Scholarship Recipients in Mongolia)*





# D. Livelihood Support

## Organic Farming



### AMDA Food Program

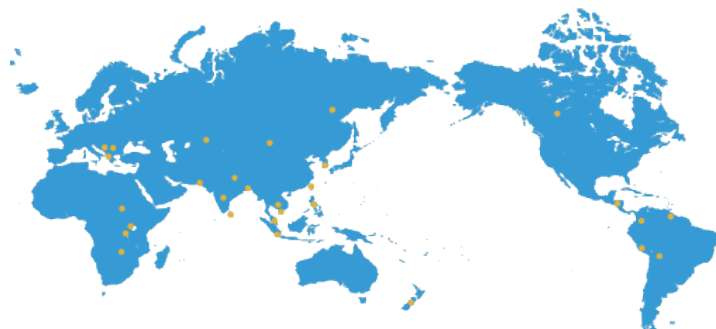
*"Food is the source of life"* –This motto embodies the AMDA Food Program, which was launched in order to spread organic farming in Asia. In 2011, AMDA opened AMDA Notoro Farm in Shinjo Village in Okayama, Japan. The village enacted an ordinance called “Asian Organic Agricultural Platform Promotion Act” in 2010. Likewise, another organic farm was launched in Malino in South Sulawesi, Indonesia in February 2014. There, both Japanese staff and local farmers are working hand in hand to uplift the level of agriculture in the region. While the program is providing Indonesian farmers with training opportunities in Japan, Japanese agricultural experts are regularly invited to Malino to give guidance.

### AMDA Livelihood Support Projects in Suripur, India



AMDA Peace Clinic in Bodhgaya (APC) has been providing various community health and social development services to the people of Bodhgaya in the state of Bihar since its launch in 2009. As a part of its livelihood assistance, AMDA recently built a bore well in the village of Suripur. The well was built to supply water to elderly households and farms in the village. Similarly, Tasho Isshinji Temple of Nichiren Buddhism decided to offer a gathering place to local residents where they can get together and offer prayers. Hinduism is indeed the pillar of their daily lives and it was their ardent wish to have a place where they could enshrine Durga, a Hinduist guardian god that exorcizes evil. The idea came up during a discussion between AMDA and the locals who wished to have such a facility.

International Network of 32 chapters and 71 collaborating  
organizations around the world



### International Chapters

Afghanistan	Indonesia	Serbia
Albania	Kazakhstan	Singapore
Bosnia & Herzegovina	Korea	Sri Lanka
Bangladesh	Kosovo	Sudan
Bolivia	Malaysia	Taiwan
Cambodia	Mongolia	Uganda
Canada	Nepal	Vietnam
Colombia	New Zealand	Zambia
Guyana	Pakistan	
Haiti	Peru	
Honduras	Philippines	
India	Sakha Republic	

### AMDA Group (Japan)

AMDA MINDS, AMDA International Medical Information Center, AMDA Organization for Global Assistance and Relief, AMDA Hyogo, AMDA Okinawa Chapter, AMDA Kanagawa Chapter, AMDA Kamakura Club, AMDA Kochi Club, AMDA Fukuyama Club, AMDA Tamano Club, AMDA Otsuchi Club, AMDA Kobe Women's University Club, AMDA Takehara Club, AMDA Students Club



3-31-1 Ifukuchou, Kitaku, Okayama City,  
Okayama 700-0013 Japan  
TEL: +81-86-252-6051 FAX: +81-86-252-7717  
E-mail: [info1984@amdainternational.com](mailto:info1984@amdainternational.com)  
URL: <http://en.amda.or.jp/>  
Facebook: <https://www.facebook.com/AMDA.international/>