

PROJECT DESCRIPTION

HEALTH CARE FOR VULNERABLE PEOPLE YANGON, MYANMAR





Sponsorship and project management

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Keywords

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Project

The Clinics of our partner organisation Medical Action Myanmar (MAM) are facing a huge increase in demands for clinic services. The clinics are all located in the slum areas of the capital Yangon, Myanmar. More and more impoverished communities are learning about MAM's free health care services and rely on them for life saving treatment against diseases and other health problems. Demands for more doctors, more medicine and more support are all increasing. With additional financial support, we can offer more vulnerable people free health care service for treatment of malnutrition, HIV, tuberculosis etc.

Foundation board

Susanne Schroff, Chair of the Foundation

Corinne Fischer, Vice-Chair of the Foundation

Dr. Markus Kick, member of the foundation board

Dr. Thomas Kirchhofer, member of the foundation board

Hansruedi Merz, member of the foundation board

Milan Prenosil, member of the foundation board

Joachim Schoss, member of the foundation board

Dr. Melinda Spiesshofer, responsible for the medical section

Costs and Duration

During 2020 / \$ 90'000

Partial financial support for specific treatments is also highly welcome

BANK Accounts: SANNI Foundation

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1. Short Introduction of SANNI Foundation

The SANNI Foundation is a charitable foundation with a focus on Southern India and Myanmar, actively helping in the areas of education and medical care for children and women.

The SANNI Foundation supports as many children in India and Myanmar as possible in the long term by means of a fund, in order to give them a better life and positive future prospects.

True to our motto "help for self-help", the children stay in their families of origin but are provided support by the SANNI Foundation. The aim is that the children get a good education, because a good education is the key to the way out of poverty. But many families cannot afford the costs of the school. Even worse, many children are forced to work to ensure the survival of the family. Often the children and their parents are also sick and need medical care. Consequently, our focus is not only on the financing of education, but also on supplementary food packages, medical care, distribution of clothing and hygiene packages and above all loving care and intensive welfare.

Susanne Schroff was involved in her parents' foundation before founding the SANNI Foundation in Switzerland in 2010, where she has been living for many years. The Schroff Foundation, founded in 1989, supported a mobile diabetes ward of St. John Health Services in Trivandrum, India for 20 years. With the help of the head of St. John, a dedicated priest, the SANNI Foundation significantly expanded its activities in Trivandrum (including foundation of a clinic, Health care and education center for children and women etc.).

Since 2014, the SANNI Foundation has also been active in Myanmar and is committed to providing services to underprivileged people, especially women and children. Referring to the principle of implementing projects with local confidants, the SANNI Foundation supports a medical aid organization, Medical Action Myanmar (MAM), who operate a network of clinics and community health workers to freely treat patients from the baseline.

All administrative costs are borne by SchroffInvest. The entire foundation council and all ambassadors are active as volunteers. One hundred percent of the donations are used for the needy

2. Activities in Myanmar

2.1. Our local partner: Medical Action Myanmar

Medical Action Myanmar (MAM) is a non-profit, medical organization, established in 2009. The initiative is from Dr Frank Smithuis and Dr Ni Ni Tun (previously with Médecins sans Frontières in Myanmar 1994-2009), who are working with a team of very committed and experienced health professionals. The main goal is to provide access to health care for the poor and most vulnerable people in Myanmar. MAM has established 10 clinics in urban and suburban areas across Myanmar and built a network of over 1,600 community health workers in remote areas, for general health including HIV and tuberculosis in poor urban and in remote areas. Above all, MAM





values are accessibility for the poor, patient dignity, proven cost-effectiveness, non-discrimination and replication of effective activities to a large scale.



A young child in SANNI's Lotus Clinic Day Care Ward



Paediatric Consultation

Together, SANNI and MAM have two missions:

- Child Sponsorship Program / Children fund: Provide vulnerable children, typically diagnosed with chronic diseases like HIV and living in poverty without any government support, with food, educational, household and hygiene support.
- Lotus Clinic: provides free health care with a strict non-discriminatory policy to treat anyone with medical services such as HIV and tuberculosis treatment, family planning, malnutrition care and blindness prevention.

Both missions focus on Hlaingthayar township, an industrial slum zone in the north west of Yangon. With extremely poor living conditions, unstable employment and lack of development, the population living here suffer and urgently need support. The SANNI Foundation also built an orphanage with MAM in 2016, where orphaned children, typically due to HIV, can find a safe and loving home.

What SANNI Foundation in Myanmar has achieved so far (based on January 2020):

- Over 350 children living in one of the biggest slums in the country are sponsored to receive food, health, education and household support
- Over 50 families were given solar panels, bringing electricity to their homes for the first time
- Many families have had their houses repaired in preparation for rainy and hot seasons
- Vocational training, academic tuition and business support investment are also available
- 10 orphan children are living in the SANNI-supported *Motherhouse* orphanage
- 340'800 consultations have been done in the 10 MAM Clinics where the lotus clinic is the second biggest one. Annually, there are more than 64,000 consultations at the Lotus Clinic, Myanmar. There are also over 500 patients receiving HIV treatment, over 8,000 children for malnutrition, over 4,700 family planning consultations for empowerment of women and 10 HIV+ mothers gave birth to HIV- negative babies



3. Main project

3.1. Overview

Over the past two years, patient consultations have significantly increased in all of the Medical Action Myanmar's clinics. For example, patient consultations in the remote Himalaya Clinic in Putao has increased by 345% in one year (2017: 5,338 consultations, 2018: 23,780). In southern Mon State, at the clinic in Winka, there has been 901% more consultations (2017: 953, 2018: 9,547). This is an exciting but challenging time and shows our services are reaching many communities who would have little or no access to life-saving health care.

In these areas, our clinics are vital for people living in poverty, who are orphaned, who are discriminated, who have no one else to support them, to have access to professional health care. Our clinics need to be able to continue their mission to provide for them. The clinics' services not only give vulnerable people the chance to be healthy, but it also means they are healthy enough to find a job, reducing poverty and increasing the quality of life.

However, the growing demand for our clinics' services are creating severe pressures on medicine stocks, the need for more doctors as well as the availability of clinical services. This is seen most in the significant increase for non-communicable disease treatment, such as asthma and diabetes. Asthma greatly affects the young people of Myanmar, and if left untreated the deteriorating condition of these children's lungs grows so severe, it will result in death. Diabetes is a serious threat mostly affecting the over-40 population and untreated it can result in loss of limbs and blindness, leaving them unable to care for their families.



With more funding, the clinics will be able to continue to treat the increasing number of patients in vital need of our support, with all the medication, doctor support and resources they need.

3.2. Treatment of children

Most diseases in children are respiratory infections (including tuberculosis), diarrhea, skin infections or HIV. All children who visit the clinic are examined for malnutrition. In case of malnutrition (with a mortality rate of 50% if not treated), they are treated and cared for according to international guidelines. Therapies include rehydration, getting used to eating 6 meals a day and treating underlying diseases (mostly TB or HIV). In addition to the treatment, attention is also paid to the living conditions of the children, especially orphans or children with single parents.

In the nutrition centre, malnourished children receive six meals a day. First, they receive rehydrating liquid in the form of a specially diluted milk formula (F75). Then a richly enriched milk (F100) and then "plumpy nut" a nutritious porridge, which contains all necessary nutrients. Thanks to this treatment, the chance of survival increases to over 90%.



3.3. HIV prevention and treatment

The Lotus Clinic and the other MAM clinics offer comprehensive HIV care for families and sex workers. HIV care covers all aspects of HIV care from testing and counselling to diagnosis, treatment of opportunistic infections and antiretroviral therapy. In the case of patients who undergo regular treatment but cannot afford travel expenses, food and transport costs are reimbursed.

The aim is to have a location where all services are available in order to increase awareness of the project. The patients should be able to lead a normal life, so that they are able to work again as quickly as possible and earn their own income. In other hospitals only a certain part of the treatment is available, and the patients must be referred to other hospitals for further treatment.

A special group of patients are HIV-positive pregnant women: HIV-positive women who go to hospital receive preferential treatment. You will immediately be offered antiretroviral therapy to treat your HIV infection. This treatment not only saves their lives, but also allows them to continue caring for their children. 0% of children born under MAM's care have been born with HIV from an HIV+ mother. Mothers are cared for in the program for 1 ½ year after the birth of the child.

4. Budget

Target Group and example clinical activities	Price (USD) per patient	Number of patients	Total cost (USD)
Local Population / Consultation	\$ 5.50 ¹⁾	2'000	\$ 11'000
Children with Malnutrition or infectious diseases	\$280 ²⁾	50	\$14'000
Infectious Disease Treatment: HIV	\$500	50	\$25'000
Non-Communicable Diseases Asthma	\$1.50 (price per inhaler and emergency asthma treatment)	5'000	\$7'500
Diabetes	\$0.01 (per first line medicine tablet)	1'000'000	\$10'000
One-year doctor salary	\$7'500 (per annum)	3	\$22'500
TOTAL (USD)			\$90'000

1) Per consultations / 2) Price for treatment for one year, including medicines, staff, laboratory costs, transport to the clinic and supplementary food



5. Control of implementation

MAM will send detailed reports on the status of implementation to the SANNI Foundation twice a year. Some of the foundation board travels annually to the spots to monitor the implementation of the projects. Intensive discussions are held with the project managers while they are visited. By inspecting the books, it is checked whether our funds are used according to the purpose. MAM is audited by a local and an international audit firm, which guarantees careful bookkeeping. The last visit took place in November 2019.



*SANNI's board of trustees and Friends during a inspection trip
Nov 2019*

6. Pictures



Doctor with Patient in Yangon Clinic



Training monks wait for a consultation



Mothers waiting for a consultation in Putao Clinic



Patients collect their medicine



Baby receiving special malnutrition food



Delivering medicine to our clinic by any means possible!



Medical staff preparing test results



Families waiting for consultations



Baby after treatment in Lotus Clinic



Preparation of medicine



7. Annex

7.1. Objectives of the Foundation

The purpose of the foundation is to promote the education of children and adolescents, to combat poverty and to promote health. The geographic focus is on developing and emerging economies because there, with modest means by European standards, the living conditions of many people can be improved.

7.2. Vision

Based on personal commitment, SANNI Foundation gives hope for a better future to people in need.

7.3. Mission

Integral projects are supported and accompanied in the long term, with respectful, direct and effective implementation being important. A local confidant, with an existing organization, implements the projects on site. The donations reach the needy one hundred percent. This is possible because the board members are working on an honorary basis and the administrative costs are taken over by SchroffInvest.

7.4. Principle

Our actions are based on the following principles:
Transparency, authenticity, effectiveness, efficiency

7.5. Values

Our actions are characterized by the following values:
Respect, joy, openness, honesty.

7.6. Administration Cost

100% of all donations are in favor of the needy. The administration costs are financed by the SchroffInvest. All board members of the foundation are volunteers.

